

## How can you prepare for surgery?



One way to learn more about your surgery is to ask your doctor and care team questions.

### Here are some questions you may want to ask your care team:

- What medical and surgical options are available for me?
- Which is best for my situation?
- What are the differences between open, laparoscopic, and robotic-assisted surgery?
- Should I get a second opinion?
- What am I likely to experience after surgery?
- If I decide to have surgery, how can I prepare for it?
- How long before I can return to my normal routine?
- What is your surgical training and experience? What is your experience with robotic-assisted surgery?
- What are your patient outcomes?

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## What is colorectal surgery?

Colorectal surgery is surgery to remove a portion or all of your colon and/or rectum.

Types of colorectal surgery include:

- Colectomy (a procedure to remove the diseased portion of the colon)
- Low anterior resection (a procedure to remove the diseased portion of the rectum)

If you have been diagnosed with a colon or rectal disease, you should discuss all options with your doctor, including surgery.

### If you are a candidate for surgery, your surgeon may recommend:



#### Open surgery

Surgeon makes an incision in your abdomen large enough to see the colon and/or rectum and performs the procedure using hand-held tools



#### Laparoscopic surgery

Surgeon makes a few small incisions in the abdomen and operates using special long-handled tools while viewing magnified images from the laparoscope (camera) on a video screen



#### Robotic-assisted surgery

Surgeon controls the da Vinci system to perform the procedure

### References

1. Diverticular Disease Expanded Version. American Society of Colon & Rectal Surgeons. 6 May 2020. <https://fascrs.org/patients/diseases-and-conditions/a-z/diverticular-disease-expanded-version>.
2. The Facts About Inflammatory Bowel Diseases. Crohn's and Colitis Foundation of America. 6 May 2020. <https://www.crohnscolitisfoundation.org/sites/default/files/legacy/assets/pdfs/ibdfactbook.pdf>
3. Abscess and Fistula Expanded Information. American Society of Colon & Rectal Surgeons. 6 May 2020. <https://fascrs.org/patients/diseases-and-conditions/a-z/abscess-and-fistula-expanded-information>.

### Surgical Risks

Risks associated with bowel resection and other colorectal procedures (removal of all/part of the intestine) include leaking and/or narrowing at the spot where two sections of bowel were reconnected, colorectal or anal dysfunction (cannot empty bowel, frequent bowel movements, leakage or constipation).

### Important Safety Information

Patients should talk to their doctors to decide if da Vinci Surgery is right for them. Patients and doctors should review all available information on nonsurgical and surgical options and associated risks in order to make an informed decision.

Serious complications may occur in any surgery, including da Vinci Surgery, up to and including death. Serious risks include, but are not limited to, injury to tissues and organs and conversion to other surgical techniques, which could result in a longer operative time and/or increased complications. For important safety information, including surgical risks, indications, and considerations and

contraindications for use, please refer to [www.intuitive.com/safety](http://www.intuitive.com/safety).

Individuals' outcomes may depend on a number of factors, including but not limited to patient characteristics, disease characteristics and/or surgeon experience.

### Precaution Statement

The demonstration of safety and effectiveness for the representative specific procedures was based on evaluation of the device as a surgical tool and did not include evaluation of outcomes related to the treatment of cancer (overall survival, disease-free survival, local recurrence) or treatment of the patient's underlying disease/condition. Device usage in all surgical procedures should be guided by the clinical judgment of an adequately trained surgeon.

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## When it's time to consider surgery

Learn about your options for benign colorectal surgery.

**INTUITIVE** maker of da Vinci

## When it's time to explore your surgery options

If you're experiencing long-lasting or intermittent pain in your lower digestive tract, you're not alone. Many benign conditions can affect the large intestine, including those that affect the colon, and sometimes the rectum, as well. These conditions include diverticulitis, fistulas, and inflammatory bowel diseases like Crohn's disease and ulcerative colitis.<sup>1,2,3</sup>

If other options haven't provided relief for your colon or rectal (colorectal) condition, your doctor may recommend surgery. If you and your doctor are talking about surgery, robotic-assisted surgery with da Vinci technology is one option you may discuss. This brochure can help you understand what that means.



## What will my surgeon do?



If you and your doctor decide that robotic-assisted surgery is right for you, here is what may happen.

Actual incision size



During robotic-assisted surgery with the da Vinci system, your surgeon makes a few small incisions, and uses a 3DHD camera for a crystal-clear, magnified view of your colon and/or rectum and surrounding tissue.

Your surgeon sits at a console next to you and operates through the incisions using tiny instruments and the camera.



The da Vinci system translates every hand movement your surgeon makes in real time, bending and rotating the instruments so he or she can perform your colorectal surgery.

## What is the da Vinci system?

It is a surgical system with three parts:

### Surgeon console

Is the control center where your surgeon sits to perform the operation.

### Patient cart

Holds the camera and surgical instruments your surgeon controls from the console.

### Vision cart

Manages the communication between all the system components and provides a screen for the care team to view the operation.

## What are the outcomes?

Be sure to talk with your surgeon about the surgical outcomes he or she delivers using the da Vinci system, as every surgeon's experience is different. For example, ask about:

- Length of hospital stay
- Return to bowel function
- Complication rate
- Chance of switching to an open procedure
- Length of surgery

There are additional outcomes of surgery that you may want to talk with your doctor about. Please ask him or her about all important outcomes of surgery.

To find out more about outcomes of surgery with the da Vinci system, as published in clinical studies, visit the Colon Resection and the Rectal Resection pages on [www.davincisurgery.com](http://www.davincisurgery.com)

