



Inpatient Surgery Information

The Lady Minto Hospital
 241 Eighth Street, Cochrane, Ontario P0L 1C0
 Phone: 705-272-7200

About Your Care

You and your doctor have agreed that you need an operation. Staying in the hospital may be a new experience for you. This booklet will give you information about what to expect during your stay and help you prepare for your surgery and your recovery.



Your Health Care Team includes:

Doctor(s)	Pharmacist	Dietitian
Registered Nurses	Physiotherapist	Respiratory Therapist
Discharge Planner	Community Care Access Centre "Homecare"	

We plan your care based on very specific standards and we use all available resources. Our team monitors how you do throughout your hospital stay. Based on specific criteria we can determine when you are ready to be discharged safely. If you need the assistance of community nursing or other resources we'll make sure those are arranged before you leave.

The healthcare workers at Lady Minto Hospital are working hard to make health care safety a priority. Everyone has a role to make health care safe, including you, the patient. You can play a vital role in making your surgical procedure safe by becoming an active involved member of your health care team.

The Pre-Admission Clinic

- Located in the Operating Department.
- This appointment will help to prepare you for your operation.
- You will be given useful information about your surgery, how to get ready, what to expect and how to plan for your recovery. Information on any Lab or x-rays needed to be done.
- It is another chance to ask questions.
- Instructions about any tests that you will require before surgery will be explained to you.
- If an anesthetic assessment is required, it will normally be done during your appointment.
- Please encourage a family member or friend to come with you.
- If you are under 12 years of age, your parent or guardian must stay for the entire time while you are in the operating room.
- Please bring the following to your Pre-Admission Clinic appointment and on the day of surgery:
 - Health Card
 - Private Insurance Card
 - All of your medication in original containers, including prescription drugs, insulin, inhalers (puffers), over-the-counter, herbal and alternative therapy.
 - Assistive aids such as crutches, walkers, canes that you usually use or as ordered by your doctor.

When you come to Hospital:

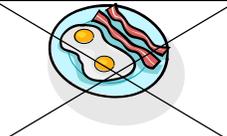
You Must Bring	Do Not Bring
<p>To Pre-Admission Clinic appointment and on the day of Surgery:</p> <ul style="list-style-type: none"> ▫ Health Card ▫ Private Insurance Card ▫ Photo ID, if available ▫ All of your medication in original containers, including prescription drugs, insulin, inhalers (puffers), over-the-counter, herbal and alternative therapy. ▫ Assistive or treatment aids such as crutches, walkers, canes, CPAP, peak flowmeter, etc. that you usually use or as ordered by your doctor. 	<ul style="list-style-type: none"> ▫ Large sums of money ▫ Jewellery ▫ Credit cards ▫ Television or radio ▫ Fans ▫ Cell phones ▫ Perfume/aftershave <p>Note: The hospital is not responsible for the loss of personal items or valuables.</p>
We Suggest you bring:	
<ul style="list-style-type: none"> ▫ Comb and brush ▫ Toothbrush, toothpaste, mouthwash ▫ Denture cup ▫ Glasses ▫ Contact lens cleaners and container ▫ Shampoo, personal lotion, soap ▫ Razor (electric preferred) and shaving cream 	<ul style="list-style-type: none"> ▫ Kleenex ▫ Sanitary napkins/tampons ▫ Housecoat ▫ Slippers (non-slip, flat soles) ▫ Nightgown or pajamas ▫ Undergarments <p>You may bring a small amount of money for a TV rental.</p>
<p>NOTE:</p> <ul style="list-style-type: none"> ▫ We recommend that personal valuables and large sums of money be left at home. ▫ Lockers are available. ▫ The hospital cannot be responsible for loss or damage of personal items or money. 	

Since you will be admitted to the hospital on the morning of your surgery, you will need to do some of the preparation while still at home.

Bring this booklet to the hospital so you can refer to the information in it.

	<p>You may be required to have x-rays/tests done before surgery. Ask questions if you think the imaging being done does not make sense to you (ie. having surgery on right knee and having the left knee x-rayed).</p>
	<p>If you normally take medication prescribed by your doctor, you will be given instruction for the morning of surgery, especially if you take heart, blood pressure, insulin or blood thinning medication. If you have questions, please ask your doctor or the nurse.</p>
	<p>If your health changes or if you develop a cold, flu, fever or other illness anytime before your operation, please call Lady Minto Hospital at 272-7200 and leave a message as soon as possible.</p>

On the morning of your surgery

Night before Surgery: <ul style="list-style-type: none"> Nothing to eat after midnight 			
Medication If instructed take your usual medication, take with a sip of water. You will be given specific information about your medications at the time of your pre-admission clinic appointment.		Hygiene <ul style="list-style-type: none"> Bathe and wash your hair the night before or the morning of surgery. Wear clean, loose fitting clothing. Do not wear any makeup, nail polish or perfume. 	
Parking Parking is available at the front of the hospital.		Visiting Hours are from 11 am to 8:30 pm. Exceptions for special circumstances are permitted. No more than 2 visitors may visit at a time. Children must be accompanied by an adult.	
Televisions Are available for rent. Inquire at reception desk.		Telephones Are available in patient rooms.	
		No Smoking Smoking is not permitted in the hospital or on hospital property.	

↪ **Emergencies and other delays in the Operating Room (OR) may cause change in your OR time.**

When you arrive from home to the Operating Department a nurse:			
a	will give you an ID bracelet. Check that the information on your bracelet is correct. DO NOT REMOVE.		
b	will review your chart.		
c	will review with you the consent you signed for your surgery/procedure. If you have not signed your consent, you will be asked to sign an informed consent which confirms you and your doctor have discussed the surgery including what each other expects and risks associated with the surgery.		
d	will take your blood pressure, temperature and pulse.		
e	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <u>will ask you to:</u> <ul style="list-style-type: none"> ⊙ remove glasses or contact lenses ⊙ remove hairpins, barrettes, etc. ⊙ remove all personal clothing ⊙ put on hospital gown </td> <td style="width: 50%; vertical-align: top;"> <u>You may keep:</u> <ul style="list-style-type: none"> ⊙ dentures ⊙ medic alert bracelets </td> </tr> </table>	<u>will ask you to:</u> <ul style="list-style-type: none"> ⊙ remove glasses or contact lenses ⊙ remove hairpins, barrettes, etc. ⊙ remove all personal clothing ⊙ put on hospital gown 	<u>You may keep:</u> <ul style="list-style-type: none"> ⊙ dentures ⊙ medic alert bracelets
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f	may start an intravenous in your arm before surgery.		
g	May give you medication that you need before your operation.		

To improve safety...

- ✓ The staff responsible for your care will confirm:
 - Who you are
 - What kind of surgery you are having
 - The expected part of your body on which surgery is to be performed
 - What you tell them against the documents provided by your doctor's office, including x-rays.
 - **You will be asked these questions many times.**
 - **You may find this irritating, but this is being done for your safety.**
- ✓ Depending on the type of surgery you are having, the doctor who will perform your surgery will mark the correct location on your body where the procedure is being performed. This is called site marking and is an important step in ensuring your safety and preventing errors, especially if you are having surgery on one of your arms, legs, hands, fingers eyes ears, etc. The mark or symbol may be made with a skin marking pen or a sticker may be applied to your skin.
- ✓ If at all possible, the mark will be made before you are given any medicine to make you sleepy. If you will need to be sedated before the mark can be made, a family member or friend may be asked to oversee the marking of the correct site. If no one is available, another member of the healthcare team will make sure that the correct site is marked.
- ✓ ONLY the location where the procedure is to be performed is marked. It can be confusing if other sites are marked.
- ✓ When it is time for your surgery, you will be transported to the Operating Room accompanied by a staff member of the surgical program. In the operating room, the nurses will explain the things they are doing, as they prepare you for surgery.
- ✓ The surgical team will take a "time out" just before beginning your surgery. During the "time out", the members of the health care team assure themselves that they are performing the correct procedure at the correct site and on the correct person.

After Surgery

Recovery Area

- You will awaken in the Post-anesthetic Care Unit, where nurses will watch your blood pressure, pulse and breathing. They will also check the dressing (bandage) over your incision.
- Your doctor or nurse will ask you about any pain you may have and rate your pain. The health care team will be assessing your pain and providing suitable relief through medicines and other methods.
- As soon as your condition is stable, you will be taken by stretcher to the room where you will stay during the rest of your hospitalization. Your family can visit you once you are in your bed, and the nurses have checked your condition.

Nursing Unit (Surgical Ward)

- Get moving as soon as possible. Usually within the first 24 hours, you will get up with help. Moving early helps prevent potential complications after surgery.
- The staff will ask you to do your breathing exercises frequently. Please practice them before surgery.
- Relax and rest between meals, visits and other activities.
- Visitors are nice, but can be very tiring. You may want to encourage them to visit you once you return home, instead of at the hospital.
- Whenever you are asked to take a medicine, especially a new one, ask what it is for and its side effects. This will help ensure that you are receiving the correct medicine. If you have any questions or concerns about any medicine, you should raise these with your doctor or nurse.
- As your condition permits, you may be encouraged to walk at least four times a day. Check with staff before walking.

Exercises

Exercises for your lungs: Deep breathing

Deep breathing helps expand your lungs more fully and should be done 10 times every ½ - 1 hour while awake until you are allowed out of bed and are more active.

- Place hands on your stomach, between the lower ribs.
- Breathe in deeply through your nose, allowing your tummy to swell up under your hands.
- Hold this breath for several seconds.
- Breathe out through your mouth as if gently blowing out a candle. Breathe out completely.



Spirometer

Your doctor may want to use a device to help you take bigger, deeper breaths. It is called an incentive spirometer.

To use this:

- Seal your lips around the mouthpiece.
- Breathe out completely, then breathe in sharply but slowly attempting to raise the balls to the tops of the tubes. Breathe out.
- Repeat 10 times, resting after each time. Do this every ½ - 1 hour.



Note: *If you have respiratory illness such as asthma or emphysema, you will be given specific instructions about your breathing exercises.*

Coughing

Coughing helps remove excess mucous from your lungs. If you feel the need to cough, do not hold it back. When coughing:

- Bend knees, feet flat on bed if possible.
- Support/splint your incision with your hands or pillow (does not apply to orthopedic patients). Press gently above and below the incision while coughing or deep breathing.



Leg exercises:

It is good for you to move around after surgery. While you are still in bed do the following exercises 10 times every hour.

- Legs straight, wiggle toes and bend feet up and down.
- Circle toes to the right then the left.
- Don't be afraid to move your arms and legs and turn about in bed, so you don't get stiff or sore.



Sitting up:

When getting out of bed, it will be most comfortable for you to:

- Bend your knees and turn yourself to one side.
- Lower your legs over the edge of the bed as you push yourself up sideways with your arms.

A nurse will assist you with this the first time you get up after your operation, and until you can do it yourself.



Anesthesia – General, Regional or Local

The type of anesthetic chosen for you will depend on the type of operation and your health. There are three types of anesthesia which are explained below.

General Anesthesia

May seem like being asleep but it's very different.

- During general anesthesia, your anesthesiologist keeps you in a state of carefully controlled unconsciousness, with a mixture of very strong medicines, so that the operation is painless.
- General anesthetic usually involves medicines being injected into your vein to make you unconscious, followed by a mixture of narcotics and anesthetic gases to keep you unconscious. A medicine to keep your muscles relaxed may be given to help the surgeon. Oxygen is administered at all times, at first with a mask over the face and then through a breathing tube inserted through the mouth into the airway, after you are unconscious.
- When you are conscious and able to breathe without help, the tube is removed.

Regional Anesthesia

- Local anesthetic (freezing) is injected through a needle which the anesthesiologist places close to the nerve or nerves supplying the part of the body involved in the operation, so the area is numbed and there is little discomfort. The freezing is short-lived.
- The most common type of regional anesthesia is spinal anesthesia, which can be used to freeze the abdomen and legs, but also can be used for other parts of the body such as an arm.
- You may remain fully awake if you wish but usually your anesthesiologist will give medication to make you relaxed and drowsy.
- Freezing medication can last for different lengths of times depending on the effects of the different local anesthetics.
- At the end of your operation you are moved to the recovery room awake, relaxed and pain free.

Local Anesthesia

- Is the temporary numbing of a small area by injecting local anesthetic (freezing) into the skin and underlying tissue so the procedure can be done painlessly.
- This may be combined with intravenous sedation.

Adapted from the Canadian Anesthesiologists' Society Public Information

http://www.cas.ca/public/anestheisd_and_you?default.asp?load=anesthesia (11/19/2004)

Managing your pain after surgery

Our goal is to make your stay in hospital as comfortable as possible. In order to achieve this goal your health care team will work closely with you to decide the best way to manage your pain to make you as comfortable as possible.

Pain management is important to your recovery. When you feel less pain you will be able to begin activities which are important to your recovery such as deep breathing and coughing, moving in bed, sitting in a chair and walking.

There are many different medicines which may be used to manage pain such as liquids or pills, suppositories, injections in your skin or certain muscles, intravenous medication or regional blocks (medicine used to temporarily freeze major nerves).

Your doctor(s) will discuss this with you and more information given to you at your pre-admission clinic appointment or when you arrive at the hospital.

Preparing for going home

While you are now getting ready for your admission to hospital, it is also important to think about your recovery at home after surgery. Sometimes returning home from hospital can be more complicated than you expect. The best way to avoid problems is to start planning for your discharge from hospital now.

Here is a checklist of things that could possibly make discharge home difficult. Now is the time to think about how you can get some help from family, friends, or community services.

<p>Homemaking</p> 	<ul style="list-style-type: none"> • Will you be able to do the cooking? <input type="radio"/> Yes <input type="radio"/> No • Will you be able to do the laundry? <input type="radio"/> Yes <input type="radio"/> No • Will you be able to do the cleaning? <input type="radio"/> Yes <input type="radio"/> No • Will you be able to do grocery shopping? <input type="radio"/> Yes <input type="radio"/> No • Can you get help from family or friends with household chores if you need it? <input type="radio"/> Yes <input type="radio"/> No
<p>Getting around the House</p> 	<ul style="list-style-type: none"> • Does your home have many stairs? If so, will you be able to climb them? <input type="radio"/> Yes <input type="radio"/> No • Will you be able to get to the bathroom? <input type="radio"/> Yes <input type="radio"/> No • Will you need an equipment (walker, wheelchair, Bath bench, grab bars)? <input type="radio"/> Yes <input type="radio"/> No • If you need help with stairs, getting to the bathroom, etc. is there someone at home to give you that help? <input type="radio"/> Yes <input type="radio"/> No
<p>Finances</p> 	<ul style="list-style-type: none"> • Do you have medical insurance to cover the cost of renting or buying equipment, medication etc.? <input type="radio"/> Yes <input type="radio"/> No • Will you be able to do your own banking? If not, is there someone who can help you? <input type="radio"/> Yes <input type="radio"/> No • Will you have problems with the cost if you need to pay for special services, transportation etc.? <input type="radio"/> Yes <input type="radio"/> No
<p>Transportation</p> 	<ul style="list-style-type: none"> • Will you need help getting home from the hospital? <input type="radio"/> Yes <input type="radio"/> No • Have you planned to have family or friends bring you home? <input type="radio"/> Yes <input type="radio"/> No • Will you need to use a taxi? <input type="radio"/> Yes <input type="radio"/> No • Will you be able to go out for doctors appointments, errands, etc.? <input type="radio"/> Yes <input type="radio"/> No • If not, is there someone to help you? <input type="radio"/> Yes <input type="radio"/> No

Answering "NO" to any of these questions doesn't mean there is a problem; it only means that you need to think a little bit about it before you come to hospital so that you will have a safe and easy discharge home.

Your health care team will begin to plan for your discharge with you and your family when you arrive for your surgery. Your expected length of stay will be discussed and planning will occur accordingly. If you are concerned about your discharge the social worker and/or homecare nurse can be of assistance.

Before being discharged from the hospital the staff will instruct you in all the information you will need to know to care for yourself at home. If nursing care is needed, your doctor may ask the Home Care nurses to come and see you in your home.

If your recovery is moving along well the doctor may decide to send you home earlier than you may have discussed before your surgery. Please arrange for this possibility.