



HEALTH CARE

INPATIENT SURGERY REFERENCE

PRE-OP INFORMATION AND PERSONAL RECOVERY PLAN

Patient Name/Phone Number

Physician Name/Phone Number

Emergency Contact/Phone Number

PRE-SURGERY ITEMS

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Please bring the following with you:

- Social Security number
- Medical insurance card & policy information
- Prior approval or preauthorization form from your insurance company
- Name, address and phone number of employer
- Nearest Relative
- Emergency Contact
- Date and time of your surgery
- Where and when your tests were done, e.g., lab, X-rays, EKG
- List of major surgeries and approximate year
- List of allergies. Latex allergy? Yes / No
- List of medications (how much and when taken)
- Primary care physician: name and phone number
- List of instructions from your doctor, e.g., preparations you need to complete, hibiclens shower, enema, etc.
- Doctors' orders (if you have them)
- Conservatorship information: name and phone number
- Advanced Directive, Durable Power of Attorney for HealthCare (bring copy if have one)

DAY(S) BEFORE SURGERY

1. Arrange for someone to stay with you and assist you for the first week after you return home.
2. If you have children, make arrangements for them to stay at home while you are in the hospital. Pacific Hospital of Long Beach does not have any daycare or babysitting facilities.
3. Arrange to have a responsible driver, other than yourself, to drive you home when you are discharged from the hospital.
4. Request your family or friends to limit visitors to one or two adults on the day of surgery. A maximum of two visitors are allowed to visit you at one time during your hospital stay.
5. Follow your doctor's instructions regarding food, drink and medication the day of surgery. The following guidelines are recommended for patients who have not been given specific instructions from their doctor. Eating or drinking can cause a *delay or cancellation* of your surgery.
 - Do not eat, drink or chew gum within 8 hours before the time of your surgery, the night before surgery.
 - Do not drink alcoholic beverages within 24 hours prior to your surgery.
 - Do not use tobacco 24 hours before your surgery, although it is suggested you not use tobacco 30 days before surgery.
 - Take your blood pressure medication, heart medication, and seizure medication in the morning; on the day of your surgery with a small sip of water unless your doctor tells you otherwise. Also, use your inhaler and eye drops the morning of your surgery unless your doctor tells you otherwise.
6. Contact your doctor about taking your diabetic medication, blood thinners such as Coumadin and instructions regarding other medications and herbal medicine/supplements you take routinely.
7. Be sure to follow your doctor's instructions if you routinely take aspirin or other anti-inflammatory medications such as Advil, Aleve, Anacin, Buffer, Feldene, Motrin, or Naprosyn. Check with your doctor to see if he/she still wants you to take this medication.
8. Fill any prescriptions given to you by your doctor for use at home after surgery and leave them at home.
9. Complete an Advanced Directive.
10. Contact your surgeon if your condition changes or you become ill prior to your surgery.

WHAT TO BRING WITH YOU

1. Bring any brace or post operative equipment provided to you prior to surgery by your surgeon.
2. If you wear glasses, contacts, dentures, or hearing devices, please bring them with a storage case labeled with your name to ensure protection against loss or damage.
3. Loose fitting and comfortable clothes for returning home.

4. Shoes that you can slip on and off (slippers with tread are a good option)
5. Toiletries including a toothbrush, toothpaste, deodorant, shaver, brush or comb.
6. A current list of medications, herbs, or vitamins that you are taking. Leave all your medications at home, except your eye drops, inhalers, or birth control pills.
7. A calling card or cell phone for long distance phone calls.
8. One small suitcase or bag with a robe, slippers and toiletries, e.g., toothbrush, toothpaste, comb and brush. Space is limited.
9. Co-payment or deductible if applicable. This payment can be made by cash, check, or credit card.
10. Photo Identification.
11. Reading material.

WHAT NOT TO BRING WITH YOU

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1. Large sums of money and credit cards.
 2. Jewelry and other valuables. Remove all piercings.
 3. Electronic appliances such as a curling iron or hair dryer.
 4. Food, as you doctor may be putting you on a specific diet related to your condition or procedure.
 5. Children, as it is best not to expose them to the hospital environment.
 6. Do not bring any of your medications to the hospital.

CONSENT FORM

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Your surgeon will explain the details of your surgery, including its risks and benefits. You will be asked to sign a consent form. The consent form gives your surgeon permission to perform the surgery he or she discussed with you. It is important that you ask your surgeon questions so you will have a good understanding of the surgery.

DAY OF SURGERY

Before your surgery, you can play an important role in your health. Because skin is not sterile, we need to be sure that your skin is free of certain organisms. You can reduce the number of your skin bacteria by carefully washing before surgery.

1. Shower or bathe with Dial liquid soap. Wash your hair. Rinse your hair and body thoroughly. Pat yourself dry with a clean, soft towel. Avoid body lotions or makeup on this day.
2. Cut and clean under your fingernails.
3. Do not shave the area of your body where your surgery will be performed.
4. Brush your teeth, but do not swallow any water within 8 hours of your surgery time.
5. Perform pre-operative preparations that your doctor has asked you to do, e.g. taking an enema, or douching.
6. Plan to arrive at Pacific Hospital of Long Beach 2 hours before your scheduled surgery time or follow your doctor's orders. Please make sure you arrive on time to the hospital. We will make every effort to keep you updated on your surgery time, however delays are sometimes unavoidable.

When you arrive at the hospital, go directly to the Admitting Department, which is located near the front entrance of the hospital.

From the Admitting Department, you will be escorted to the Same Day Surgery Center. A nurse will help you complete the admission process. You will be asked to change into a hospital gown. During this time, an intravenous line will be started by the nurse, which is for administering medications. Sometimes body hair in the area involved with the surgery must be removed by clipping; this will be done by the staff before the surgery unless you are instructed otherwise.

During this time, you may be asked the same questions repeatedly by different hospital personnel. Please be patient and understand that this is done for your safety.

Your operating room nurse will accompany you to the surgical suite and stay with you throughout your surgery. The operating room staff will wear face and head coverings to keep the area germ free. The room will be cool. You will wear a head covering.

An anesthesiologist is a physician who administers the medication that puts you to sleep during the surgery. This person will talk with you about the type of anesthesia you will receive and answer any questions you may have.

POST SURGERY

After your procedure you will be transported to the Recovery Room. You will stay here and be supervised by a Nurse as you recover from the anesthesia medication. You will be hooked up to monitors and oxygen. The nurse will take your vital signs and instruct you on taking deep breaths. The Nurse will ask you to rate your pain on a 0-10 scale. With this scale, 0 is no pain and 10 is the most. This will help the Nurse to determine how much medication you need. You will stay in the Recovery area for 1-2 hours. Your family or friends will be notified that you are in Recovery, but will not be allowed to visit you in this area.

From Recovery, you will be transported by bed to your patient room. You will be greeted by your Nurse, who has already been briefed about you from your Recovery Room Nurse. Again, your vital signs will be taken and you may be hooked up to monitors and oxygen. The Nurse will periodically check your circulation and motion of your legs and feet. You will be cared for by professional nursing and support staff. You will be introduced to the unit, including instruction on how to call the Nurse and use of the bed and television controls. The Nurse will be available to answer your questions and to help you control pain.

Post operatively you could be wearing support stockings and/or pneumatic "pumps" stockings that will be applied to your lower legs while in bed to help promote good circulation. These stockings are worn throughout your hospital stay.

Once you have been admitted to the unit, then your family and friends will be notified that you can receive visitors. Again, a maximum of two visitors at a time is allowed in your patient room.

PAIN LEVEL

Our goal is to control your pain and make you comfortable. *Realistically, you cannot expect that you will be "pain free" after a procedure.* To monitor your level, we will again ask you to rate your pain using the 0-10 scale. Pain medication is given in three forms: Pill, injection, or intravenously depending on what your Physician orders. If you are in pain, don't wait until the pain becomes extreme to ask for medication. It may take several minutes for a nurse to be able to accommodate your request for medication.

Other patients may receive pain medications intravenously using a PCA pump, which the Nurse will orient you to. With this device you will have an active part in administering and controlling your pain. A machine holds the pain medication and it is connected to your existing IV line. By pushing the PCA button, you will receive a pre-set dosage of pain medication. Once you push the button, you will not be able to receive another dosage for a minimum of 15 minutes. If you push the button before 15 minutes is up, the machine will beep, alerting you that it is not time for another dose. Again, you will be instructed to use this to help control your pain, and NO ONE ELSE is to push this button for you.

DIET

Food that you can have after a surgery depends on the type of procedure that you have had. Pain medication and anesthesia can decrease the normal activity of the intestines. Generally, the doctor will order a liquid diet to start so as not to upset your stomach. We suggest drinking the liquids slowly, small amounts at a time to start. Once you are tolerating this diet, then you will be advanced to a regular diet. In some cases the doctor may restrict your drinking and eating, which is called NPO, meaning nothing by mouth, until you have bowel sounds. The Nurse will monitor this and report to your physician. Once you are cleared to eat a regular diet, the diet tech will stop by daily to review your menu and take your order for your next meal. You will also receive a menu on your meal tray.

ADDITIONAL HEALTH CARE TEAM MEMBERS

Along with your surgeon, you may have an attending doctor who will follow and see you on a daily basis. This doctor is responsible for your medical care and will consult with you on treatment decisions. Please feel free to ask questions during your surgeon's and/or attending doctor's visit, or relay concerns to your nurse.

Once you are in your patient room, you may also meet another member of your health care team. This may include Respiratory Therapist, Physical Therapist, Dietician, Case Manager, X-ray and/or Laboratory Technician depending on your treatment plan. Your nurse will also encourage you to turn, cough and deep breathe on a regular basis to increase your lung capacity and prevent lung infections.

DAY 1 AFTER SURGERY

The day after surgery is considered "Day 1" of your hospital stay. This will be a busy day, and you will meet more of the above mentioned health care team.

ORTHOPEDIC/SPINE SURGERY PATIENTS ONLY

As we mentioned, physical therapy is also important for your healing and usually starts the morning of "Day 1". The need for therapy is determined and ordered by your doctor. By moving the body and using your muscles this should decrease your pain and help increase your circulation to prevent your muscles from weakening.

Remember to bring any brace that you have been provided. The therapist will teach you the proper techniques for getting in and out of bed and for walking. This team member will also review any precautions that you may have due to your procedure. Precautions are certain tasks or movements that the surgeon doesn't want you to do for a specified time period to allow you to heal properly and prevent any further injury.

Other staff members that you may meet on this day include a Phlebotomist for the Laboratory. Your physician may order blood drawn for testing to ensure that your medical care and medications area appropriate. You may also be taken down to the Radiology Department or have an in-room x-rays as ordered by your physician.

Each patient will be visited by a Case Manager. Their job will be to consult with your physicians and other health care providers on your behalf to ensure that your needs are being met. The Case Manager will also facilitate any spiritual needs that you as a patient may request. Their job duties also functions to help patients and their families solve problems related to hospitalization and transition to your home environment. This team member will also communicate with your insurance company so they are aware of your progress and arrange for home care needs, as ordered by your physician, when you are discharged.

SUBSEQUENT DAYS FOLLOWING SURGERY

You will continue with many of the same activities from Day 1. If you have a drainage tube, it will probably be removed on 2nd post-operative day along with your bandage being changed for the first time. Again, your physician may order additional tests or procedures based on your needs.

You will continue to learn how to manage your daily activities and self care, just as you completed on day 1 and 2. Before discharge you will need to perform basic activities such as getting in and out of bed, walking, putting a brace on and off (if ordered by your doctor), and going up and down stairs (if you have them at home). This means that participating in daily therapy is ESSENTIAL to your recovery.

DAY OF DISCHARGE

On this day you will be given instructions and any prescriptions that you may need including care of incisions. You will be notified about when you will need to see your surgeon again.

Wounds must be kept clean and dry, and your dressing will need to be changed on a daily basis to prevent infection. When you are allowed to shower, you can tape a piece of plastic wrap over the wound to keep it dry. Do not apply any lotions, powders, or ointments on the incision unless you have been instructed to do so.

You will want to continue your walking activity at home (at least 3 to 5 times a day) and abide by instructions and precautions as you were taught during physical therapy. Over the next few weeks, you should gradually increase your activity, while still abiding your precautions.