

Post discharge

- Keep the operated site clean and healthy.
- Take all medicines as prescribed.
- Choose a loose hijab or turban or hat to cover the head.
- Continue deep breathing exercises at home.
- Gradually increase physical activity as advised by your doctor, physiotherapist or Occupational therapist.
- Do not drive unless permitted by the doctor.
- Follow up in the clinic on the appointment date given.



Report to the Accident Emergency Raja Isteri Pengiran Anak Saleha (RIPAS) Hospital.

- If you are having any fever or chills, headache or vomiting.
- Any redness or pain or fluid draining from the incision site.
- Increase sleepiness or confusion.
- Increase in weakness of the extremities, visual or speech problems.
- Occurrence of focal seizures or generalized seizures.
- Signs of any chest infection or urinary infection.

Scan to know more about Neurosurgery Department



CONTACT US

Operating Hours

Monday to Thursday 8am - 5pm
Friday 8am - 12pm
2pm - 5pm

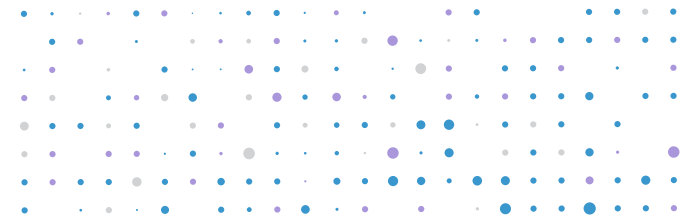
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CRANIOTOMY



Craniotomy

It is a surgical procedure where a part of the skull bone (bone flap) is removed using special tools. This allows access to operate on the brain and other intracranial structures. Usually the bone flap is replaced and fixed using mini plates.

Risks of Craniotomy



- Infection
- Bleeding
- Leakage of fluid surrounding brain (CSF)
- Swelling of brain
- Seizures
- Risks associated with anesthesia.

Pre-procedure checklist for patient

- Do give the doctor a proper clinical history, including investigations undergone, past surgeries or procedures undertaken, ongoing medical treatment (for control of diabetes, hypertension, heart disease, renal disease etc.).



- Report any sensitivity or allergy to medicines, latex, tape or anesthetic drugs.
- Inform the doctor if you are taking any medicines to prevent clotting of blood (Aspirin/warfarin/herbal supplement etc.)
- If you are a smoker, please stop smoking, as it has an adverse effect on post-operative recovery.
- If you are pregnant or think you are, do inform your health care provider.

Pre-procedure checklist for patient (cont.)

- A proper physical and neurological examination will be done by the treating physician.
- Surgical consent will be taken after explaining the proposed surgery, its possible complications and alternatives to surgery plan are discussed with patient or family.
- Anesthetist will also examine you to check if you are fit for the surgical procedure. Additional tests may be requested if considered important for the safe anesthesia.



- Consent for Anesthesia will be taken after explaining the risks of anesthesia.
- Consent for infusion of blood and blood products will also be taken by the treating physician.

Before the procedure

- The patient will usually be required to fast after midnight.
- A sedative may be given to reduce anxiety and get a good night's sleep.
- A chlorhexidine body wash may be advised in certain cases.



After the procedure

- Patient will be transferred to Intensive Care Unit (ICU) and Post operative Neuro Surgical Unit (PNU) for post-operative intensive monitoring.



- The head will be kept elevated and oxygen administered.
- There will be an indwelling urinary catheter and surgical drains.

- Post-operative medicines including analgesics to relieve pain, antibiotics to prevent infection and anti-seizure medicines will be given.



- Frequent pupillary checks and neurological examination will be done to assess the neurological state.
- There will be deep vein thrombosis (DVT) pump placed on both legs to prevent any venous thrombosis.
- Deep breathing exercises and incentive spirometer exercises will be started to improve the lung function and prevent pneumonia.



- Physiotherapists and Occupational therapists will assist in early ambulation and mobilization.