



# Getting Ready for Surgery

**SANFORD**<sup>®</sup>  
HEALTH

# Surgery Questions and Answers

Thank you for choosing Sanford Health for your surgical care. Before surgery, a surgery nurse will ask you questions about your health history in person or on the phone. The nurse will also tell you what to expect before, during, and after your surgery and answer your questions. You can use this worksheet to write down important information about getting ready for surgery. The information on the worksheet and checklist is explained in more detail in the rest of this booklet.

Questions	Answers
<b>What day is my surgery scheduled?</b>	
<b>Who is my surgeon?</b>	<b>Name:</b>
<b>What surgery am I having?</b>	
<b>What time should I arrive?</b> (this may be called to you)	
<b>Where am I having surgery?</b>	<b>Address:</b>
<b>Where should I park?</b> <b>What door should I use?</b>	
<b>What medicines should I take in the morning with a sip of water?</b>	
<b>When do I stop eating, drinking, using tobacco, sucking on hard candy, or chewing gum?</b> (this may be called to you)	<ul style="list-style-type: none"><li>• <b>Eating</b> food, using tobacco, candy, or gum Stop date: _____ Stop time: _____</li><li>• <b>Drinking</b> clear liquids Stop date: _____ Stop time: _____</li></ul>
<b>How will my medicine be reviewed?</b> (check one)	<input type="checkbox"/> Bring <b>all</b> medicines in their bottles <input type="checkbox"/> Bring a <b>list</b> of your medicines
<b>Should I bring any medical equipment that I use at home?</b> (check all that apply)	<input type="checkbox"/> <b>CPAP machine</b> <input type="checkbox"/> <b>CPAP tubing</b> <input type="checkbox"/> <b>Know CPAP settings</b> _____ <input type="checkbox"/> <b>Cane or walker</b> <input type="checkbox"/> <b>Other</b> _____

## Getting Ready for Surgery – Checklist

Following these steps can help you have a safe surgery and a successful recovery.

**Failure to follow these steps may mean rescheduling your surgery another day.**

### About 2 weeks before surgery

Talk to your doctor about all of your medicines. You may need to stop taking certain medicines before surgery. In some cases, surgery may need to be rescheduled if you do not stop taking blood thinners, aspirin, NSAIDs or herbal medicines and supplements as recommended.

- See your doctor for an exam before surgery as recommended by your surgeon. Ask about when to take or stop taking these medicines. Write instructions below.
  - Blood thinners: \_\_\_\_\_
  - NSAIDs (such as Advil or Aleve) or aspirin: \_\_\_\_\_
  - Weight Loss medications (such as Phentermine): \_\_\_\_\_
  - Herbal medicines or supplements: \_\_\_\_\_
  - Diabetic medicine changes: \_\_\_\_\_
- Stop or cut down on smoking or tobacco products. Talk to your doctor about using nicotine replacement therapy.
- Arrange a ride home from the hospital or surgery center as directed.  
Write the name and phone number of your driver here: \_\_\_\_\_
- Ask someone to stay with you for 24 hours after you leave the hospital or surgery center.

### The day before surgery

- Stop drinking alcohol. No liquor, beer, or wine for 1 day before surgery.
- Shower before bed using soap. Your surgeon may tell you to use special surgical soap.
  - After bathing, do not use any deodorant, nail polish, makeup, lotions, powders, or perfumes.

### The morning of surgery

- Remove all jewelry including wedding rings and all piercings. Use plastic inserts as needed.
- Shower again using soap. Your surgeon may tell you to use special surgical soap.
- Brush your teeth and/or use mouthwash.
- Do not wear any deodorant, nail polish, makeup, lotions, powders, or perfumes.
- Take **only** your prescription medicines, as directed.
  - **Do not** take those that you have been asked to stop.
- Remember not to eat, drink, use tobacco, suck on hard candy, or chew gum.
- Leave any valuables, such as jewelry and watches, at home.
- Wear clean, loose, comfortable clothing.

## Why should I read this booklet?

This booklet will answer some of the questions you may have about your surgery.

- How does Sanford keep me safe?..... pages 4-5
- How do I get ready for surgery?..... pages 2-3,6
- What will the day of surgery be like? ..... pages 8-10
- What about pain management? ..... pages 11-12
- How can I recover well?..... pages 12-15

## Your Surgery Team

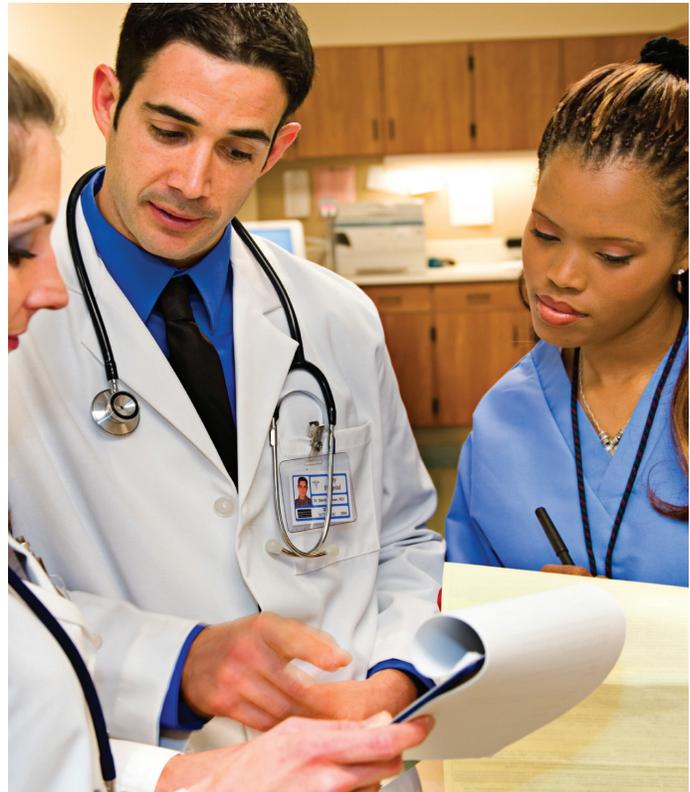
Sanford Health is proud of our highly skilled surgery team. We are looking forward to caring for you. The team has many members:

- Your surgeon
- Anesthesiologist and/or Certified Registered Nurse Anesthetist (CRNA)
- Nurses
- Surgical assistants

## Be an active member of your surgical team

Ask questions when facts are not clear. Before you have surgery you should know:

- Why you need surgery
- Risks and benefits of surgery
- Choices other than surgery



## Safety at Sanford Health

### To keep you safe

We will place an ID band on your wrist. We will check the band and ask your name and birthday before we give you medicine, do tests, or treatments.

### Clean hands prevent infections

- If you do not see us clean our hands before caring for you – remind us!
- Clean your own hands with soap and water or use an alcohol hand rub often.
- Ask your family and friends to clean their hands, too.



## If you become ill before surgery

Call your surgeon if you get a fever, cold, cough, rash, or stomach flu before surgery. Illness can affect the way your body responds to anesthesia and other medicines. A recent illness may also make it harder for your body to heal from surgery.

- **For your safety, your surgery may be rescheduled for another day even if you feel well on the day of surgery.**

## What should I do if my surgery is rescheduled for another day?

- Call your regular doctor to talk about any needed changes in your medicine.
- Call your surgeon to reschedule the surgery.
- You may need to go through the steps of preparing for surgery again.

## Medicines

What medicines do you take? Be sure your doctors and nurses know which medicines, herbal supplements, and vitamins you take. Some medicines, vitamins or herbal supplements may affect the anesthesia or other medicines you need during and after surgery. They can also affect how much you bleed during surgery.

- **Certain medicines, such as blood thinners, aspirin, weight loss medicine, vitamins, or supplements need to be stopped or changed before surgery.**

## Tobacco use

Stop using or cut down on tobacco use. People who do not use tobacco heal faster than people who do. Talk to your doctor about these and other options to help you quit:

- Nicotine replacement therapy
- Tobacco cessation specialist
- National Quit Line (800) QUIT NOW (800) 781-8669.

## Good nutrition

During the weeks before and after surgery, eat foods that give your body lots of nutrients. Good nutrition will help you recover from surgery. Eat these types of foods at each meal:

- Protein foods
- Colorful fruit and vegetables
- Whole grains

See [www.choosemyplate.gov](http://www.choosemyplate.gov) for more information about nutritious food.



## The Day Before Surgery

### Alcohol use

Alcohol may interact with the anesthesia or medicines that you receive.

- **Do not drink alcohol for 1 day before your surgery.**

### Bathe or shower before surgery

Any surgery needing an incision cut into the skin has a chance of infection. Bathing or showering the night before and the morning of surgery may help lower your chance of infection.

- **Shower using soap. Your surgeon may tell you to use special surgical soap.**



## The Morning of Your Surgery

### Before you come in for surgery:

- Remove all jewelry including wedding rings and all piercings. Use plastic inserts as needed.
- Shower again using soap. Your surgeon may tell you to use special surgical soap.
- Brush your teeth and/or use mouthwash.
- Do not wear any deodorant, nail polish, makeup, lotions, powders, or perfumes.
- Take **only** your prescription medicines, as directed.
  - **Do not** take those that you have been asked to stop.
- Remember to follow the instructions about eating and drinking before surgery that you were given.
- Leave any valuables, such as jewelry and watches, at home.
- Wear clean, loose, comfortable clothing.

## What to Bring With You

### People to bring with you

- A parent or legal guardian must be present if you are under 18.
- A support person of your choice to be with you.
- Someone to drive you home if you are going home the same day as your surgery.

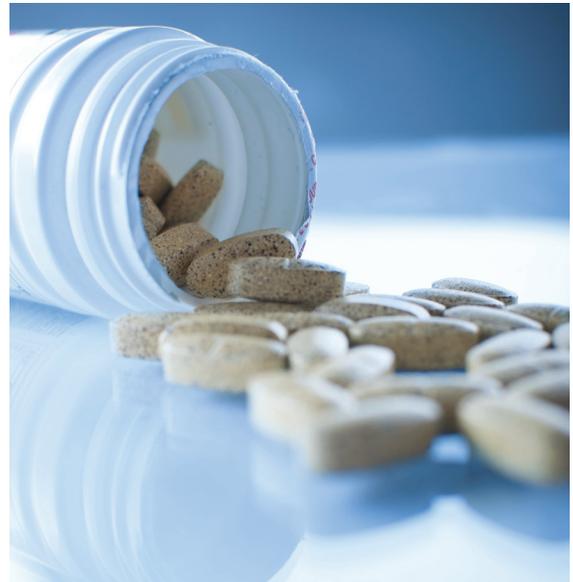
### Paperwork

- Insurance forms, if needed.
- You may need your checkbook or a credit card. Have a family member keep your cell phone, checkbook, wallet, credit cards, cash, jewelry, or special items.  
**Do not keep these items in your hospital room.**
- A copy of your Advance Care Plan, Healthcare Directive, Living Will or Power-of-Attorney for Healthcare, unless already provided. See [www.sanfordhealth.org](http://www.sanfordhealth.org), keyword “acp” for more information.

### Medicine and medical equipment

Before surgery, a nurse will speak with you about what to bring to the surgery center or hospital. See page 2 “Surgery Questions and Answers” of this booklet for more information. As directed, you may be asked to bring the following with you:

- All the medicines that you take or a list of your medicines.
- Any medical equipment that you use at home such as a:
  - Cane or walker
  - CPAP mask, tubing and settings
  - CPAP machine
  - Other equipment



### Personal items

- Bring your dentures, glasses, or hearing aids and their cases. Label the containers with your name to keep them safe when not in use.
- It is preferred that you wear glasses but, if you bring or wear your contact lenses, also bring solution and a case for safe keeping.
- Items that help you feel comfortable and support your healing such as music, pictures, or spiritual material.
- Many people are able to go home the day of their surgery. In case of overnight stay in the hospital or in town, bring the clothing that you will need, like a robe and slippers.

## Checking In

You will be taken to an admission area. There you will meet the staff who will help you get ready for surgery. You will:

- Change into a hospital gown or a special warming gown.
- Remove your glasses, contact lenses, and dentures as directed.
- Leave your personal belongings with a relative or friend.
- Visit with your surgeon. They will use a pen to initial the site to be operated on, if needed.
- For women of childbearing age: We may ask for a urine sample to do a pregnancy test. If you are pregnant, your surgery may need to be rescheduled because some treatments and medicines can harm unborn babies.

## Notes for Family and Friends

- After the patient goes to the OR, you will be taken to the surgical waiting room.
- Our staff and volunteers will tell you about how the surgery is going. Please let us know if you leave the waiting room.
- Some sites have electronic tracking boards for you to follow the surgery progress.

## Anesthesia Care

Your anesthesia care will be provided by a doctor (Anesthesiologist), a Certified Registered Nurse Anesthetist (CRNA), or both, working as a team. The anesthesia provider will talk with you before surgery, review your medical history, your medicines, and ask about reactions you may have had in the past to medicines or anesthesia.

During the surgery the anesthesia team will:

- Give you anesthesia medicine and other medicines.
- Watch all your vital signs like heart rate and blood pressure.

## What is anesthesia?

Anesthesia is medicine that keeps you comfortable during surgery. The anesthesia provider will talk with you to decide which kind of medicine is best for you and your type of surgery. You may be given medicine to:

- Keep you sleeping and comfortable during the surgery.
- Help you relax.
- Prevent pain during surgery.
- Reduce pain after surgery.





## The Operating Room (OR)

### Surgery team

The surgery team will wear hair covers and may wear masks over their noses and mouths.

- **Please ask us to speak louder if you have trouble understanding us through our masks.**

### About the OR

- The OR will be brightly lit.
- You may be asked to lie down on a narrow operating table.
- A safety strap may be used.
- We will provide ways to keep you warm.
- Sticky patches will be placed on your chest and side to monitor your heart.
- A cuff will be placed on your arm to measure your blood pressure.
- A small monitor will measure your oxygen level.
- Air-filled sleeves may be used to squeeze your lower legs gently to prevent blood clots from forming.

### Preventing infection

To help prevent infection of your incision:

- Surgical instruments and equipment are sterilized.
- During surgery, care is taken to make sure the instruments, gloves, and drapes are kept sterile.
- You may be given an antibiotic before your surgery.
- Your surgery site will be cleaned with an antiseptic right before surgery.
- After surgery, you may have a dressing over the incision to help keep it clean.

## Care After Surgery

After surgery, a nurse will watch you closely as the anesthesia wears off. We will check your blood pressure, heart rate, breathing, oxygen level, how alert you are, and your comfort. You may be in a PACU (post anesthesia care unit) or an ICU (intensive care unit) for up to 2 hours while you wake up from surgery.

### Notes for Family and Friends

We will tell you when surgery is over. The surgeon will talk to you while your loved one is in the recovery area.

### As you wake up

- Do not try to get out of bed.
- You may be given oxygen if needed.
- You may have a mild sore throat if a tube was placed in your throat during surgery.
- You will have an IV in your hand or arm for fluids or medicine.
- If you feel sick to your stomach, ask for medicine to help you feel better. Sometimes the medicines used in surgery can upset your stomach.
- You may wake up with a tube (catheter) in your bladder to drain urine.



Oxygen may be given using a mask over your nose and mouth as shown here or small, short tubes that fit just inside your nose.

## About Pain Management

Pain is the body's normal response to an injury or surgery. It helps the body protect the hurt area. It is normal to have pain after surgery. The best way to manage pain is to plan for your comfort before your surgery.

Our goal is to manage your pain at a level that is comfortable for you. It may not be possible to stop your pain fully. But, you should be able to do the things that will help you heal:

- Take part in your health care planning.
- Walk or do other activity.
- Go to therapy or doctor visits.
- Eat, rest and sleep.

## Working together to manage your pain

Good pain management means you and your healthcare team working together.

- We will ask about your pain. You will be asked to rate your pain on a scale of zero to ten.
  - Zero (0) means no pain.
  - Ten (10) means the worst pain imaginable.
- We will use a different way to rate your pain if you cannot rate your own pain.
- We include you in planning your care, a part of which is managing your pain.
- We will ask about your pain after treatment to check if you feel better.
- We will teach you about pain and pain control options.

## What you can do to have good pain management

- Tell us about ways you have managed your pain in the past.
- Medicines take time to work. Unless your pain is near "0," make sure to ask for your next pill before the last one wears off. Waiting too long can make it hard to control your pain.
- If you have concerns about addiction to pain medicines, please talk to your surgeon.
- Tell us if the medicine or treatment helped to control your pain.

## Many ways to manage pain with medicine

There are many ways to manage pain. Pain pills can work as well as medicine given in an IV. The following methods are often used to help surgery pain:

- **Pain pills** help pain all through your body. They are swallowed and take about 30 minutes to work. If possible, take with food. Take your pain pills before activities that may increase your pain like taking a walk. Pain pills will work longer than IV medicines.
- **IV pain medicines** help relieve pain within minutes. Medicine is given through your IV into a vein.
- **Patient controlled analgesia (PCA)** gives a more constant level of pain relief. You can give yourself pain medicine when you need it by pushing a button. Medicine is given through a pump that is connected to your IV. A computer controls the pump, so you cannot give yourself too much.
- **Nerve blocks** are injections given to manage pain right after surgery. The pain relief may last up to 24 hours.

## Other things may help relieve your pain besides medicines.

Ask your nurse if these options are available in your area.

- Apply ice or heat to the sore spot
- Have a back rub or massage
- Listen to soothing music
- Change position
- Think of peaceful surroundings or use guided imagery
- Keep busy with reading, needlework, or other hobbies, talking with friends, or watching TV.
- Breathe for relaxation
- Dim the lights
- Practice meditation or prayer
- Relax with aromatherapy

## Planning for a Successful Recovery

Your doctor and nurse will help you plan your recovery. You may also talk to a social worker or case manager about whether you need help at home. If needed, arrangements will be made for you to stay at a skilled nursing facility or other medical center as you recover.

## Make a plan

The effects of anesthesia last about 24 hours. Anesthesia, pain, and medicines can:

- Make you drowsy or sleepy.
- Make you feel sick to your stomach.
- Affect your thinking in a way that makes you more likely to make a bad decision or forget something.

For these reasons:

- Arrange a ride home from the hospital or surgery center as directed. Your surgery may be rescheduled if you do not have an adult to bring you home.
- Ask someone to stay with you for 24 hours after you leave the hospital or surgery center. That person should be present when you are given your instructions for care at home.
- Make sure that you and the person staying with you understand your care before leaving the hospital or surgery center.
- Ask your nurse or doctor if you need more information.

## For your safety – 24 hours after surgery

- Do not use sleeping pills.
- Do not drink alcoholic beverages.
- Do not make any important decisions or sign important papers.
- Do not drive a motor vehicle, operate machinery, or use power tools.

**Take deep breaths** every hour while you are awake to clear anesthesia from your lungs and help prevent pneumonia. If you have an incentive spirometer, use it as directed.

**Walking and moving your legs** will help your blood flow normally. Activity will help prevent blood clots from forming. Walking and moving will also help your bowel function return to normal.

**Healthful eating** will help you recover. Start by eating small amounts of easy-to-digest foods. If you are given a special diet, be sure to follow it.

## Preventing constipation

Constipation is a common and often uncomfortable problem after surgery. This means you have bowel movements fewer than 3 times a week, or you have to strain to pass hard, dry stool. Constipation can be made worse or be caused by using pain medicines. Do these simple things to prevent constipation:

- Drink at least eight 8-ounce glasses a water every day.
- Do some physical activity as directed after surgery. Walking is often a good choice.
- Talk to your doctor about diet and medicines that can help prevent or treat constipation.

## Incision and dressing care

When you go home, you may have a dressing over your incision (surgical cut). You will be shown how to care for the incision and any dressings. If you are not able to care for your own incision, a family member will be shown how to care for the incision and dressing.

- Clean your hands before and after caring for the incision to help prevent infections.
- Keep the incision clean by using clean dressings as you are shown.

## See your doctor after surgery

Seeing your doctor or surgeon is an important part of your recovery. The number of visits that you have and when they are scheduled will depend on your needs.

- Tell us if you think that going to a doctor's appointment will be hard for you.

## When to Call the Surgeon

### Call your surgeon if:

- You have a fever over 101 degrees Fahrenheit (38.3 degrees Celsius).
- Your incision:
  - Has increasing redness
  - Has increasing swelling
  - Is more painful than it has been
  - Oozes a new drainage or it smells bad
  - Bleeds enough to soak through your dressing
- Your pain medicine is not working for you (you are not sleeping well or you are not able to be up and moving because of the pain).
- You have side effects from your medicines such as an upset stomach, throwing up, redness, rash, or itching.
- You have any questions or concerns about your condition.



