



PREPARING FOR SURGERY

WHAT YOU SHOULD KNOW BEFORE YOUR SURGERY AT UPMC WESTERN MARYLAND

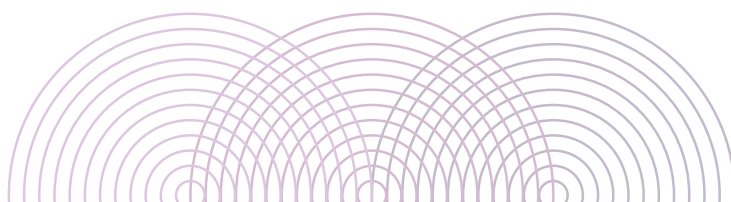
To prepare you and your family for a safe surgical experience, it is essential that your health care provider have a current medication list and an accurate medical history.

- A nurse will be calling you for your preoperative telephone interview.
- The interview should take no more than 30 minutes.
- You may tell the nurse to call back at a more convenient time.
- If you are unavailable, the nurse will leave a message to call back to a specific number.
- When the nurse calls you, you will have the opportunity to ask questions you may have about your surgery.
- Please write down any questions you may have and have your medication list available.
- The nurse will review with you instructions for the day of your surgery.

- Please have a pen and paper available to write down these instructions.
- The interview should be completed within one to two weeks prior to your surgery date.
- Following this process may prevent cancellations and delays of your surgery.

BRING WITH YOU:

- A list of your current medications, including the last dose and time taken
- Photo identification and insurance cards and co-pay, if needed
- Something to read or do while waiting
- A copy of your advance directives and living will or medical power of attorney, if you have them
- CPAP or BiPAP machine (sleep apnea)
- Eye glasses case/contact lens case and solution/denture case



INSTRUCTIONS FOR THE DAY OF SURGERY

- Wear clean, comfortable loose fitting clothes that are easy to change and will not fit tightly over the incision or dressing.
- Do not wear hair spray, body lotions or perfume/cologne.
- Remove all jewelry (including piercings), make-up, contact lenses and accessories.
- Do not eat or drink after midnight the night before your surgery.
- Infants: may be breastfed up to four hours prior to arrival time. Infants may be formula fed up to six hours prior to arrival time.
- Legal guardians must sign all paperwork including consents, discharge instructions, etc. Legal guardians must remain in the building until patient is discharged. Proof of guardianship is required.
- Transportation: Please make arrangements prior to your procedure to have a responsible adult accompany you, drive you home and remain with you for 24 hours after your surgery.
- If you have not arranged for someone to drive you home your procedure may be cancelled.
- Free valet parking is available at the main entrance and the cafeteria entrance. Please enter the main entrance, proceed to the elevators and to 3rd floor.
- Sign in at kiosk and proceed to wait for your number to be called.

For your safety and continuity of care, questions may be repeated by various caregivers.

QUESTIONS FOR MY SURGEON:

In a desire to always communicate with you regarding your care and expectations, please use this as a place to keep notes about concerns or question you might have for your doctor.

Some suggestions we would like to make:

PLAN FOR MY RECOVERY:

1. If I am being admitted, after my surgery, how long will I need to stay in the hospital?
2. When can I return to work?
3. When can I drive?
4. Will I need to go to physical therapy?
5. If I have a dressing, when can I change my dressing?
6. When can I shower or tub bath?

Additional questions and concerns:

AFTER SURGERY:

- A nurse will monitor you after your procedure.
- You will be offered liquids if there are no restrictions ordered by your physician.
- Tell your nurse if you experience any pain or nausea.
- You must have a member of the staff help you up for the first time.



GOING HOME:

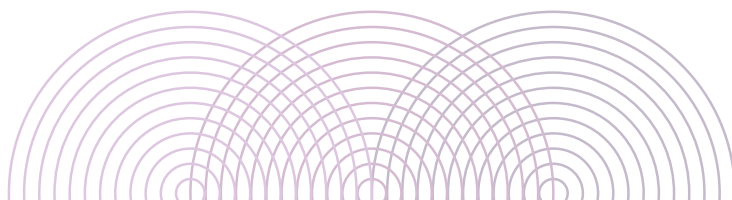
- Before you leave the hospital, you must meet some physical requirements, which vary depending on your procedure.
- Plan to rest for 24 hours after going home.
- If you had sedation, a driver must take you home and you must not drive for 24 hours and you may not drive as long as you are taking narcotic pain medications.
- Notify your surgeon if you have developed a rash, fever, illness or injury to your surgical site.

DISCHARGE INSTRUCTIONS:

Before you leave the hospital you will receive written and verbal instructions concerning medications, activities, follow up appointments and wound care.

PROBLEMS:

If you are experiencing heavy bleeding, chest pain, breathing problems or excessive pain, go to the nearest emergency room. If you have other problems/questions, call your surgeon.



AFTER YOUR SURGERY

CONTROLLING SURGICAL PAIN WHILE RECOVERING

- A top priority of UPMC Western Maryland is to effectively manage your pain following surgery.
- Being pain-free is not a reasonable expectation, but pain should be controlled enough to allow movement and coughing.
- It generally takes between 20 and 45 minutes before pain medication starts to work.
- It is important to take your medication before your pain level gets too intense.
- Pain medication should be taken with food.
- If you know you will be more active, you may want to take your medication at least one hour ahead of your activity.
- Do NOT drink alcoholic beverages or use any other drugs other than what is prescribed for 24 hours after surgery and/or when taking pain medicine.

ANESTHESIA PRECAUTIONS AFTER YOUR SURGERY

- You may feel sleepy and somewhat sluggish for several hours. Rest accordingly.
- You may have a sore throat for a few hours. Call your doctor if the soreness persists for more than 2-3 days.
- You must have someone with you for the first 24 hours after surgery.
- Do not drive for 24 hours following your surgery or while taking narcotic medications
- Take deep breaths and cough every two hours while awake, unless ordered otherwise.
- Nausea can be a side effect of medicines you received during surgery. Take frequent sips of clear liquids. Do not eat while traveling home in your vehicle, this can increase nausea.

WHEN TO CALL THE SURGEON WITH CONCERNS

When recovering at home, it is important to know when to notify the surgeon of any complications that arise after surgery. The following signs and symptoms are warnings of possible complications and should be reported to the surgeon immediately or go to the Emergency Department:

- Difficulty breathing
- Fever over 101 degrees
- Black, tar-like stools
- Pain that sharply increases or becomes uncontrollable
- Wound drainage problems; redness, excessive bleeding, or opening at the incision site
- A decrease in ability to function (for example: cannot walk to the bathroom)
- A change in level of consciousness or ability to walk
- Persistent constipation, nausea and/or vomiting
- Inability to tolerate liquids
- Unexplained leg pain in one or both legs

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