

### **What do I need to know before I go home?**

On the day of discharge you will be given three days supply of the required medications, see your local doctor for further medication prescriptions. An appointment will also be made for you to attend either the Outpatient's Clinic or your Consultant Neurosurgeon.

It is very important that you see your local doctor or the nearest Emergency Department if you have any of the following symptoms:

- Any ooze, redness or swelling around your operation site
- Drowsiness or confusion
- Numbness or tingling in your arms or legs
- Seizures
- Difficulty in talking or walking
- Unrelieved headaches
- Fever
- Sensitivity to light
- Nausea and/or vomiting

You **must not** drive any vehicle or operate machinery until the Neurosurgeon has told you that you may. This period of time varies depending on your particular condition.

### **Further Information**

If you have any questions during your stay please do not hesitate to talk to a member of the nursing staff, who will be only too pleased to try and assist you.

**The information in this pamphlet was compiled by:**

**The Department of Neurosurgery  
Westmead Hospital**

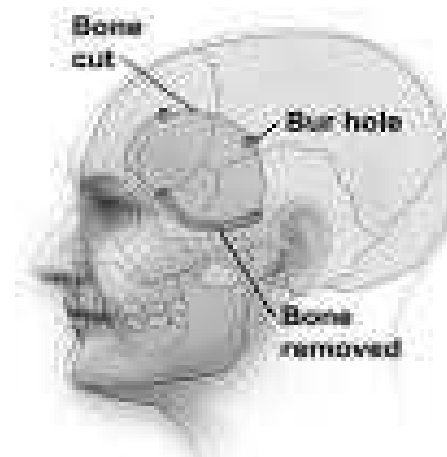
**Clinical Nurse Consultant  
Neurosciences  
Phone: 9845 9467**

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### **Understanding the management of a**

# **Craniotomy**



### **A guide for patients and their families**

The following pamphlet is designed to provide patients, families and carers with an overview and general information about craniotomies. This pamphlet is not intended to replace discussion with your doctor, nurse or other members of the health care team.

## ***What is a Craniotomy?***

A craniotomy is an operation attended by a neurosurgeon. It is a hole cut into the skull to provide access to the brain. This operation may be required for many reasons, such as, to remove a tumour, remove blood clots or a haemorrhage, relieve pressure from the brain following a head injury or to repair ruptured blood vessels. After the operation is completed the bone is usually replaced and the skin is stitched or stapled closed. Occasionally the bone is left out to allow for brain swelling. If this is the case, the bone is then stored and replaced at a later time.

## ***What will happen immediately after my operation?***

The length of time spent in theatre will depend on the reason for the craniotomy, after the operation you will be taken to the recovery room. When you wake up you will have various computer leads attaching you to a monitor, which monitors your heart rate, pulse and breathing. You will have

- an oxygen mask on your face
- a tube in the artery of your wrist to monitor blood pressure
- a drip in your arm to provide intravenous fluids
- a tube into your bladder to measure urine output

- a dressing and bandage on your head.

You will be asked frequent, simple memory questions to monitor alertness which may indicate brain swelling or bleeding. You will also be asked if you have any pain, and if so you will be given an injection to help relieve the pain. When your condition is stable you will be transferred to the Neuro/Trauma High Dependency Unit for specialist medical and nursing care.

## ***Post-operative recovery information.***

In the High Dependency Unit, the nurses will regularly assess your condition, and your doctor will review you each morning. You will possibly feel very tired and may have headaches and nausea. For these reasons we ask that your visitors are restricted to immediate family only, two at a time and only for short periods.

The physiotherapist will visit you the first morning after your operation to assist you with breathing and coughing exercises to prevent any problems with your lungs. You will be allowed to drink and progress to a normal diet when you feel well enough. You will be encouraged to get out of bed and assisted in the shower by the nurses in the first couple of days after your

surgery. You will be transferred to the neurosurgical ward when your condition has stabilised for further monitoring and recovery.

If you have any need to see our speech therapist, dietician, social worker or pharmacist, the nursing staff will notify them of your requirements.

Wound stitches or staples are generally removed 7 days after your operation whilst you are still in hospital. If you are discharged home prior to this, your local doctor will be able to remove the stitches or staples.

Depending on your progress you may require some rehabilitation at a suitable rehabilitation hospital or you may require further treatment as an outpatient. These options will be discussed with you if required.