



Pre-surgical / Pre-procedure INFORMATION FOR ADULT PATIENTS



LANDMARK HOSPITAL OF SOUTHWEST FLORIDA

Form OP.SS.851 (Original 05/2017)

PRE-SURGICAL INSTRUCTIONS

Thank you for choosing Landmark Hospital for your surgery. It is our privilege to serve you.

Before your scheduled surgery, included in this packet, you will find additional paperwork that outlines the date and time of your surgery and when you should arrive to the hospital and your individualized pre-surgical instructions. Please make sure that you read all of this information and follow your instructions very carefully. If you have any questions, please do not hesitate to contact us.

Approximately one week before your scheduled surgery, a nursing member of our team will contact you to collect your health history and go over the specific instructions so you will arrive to the hospital ready for your procedure.

These forms will address the following:

- What and when to eat and drink
- Medications to take or stop prior to your procedure
- Any pre-procedure testing or paperwork needed from your physician
- Other important pre-surgical instructions

Your prompt arrival is important in order to give our staff enough time to get you ready for your surgery. If you foresee a problem with arriving on time, please notify the surgery center by calling (239) 529-1828.

WHEN YOU COME TO THE HOSPITAL

Please bring the following with you...

- Your driver's license and insurance cards
- Any reports – if instructed by staff
- A cane or walker if you use one
- Advanced Directive
- Current medication list – see packet
 - Include herbal or vitamin supplements
 - Over-the-counter medications
- Non-slip, supportive walking or athletic shoes
- Eyeglasses but not contact lenses
- Dentures and hearing aids

Please leave valuables and jewelry at home.

CHECKING IN

Once you have arrived, please proceed through the front entrance of the hospital to the reception desk to check in. After checking in, you will be instructed or escorted to the second floor Surgery Center where the admissions process will be completed and preparation for your procedure will begin.

IMPORTANT HOSPITAL POLICY

Please arrange for an adult (family or friend) to drive you home before you arrive to the hospital. No patient having anesthesia or sedation is permitted to drive. Per hospital policy, we will not be allowed to discharge you to a taxi. For your safety, it is recommended that a responsible adult stay with you for 24 hours after your surgery or anesthesia.

QUESTIONS AND ANSWERS

WHAT IF I NEED INTERPRETER ASSISTANCE?

Interpreter services are available to you at no cost. Please notify our staff during the pre-admission phone call if you will need an interpreter so we can make arrangements ahead of time.

CAN HERBAL SUPPLEMENTS AFFECT MY SURGERY?

Herbal supplements can cause a change in how your body may react during your surgery or anesthesia and should be stopped 2 weeks before planned surgery.

Anyone having surgery should provide a complete list of all their medications including herbal and vitamin supplements, dietary supplements or over-the-counter medications.

Please let our staff know if you have taken any of these medications up until the time of your surgery so they can make any necessary adjustments.

WHAT HAPPENS BEFORE THE SURGERY?

Before your surgery, blood tests, x-rays and an electrocardiogram (EKG) may be ordered. On the day of surgery, do not eat or drink anything. Some medications as directed by your physician, may be the exception.

You will first complete paperwork and an assessment will be completed. Next, you will move to a pre-surgical preparation area where an IV will be started so that we can give you fluids and medications during your procedure. When you are ready for surgery, you will be moved to the procedure room and connected to monitors that will allow continuous monitoring of your vital signs before, during and immediately after surgery. Your anesthesiologist or nurse anesthetist will be watching these monitors at all times during your surgery.

WHAT IS ANESTHESIA?

Anesthesia is a state of freedom from pain. There are many safe anesthetics available. The anesthetic or combination of anesthetics are selected after your anesthesia provider considers your individualized needs and the type of surgery you will be having. Some anesthetics are given as a gas and others are injected directly through an IV or nerve block.

Anesthesia is given by either an anesthesiologist which is a physician specializing in the use and monitoring of medications used for sedation or a Certified Registered Nurse Anesthetist (CRNA) who is a highly qualified nurse trained to give anesthetics and is supervised by the anesthesiologist.

Your anesthesia provider will visit with you before your surgery and decide on the best plan for the type of anesthesia you will receive.

Different Types of Anesthesia...

1. General Anesthesia: Anesthetic medications are given to you through an intravenous line or mask creating a state of reversible unconsciousness, so that you will be comfortable and pain-free during your procedure. You will not hear, feel or see a thing.

- 2. Regional Anesthesia:** Produces numbness with the injection of local anesthesia around nerves in areas of the body that correspond to your procedure. Epidural or spinal blocks numb the abdomen and legs. Other types of nerve blocks are used for the nerves of the arms or legs to numb individual limbs. Medications are usually given with the regional anesthesia to make you comfortable, drowsy and to blur your memory. The numbness lasts from two to four hours (or longer) and often, the affected limb cannot move during this time. Normal feelings return in a few hours.
- 3. Monitored Anesthesia Care (MAC):** With MAC, your anesthesiologist administers pain medication and sedatives through your intravenous line. The surgeon or anesthesiologist also inject a local anesthetic into the skin which numbs the area before, during and after the procedure. While sedated, your anesthesiologist or CRNA will monitor your status closely.
- 4. Local Anesthesia:** This is numbing medication that is injected around the procedure site and is used only for minor and simple procedures.

WHAT HAPPENS IN RECOVERY?

After your surgery or procedure, you will be taken to the Post Anesthesia Care Unit (PACU).

The nurses in the PACU are specially trained to care and monitor patients who are waking from anesthesia and who have just had surgical or invasive procedures.

During the initial post-procedure time, you will be monitored very closely and given medications to keep you comfortable and rest so that you can recover.

Once you reach a certain level of readiness and your vital signs and level of consciousness are appropriate, you will be prepared to discharge from the PACU.

HOW WILL WE SAFELY CONTROL YOUR PAIN?

Your pain is whatever you say it is. Pain can impact how well you eat and sleep and can affect the healing process. Our goal is to keep you as comfortable as possible so you can focus on healing. The nursing staff will frequently ask you about your pain and will assess your level of sedation. Please do not wait for your nurse to ask; tell the nurse right away if you start having pain that you feel needs to be addressed.

Physicians and nurses will most often ask you to rate your pain by using the zero to 10 pain scale. Zero on the scale means you are having no pain, while ten on the scale equals the worst pain you have ever had. There are other ways to assess pain, including a “faces” scale. The staff will work with you to determine the best method for you individually to express pain. After pain medication or other pain treatments are provided, the nurse will ask you to re-evaluate your pain. This will help determine if the medicine or other treatment is working for you.

Certain pain medications can affect your breathing. The nurses will closely monitor your sedation level. The amount of sedation will determine which pain management technique will be most appropriate for you.

MICELLANEOUS INFORMATION

NICOTINE

The use of nicotine products (i.e. cigarettes, cigars, gum, patches, electronic cigs, chewing tobacco or snuff) has been shown to increase the risk of complications following surgery. Tobacco can decrease blood flow to the surgical site and cause an increased risk for blood clots. Stop tobacco at least 12-24 hours before surgery.

In a commitment to health and healing, our hospital is a tobacco-free campus.

HAND WASHING...IT'S OKAY TO ASK

Proper hand hygiene – it's everyone's responsibility and one our hospital takes seriously to prevent the spread of infection. Soap and water and waterless alcohol hand rubs are extremely effective at reducing the number of germs present on the skin. Washing with an alcohol hand rub should be done by everyone before and after providing care for each patient. If anyone touches you or any object in the room, hand hygiene should also be done. In addition, soap and water should be used when hands are visibly soiled, if contact with blood or other bodily fluids occurs, after using the restroom and before and after eating.

Hand Rub Procedure:

1. Apply one pump alcohol hand rub to hands
2. Spread thoroughly over hands, between fingers
3. Rub hands together until dry

Handwashing Procedure:

1. Wet hands with warm water
2. Apply one pump of soap to hands
3. Lather and wash for at least 15 seconds
4. Rinse both sides of hands
5. Dry hands and then shut facet off with the towel

Everyone caring for you should clean his or her hands. If you don't see a member of your healthcare team clean their hands, remember, it's okay to ask.

RESPIRATORY HYGIENE/COUGH ETIQUETTE

To prevent the transmission of all respiratory infections in the hospital, the following measures have been implemented for you and your family's health:

Visual alerts are placed throughout the facility instructing patients and visitors on the signs and symptoms of contagious respiratory illnesses. These alerts emphasize the need to cover nose/mouth when sneezing/coughing to prevent the spread of disease and use of tissues and proper disposal directly into a trash receptacle and perform hand hygiene.

Masks are available for those who are coughing. If possible, have persons with a cough sit at least 3 feet away from you and others.

AFTER YOUR SURGERY

PREPARING FOR DISCHARGE

During your time in recovery and/or hospitalization, your surgeon will speak with you and your designated contact person and answer any questions you or your contact person may have. In addition, your nurse will provide written instructions that may include how to care for your surgical site and what to expect during your recovery. In addition, any individualized instructions will be provided during this time. Please ask any questions regarding your care at this time.

If any medications are ordered, they will be available at the pharmacy of your choice.

Once you leave the hospital and continue to recover at home, it is very important that you follow all of your discharge instructions.

ONCE YOU ARE HOME

The following are general instructions for your care after surgery while you are recovering at home. Based on your needs, your physician may give you other instructions.

Make sure to rest and take things slow for the first 24 hours after you arrive home. You may feel dizzy, lightheaded and tired; this is common and should get better by the next day. Make sure that you sit upright and have your feet steady before attempting to stand. Make sure to have someone to assist if needed.

Do not drive a car or plan to make any important decisions for 24 hours after anesthesia. Ask your physician when you can return to work or other strenuous activities.

Take all of your medications as prescribed. Do not take any medications that have not been prescribed for you or approved by your physician.

You may have pain after surgery. Take your pain medications as ordered so that you can manage your pain and recover faster. If your pain gets worse or is not controlled with medication, contact your physician.

ACTIVITY

- You may need assistive equipment such as a walker or cane while you recover. If so, the staff will teach you how to use it.
- Avoid activity that puts stress on your incision for at least 6 weeks.
- If you had abdominal surgery, support your incision with a pillow when moving or coughing.
- Do not lift more than 10 to 15 pounds for the first 2 weeks. When lifting objects, keep your back straight and lift with your legs.
- Walking is encouraged. Gradually build up the length, time and distance you walk each day.
- Staying active and walking help prevent blood clots that can form after surgery. To prevent blood clots, your physician may have you do certain exercises, wear special stockings or take injections to thin your blood.
- You may go up and down stairs. Take them slowly and ask for help if needed.
- Do not drive, return to work, resume sexual activity, play sports or do heavy lifting until allowed by your physician.

DIET AND BOWELS:

It is common to have mild nausea or vomiting after surgery. If you have nausea, start with clear liquids and light foods such as toast, rice or noodles. As the nausea passes, you can advance to your normal diet.

Do not drink alcoholic beverages for at least 24 hours after surgery or while you are taking prescription pain medication.

Some pain medications can cause constipation. Make sure to eat high fiber foods such as whole grains, fruits and vegetables and drink at least 6 to 8 glasses of water each day. Stool softeners or a mild laxative may be needed if you do not have a bowel movement within three days after your surgery. Contact your physician for more instructions.

