



## Dietary Principles for Patients after surgery 外科手術後病人之飲食原則(英文)

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### Dietary principles:

1. Provide nutritional support as soon as possible to prevent complications and to promote wound recovery.
2. After the operation, food is provided based on patients' gastrointestinal tract condition, and usually patients are fed with rice soup and liquefied foods; and gradually to complete liquid diet. If it is all right with patients' condition, they may start eating semi-liquid foods and finally to soft or solid foods.
3. Provide sufficient energy: if there is no complication after the surgery, patients' needs of calories should increase 10%; if there is multiple fractures or trauma, increase calorie intake up to 10~25%.
4. Increase protein intake: after the surgery, protein intake should be 15 ~20%of the total calories in order to provide energy needed for protein depletion and wound repair caused by septicemia, infection, fever, and trauma.
5. High biological value protein like eggs, milk, meat, and poultry should take up 50% of your total protein intake daily; with another 50% from soy beans, soy beans products, and vegetable protein.
6. When patients are deficient of vitamin C, they could suffer from delayed or impeded wound healing and skin ulcer prone. Daily intake of 100~300 mg of vitamin C like guava, oranges, lemons, and green vegetables helps resolve the condition.
7. Vitamin A often promotes wound healing, maintains epithelial tissues, and prevents stress-induced gastric ulcer. Vitamin A-rich foods are cod-liver oil, liver, dark green and yellow vegetables and fruits.
8. Supplementary vitamin K such as leafy vegetables is to prevent Prothrombin time extension caused by insufficient vitamin K.

9. When there is increase with calorie and protein, patients should intake more vitamin B.
10. Adequate zinc: supplements like meat, live, and oysters; all contributes to wound healing.
11. Adequate water and electrolyte supplement prevents post-operative vomiting, bleeding, fever, exudating, sweating, draining, and increased metabolism caused by significant loss of body fluids.
12. Watch out for water and electrolyte balance once patients are troubled by fever.
13. Patients with poor appetite are often provided with temporary peripheral parenteral nutrition; but it should not last long because it may incur malnutrition.
14. For cases of indigestion and diarrhea caused by specific diseases, dietitian would design diets for them base on their nutritional condition in order to provide the most appropriate diet and to assist patients rehabilitate from the disorder.

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