



BHS Surgery

What to Expect When Having Surgery



BHSSurgery.org



Dear Patient,

The surgical services team at Butler Memorial Hospital welcomes and thanks you for choosing us for your surgery/procedure. We encourage you to be an active participant in your hospital stay.

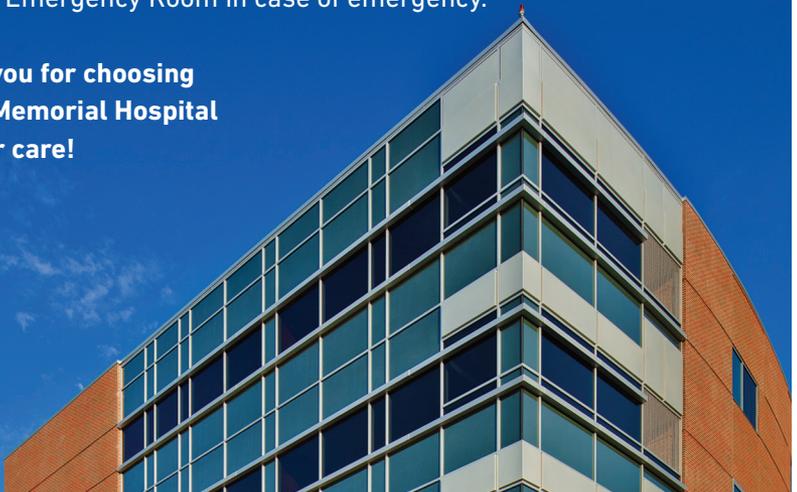
In preparation for your surgery/procedure, we ask that you review the information contained within this booklet. You will find instructions for the following:

- **Preparing for the day of your procedure, including:**
 - Medication use
 - When to stop eating and drinking prior to your procedure
 - Transportation requirements after surgery
 - Items to bring with you the day of surgery
 - **Planning your discharge from the hospital**

Any questions specific to your surgery should be addressed by your surgeon.

If you have any questions or concerns, please contact the 3 Tower Surgical Care (3TSC) Nursing Department, Monday - Friday 6:00 am to 7:30 pm at 724-284-4595. On weekends and after hours, please call your medical provider or proceed to the nearest Emergency Room in case of emergency.

**Thank you for choosing
Butler Memorial Hospital
for your care!**





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INSTRUCTIONS FOR PRE-ADMISSION TESTING

If you are not scheduled or requested to go to Pre-Admission Testing for an appointment, please have this information readily available. You may be called during the week prior to your surgery/procedure for a nursing phone assessment.

If Pre-Admission Testing is required for your procedure, it is advised that you schedule an appointment by calling the Pre-Admission Testing (PAT) Department at (724) 284-4291. PAT is located on the ground floor at BHS Crossroads Campus, 129 Oneida Valley Road, Suite 110, Butler, PA 16001.

At this appointment you will speak to a Pre-Admission Testing Nurse who will review your pre-operative instructions, your medical history and your medication instructions. Your pre-operative blood work, EKG and chest X-ray will be completed, if required, the day of your visit.

You should write your appointment date and time below:

Date: _____ Time: _____

Bring the following with you to the Pre-Admission appointment:

- This booklet
- A list of current medications and doses including over-the-counter vitamins and herbals
- A list of all allergies and the reaction(s) you experience
- A list of any procedures/surgeries you have had in the past
- Any paperwork/orders from your physician or other medical facility (X-Rays, EKGs, Stress Tests, AICD Wallet Card)
- It is especially important to know the name of your cardiologist and any cardiac tests that you have had at other facilities
- Living Will, Advanced Directive or Durable Power of Attorney
- Insurance Cards and Photo ID

GENERAL HEALTH/NEW MEDICATIONS

If you have any health changes prior to your surgical date (example: fever, sore throat, cough, rashes, etc.) or new medications ordered, please notify your surgeon/procedural physician.

Medications/Supplement Instructions:

If you are taking any blood thinning medications (for example):

- Coumadin (Warfarin)
- Plavix
- Ticlid
- Pletal
- Effient
- Trental
- Aspirin/NSAIDs
- Ibuprofen
- Pradaxa
- Xarelto

Your surgeon will provide instructions when to stop/hold these medications. If not, contact your surgeon at least one week before surgery for instructions.

HOLD all herbal medications **two weeks** prior to surgery. You may take multivitamins and iron supplements.

Diabetes

If you are diabetic, it is important to monitor your blood glucose before surgery. If your blood sugar level is greater than 250 mg/dl two or more times, call the physician who treats your diabetes.

ANESTHESIA SAFETY

Because you will have had anesthesia, you **MUST** have a reliable person to drive you home. If you are a minor, under 18 years of age, a legal parent/guardian must accompany you the day of your surgery/procedure to assist with the registration process and be available to sign any necessary consent forms. For your safety, it is strongly recommended that a responsible person stay with you at least overnight or be easily accessible by phone.

Types of Anesthesia *(cited from the PA Society of Anesthesiologists)*

Your anesthesiologist takes several factors into account when recommending the type of anesthesia. Some of those factors include the type of surgery being performed and your medical history.

Monitored Anesthesia Care (MAC)

If you are receiving this type of anesthesia you will receive Minimal, Moderate or Deep sedation. Your anesthesiologist will determine your level of sedation based on a variety of factors. For that reason, it is imperative that the physician supervising the administration of sedation/ anesthesia be qualified to manage the patient that unintentionally progresses to a deeper level (i.e. from deep sedation to general anesthesia).

General Anesthesia

The patient is completely unconscious, and not responsive to painful stimuli. Blood pressure, heart rate and respiratory function are often compromised.

Local or Regional Anesthesia

Some surgical procedures may be performed under local or regional anesthesia. Local anesthesia involves injecting an anesthetic directly surrounding the operative site, whereas regional anesthesia involves injecting an anesthetic in proximity to the sensory nerves supplying the operative site. Regional anesthesia includes spinal and epidural anesthesia, as well as various peripheral nerve blocks, which can be used to anesthetize virtually any area of the body.

While these techniques are generally extremely effective in controlling pain, they are often supplemented with sedation or a general anesthetic to enhance patient comfort during surgery. Additional benefits of local or regional anesthesia include enhancement of postoperative pain control.

IF YOUR SURGERY INVOLVES AN INCISION THROUGH YOUR SKIN, PLEASE REVIEW THIS SECTION

Your Role in Decreasing the Risk of Surgical Site Infections

All normal skin has germs on it. The number of these germs and the type of germs vary by body site and from person to person.

People who smoke or who have diabetes have a high risk for infection. About 30% of people have Staphylococcus aureus on their skin - the cause of "staph" infections. You can drastically decrease the number of germs on your skin before you come for surgery by washing with Hibiclens. Fewer germs to start with lowers the chance of infection. Skin folds have the highest number of germs.

The following is an example of how these germs are lowered. The active ingredient of Hibiclens will bind to your skin cells a little each day, and over several days decrease the number of germs that are present when you go for your surgery.

Starting number of germs per approximately 1 inch	Number of germs following the surgical skin prep	Number of germs following surgical prep after Hibiclens home prep
1,000	20 germs per approximately 1.5 inches	2 germs per approximately 77 inches
10,000	200 germs per approximately 1.5 inches	200 germs per approximately 71/2 inches
100,000	2,000 germs per approximately 1.5 inches	2,000 germs per approximately 7/10 inches

You will be provided a bottle of Hibiclens at the Pre-Admission Testing Department during your pre-operative assessment appointment. If you do not need pre-operative testing, you may purchase Hibiclens at any drug store.

TECHNIQUE FOR SHOWERING WITH HIBICLENS

(Pre-Op Bathing with 4% Chlorhexidine Gluconate (CHG) Liquid Soap)

Please read all of these instructions before using this germ killing soap.

- 4% CHG is a medicated soap that kills germs.
- Bathing with this soap before surgery reduces germs on the skin, is recommended by the Centers for Disease Control (CDC), and can help reduce risk of surgical infection.
- As a surgical patient, you are to use this soap for 5 days prior to your surgery.
- Do not use this product if you are allergic to CHG. Do not apply the product directly to the genitalia.
- Do not allow the product to get in your eyes, ears or mouth. If it contacts these areas, rinse out immediately and thoroughly with plenty of water.
- If rash, redness, itching or any other symptoms of allergy occur, stop use immediately. If rash persists or worsens, contact your physician
- Keep this product away from children. If swallowed, immediately seek medical attention or call a poison control center. This product is for your use only. Do not let others use it.
- Of note, hair removal can increase risk of surgical infection. Do not remove any hair. Avoid shaving or the use of any topical hair removers at or around the surgical site.

**4% Chlorhexidine
Gluconate (CHG)
Liquid Soap**



**Molnlycke Health Care
Hibiclens**

Beginning five days before surgery:

- Shower as you normally would with your usual soap
- Then shower with CHG from the neck down
 - Apply the CHG to the wet cloth provided and lather your entire body from the neck down
 - Never use this soap near your eyes
 - Turn the water off in the shower and move away from the water spray to avoid rinsing the soap solution off too soon

- Gently wash your body and focus the scrub on the areas where the incision(s) will be located for about 3 minutes
- Avoid scrubbing the skin too hard
- Once you have completed the scrub, thoroughly rinse the CHG solution off of your body with warm water
- Do not wash with regular soap after you have used the CHG soap solution
- Pat yourself dry with a clean, freshly washed towel
- Avoid use of hair products or make-up to areas where the incision will be made
- Dress with freshly washed clothes

For the next four days:

- Do not bathe with your regular soap, as the residual CHG soap should remain on the skin from the previous day's application
- Repeat the process above
- Your fifth shower should be on the day of surgery

EVENING BEFORE SURGERY

You will receive a call from the hospital the afternoon/evening before your surgery informing you of the time you will need to arrive and where to report. If you do not receive this call, or have questions, you may contact 724-284-4595 or 724-284-4412.

When planning your surgical visit, remember that the surgery/procedure itself occupies only a part of the time spent with us. We will bring you in early to prepare you for your surgery/procedure. There is also time to fully recover. Together it may take up most of the day.

MORNING OF SURGERY

DO NOT apply any powders, deodorants, lotions, creams to your skin

FOOD AND DRINK INSTRUCTIONS

Unless you have received other instructions, you:

ADULT

- **Should not have** solid food after midnight, no smoking, chewing gum, candy or snuff
- **Should not have** alcoholic beverages for 24 hours prior to surgery
 - May have unlimited clear fluids until 4 hours prior to arrival time for surgery
 - Water, apple juice, tea or coffee - **NO CREAM OR MILK**; sugar is OK. No carbonated beverages.
- **Exceptions: Patients for Bronchoscopy should have no food or drink after midnight. Medications as above.**

PEDIATRIC

- Children: No solid food for 6 hours prior to arrival time for surgery
- Infants and toddlers may have breast milk until 4 hours prior to arrival time for surgery
- Unlimited clear fluids until 2 hours prior to arrival time for surgery
- **FORMULA AND MILK ARE CONSIDERED A SOLID FOOD**

MEDICATION INSTRUCTIONS

Use of Routine Medication on the Day of Surgery:

It is important that you take most routine medications with sips of water the morning of surgery.

If you are prescribed inhalers for breathing, bring them with you to the hospital.

Test your glucose the morning of your surgery/procedure.

- **HOLD** Diabetic medications:
 - Do not take oral hypoglycemic medications the morning of surgery
 - Long acting insulin dose should be reduced by ½ of the usual dose the evening prior to and the morning of surgery

- If you are on an insulin pump please check with the physician who manages your diabetes for instructions and bring extra supplies for your pump. Otherwise, **DO NOT** take any short acting insulin the morning of surgery.

PAPERWORK/ITEMS TO BRING TO THE HOSPITAL

If you did not come in for a pre-operative appointment, please bring the following with you to the hospital:

- This booklet
- A list of current medications and doses including over-the-counter vitamins and herbals
- A list of all allergies and the reaction(s) you experience
- A list of any procedures/surgeries you have had in the past
- Any paperwork/orders from your physician or medical facility (X-Rays, EKGs, Stress Tests, Pacemaker/AICD Wallet Card)
- It is especially important to know the name of your cardiologist and any cardiac tests that you have had at other facilities
- Living Will, Advanced Directive or Durable Power of Attorney
- Insurance Cards and Photo ID

If you use any of the following, please bring these items to the hospital:

- CPAP/BiPAP
- Crutches/walker
- Hearing aid/glasses
- Specialty braces
- Prosthetics
- Insulin pump/extra supplies

CLOTHING/HYGIENE

- Wear comfortable clothing and follow your surgeon's instructions regarding articles of clothing to bring to the hospital
- Dress in layers, room temperatures may fluctuate

- Wear your hair loose, avoid the use of clips, pins and bands
- Wigs and hairpieces will need to be removed before surgery; you will be given a hair cover to wear
- Remove **ALL** jewelry/body piercings to prevent electrical burns and/or tissue injury. Surgery will be **canceled** if all jewelry including body piercings are not removed.
- No makeup – especially eye makeup
- No contact lenses the day of surgery/procedure
- Creams, lotions, perfumes, bath oils, or aftershave should **NOT** be used on the day of your surgery/procedure. These remain on the skin and can interfere with preoperative skin preparations.
- Please refrain from using deodorant if having breast surgery
- Please do not shave the area that is involved in surgery for at least 3 days prior to your scheduled surgery date.
- Shower/bathe and wash your hair, unless you are following any specific preoperative instructions given by your physician (example: special bathing, cleansing cloths, or preps).
- **Hand Surgery ONLY** - No nail polish; trim nails, if you have artificial nails/tips, it will be necessary to remove them

The hospital is **NOT** responsible for personal **valuables** brought with you to the facility.

Correct Footwear

Your risk of falling increases when wearing improper footwear. Plan on bringing shoes that are comfortable and supportive for safe walking. When packing your items to bring to the hospital, please bring your favorite pair of walking shoes that have low heels and slip resistant soles.

If you choose to also bring slippers for comfort while in your room only, please be sure that they are not floppy or open ended in the back, but more resemble a shoe.

DAY OF SURGERY/PROCEDURE

ARRIVAL: Outpatient Surgery (3TSC)

- You will be asked to park in the Tower Parking Lot and enter the Tower Entrance. After entering the building you will see an elevator alcove on the right. Take the elevators to the 3rd floor where you will arrive on the 3 Tower Surgical Care (3TSC) Unit waiting area.
- When you arrive in the pre-operative check-in area (in the 3TSC waiting area), you will be asked to sign a check-in form with your name and time of arrival. Once you sign in, have a seat until Registration is ready for you. You will need to provide Registration with a current photo ID, your medical insurance card and prescription card if you have not already registered in PAT. The 3TSC Secretary will give your family/significant other a pager that will enable them to follow your surgical course throughout the day. It will also be used to communicate with them, if needed. (More specific information regarding the pager will be provided to your family on the day of surgery.)
- You will then be escorted back to your room by either the 3TSC Secretary or a Volunteer. A pager will be placed on your stretcher. This pager will correspond to the pager that was given to your family. The pager communicates with the Family View Monitor in the waiting area alerting your family/significant other of your location throughout the course of the day. In order to ensure privacy, a number will be given to your family that corresponds to your pager and this number will identify you on the Family View Monitor.

Infection Control/Safety

Prior to any patient contact, all staff must wash their hands. Please do not hesitate to request staff to wash their hands in your presence.

Getting You Ready for Surgery

Assessment and Starting the IV: Your nurse would like to spend approximately 30-45 minutes preparing you for surgery. Once in your patient area:

- You will be directed to change into a hospital gown and wait until a nurse starts your admissions process. Your family will be asked to wait in the 3TSC waiting room until the nursing assessment is complete.
- A registered nurse will then review your medical history, current medications (including time of last dose), drug allergies, and your last oral intake of food and liquid.
- An intravenous line for fluids and medications will be inserted by your nurse or a member of the anesthesia team.
- A nurse practitioner may also review your medical history and perform a limited physical examination.
- You will also speak with an anesthesiologist who will discuss your options for anesthesia and finalize your anesthesia plan. If you require a nerve block by the anesthesiologist, you will have that done in your room before your surgery.
- After the nursing assessment is completed your family will be asked to come to your room. This may be done by the pager, Secretary, or the Volunteer. If you are having heart or vascular surgery by our Cardiothoracic Surgeons your family will most likely be asked to wait on the 5th floor Intensive Care Unit waiting area while you are in surgery.
- After this preparation period, you will be reunited with your family.

Visitors

Please limit visitors to two (2) per bedside.

Delays

We try to adhere to our procedure schedule as closely as possible. However, emergency situations arise that may change your procedure time. We will notify you as soon as possible and sincerely regret any inconvenience, but as always, please feel free to ask any questions or share any concerns.

Transfer to Operating Room

As the time for surgery approaches, your identification will again be verified. In some instances, your surgical site will be marked or a special armband applied. All non-fixed dental appliances, contact lenses and body piercings/jewelry must be removed.

- Patients receiving anesthesia will be transported to the operating room by a Certified Registered Nurse Anesthetist (CRNA). You may receive medication to help you to relax on the way. Patients receiving local anesthetics only will be transported to the operating room and back to 3TSC after surgery by an operating room RN.
- The amount of time you spend in surgery will depend on the type of surgery you are having.
- A team of professionals will be in the operating room to assist your surgeon and ensure that you are comfortable, safe, and all of your needs are met throughout the surgery.

AFTER YOUR SURGERY/PROCEDURE

In most instances, after your surgery is completed, the surgeon will call or visit the waiting area to speak with your family. There are two Physician Conference Rooms where the surgeon may speak with your family/significant other. Your family will be notified when you return to your room.

Post Anesthesia Care Unit (PACU)

Patients that have received anesthesia will be transported to the recovery area (Post Anesthesia Care Unit – PACU) while you are still asleep.

- A PACU nurse will monitor your vital signs (blood pressure, pulse, temperature, and oxygen level) and ensure that your pain is controlled.
- After you awaken, your vital signs are stable, and your pain is controlled (and your Anesthesiologist has determined you are stable) you will be transported back to the 3TSC unit for further recovery. Your stay in the PACU is usually 45-60 minutes; however, sometimes this process may take longer. Occasionally, your

surgeon may want to observe your recovery longer and may place you in a hospital room for extended recovery overnight. If you are to be admitted to the hospital you will go directly from PACU to your hospital room.

- If you have had spinal anesthesia you will have to stay in the PACU until you are able to move your legs.

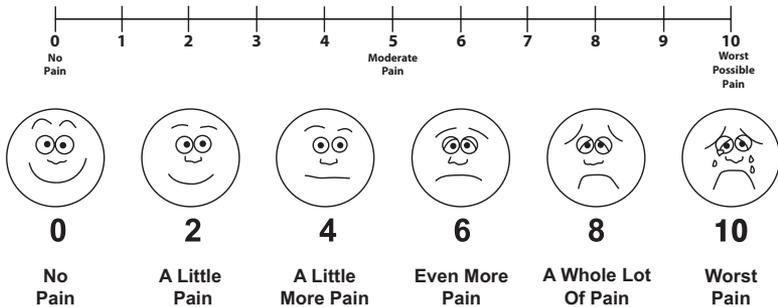
Post Operative

When you are awake and stable, you will return to your room on 3TSC. Your nurse will give you clear liquids to drink and assist you out of bed. You will be required to deep breathe to keep your lungs clear, tolerate liquids and be up and about without dizziness. Other criteria may apply to specific procedures, such as passing your urine. If you are at high risk for sleep apnea, a longer recovery time may be required by the Anesthesia Department. Together you and your nurse will determine when you are fit and ready for discharge. There is always the possibility of an unplanned overnight stay. You and your family will be kept informed.

- A registered nurse will check your vital signs up to three more times to be sure that you remain stable.
- Your nurse will evaluate your pain levels and medicate you for pain if needed. If you are nauseated, that will be treated as well.
- Before you can go home, you will need to be able to walk a short distance, tolerate small amounts of fluid, and urinate (if necessary).
- Your post operative discharge instructions will be reviewed with you and your family before you go home.

Pain Management

Successful pain control is largely dependent on the type of surgery and your communication with your nurse. **Pain is expected after surgery** and your nurse will work with you to keep it as minimal as possible. Frequently, they will inquire about your level of pain. You will be asked to relate your pain using the scale below:



Wong-Baker FACES® Pain Rating Scale
©1983 Wong-Baker FACES Foundation. www.WongBakerFACES.org Wording modified for adult use. Used with permission.

This scale along with your overall condition will be used to determine how much pain medication you will receive. If you are discharged on the same day as surgery, your surgeon may give you/your family member a prescription to control pain at home. It is important to get the prescription filled and take it as directed. The pain medications can help reduce your pain so you can resume your normal activities sooner.

RETAIL PHARMACY

There is a Retail Pharmacy located on the second floor of the Tower Entry. This pharmacy is open from 9:00 am until 5:30 pm, Monday – Thursday and Friday from 7:30 am - 4:00 pm, and can be reached by calling 724-284-6363. They are able to fill most prescriptions while you are with your family after surgery. If you wish to utilize this pharmacy, your nurse can fax your prescription to the pharmacy and a family member may pick up your prescription. Your nurse can explain this process to you in further detail.

GOING HOME

You **MUST** have a reliable person drive you home. For your safety, it is strongly recommended that a responsible person stay with you at least overnight or be easily accessible by phone. Even though you may feel capable, the lingering effects of the anesthesia and pain medications can last for hours.

- When your discharge is complete and you are ready to go home, your family/friend will be instructed to pull their vehicle around the hospital to the Brady Entrance. You will be transported by wheelchair to the vehicle. In some cases, if you have had a minor procedure, the nurse may allow you to walk to your vehicle in the Tower Parking Area with your family if you prefer.
- **If you have a C-PAP, wear your C-PAP as prescribed. For the next 48 hours or as long as you are on narcotic pain medication(s) wear at night and with naps.**

Post Operative Wound Care

If you have an incision or wound make sure you keep it clean and follow any special instructions you received for changing the dressings. **ALWAYS WASH YOUR HANDS** before cleaning your incision or changing your dressing.

Watch for signs or symptoms of infection. These include increasing redness, swelling, warmth, a foul odor, tenderness or pain, a red line extending from the wound, pus-like discharge, a change in the amount or color of the drainage, or a temperature of 101 degrees or higher. If you experience elevated blood sugars, this could also be a sign of infection. If you develop any of these, contact your physician immediately.

Safety Instructions:

For 24 hours after anesthesia:

- **DO NOT DRIVE** or operate machinery/power tools (lawn mowers, tractors, sewing machines, or stoves)
- **DO NOT** handle sharp or dangerous objects (guns, knives)
- **DO NOT** consume alcohol or tobacco products

- **DO NOT** make important decisions or sign important documents
- **DO NOT** engage in dangerous play activities

Please follow your individual discharge instructions from your doctor regarding other activity restrictions.

Post Operative Questions/Phone Call:

Do not hesitate to have **ALL** of your questions and concerns addressed before discharge. Please tell us if there is anything else we could have done to meet your expectations.

Once home, if you have any questions, write them down and call your surgeon or physician during regular office hours. If an emergency arises, dial 911 or go to the nearest Emergency Department.

A member of the nursing staff may call you after your surgery/procedure to check on your progress.

Thank you for choosing Butler Memorial Hospital for your care!



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