

OPERATIVE CARE A GUIDE TO SURGERY



PRE AND POST OPERATIVE CARE

You and your surgeon have decided that you need surgery (an operation). This may be your first surgery or you may have many questions about having surgery. This pamphlet explains what to expect before and after surgery and answers some commonly asked questions about surgery. If you have additional questions, please ask your surgeon or nurse.

TYPES OF SURGICAL STAYS

- 1. Outpatient (Same day Surgery): You will go home the same day as your surgery after a brief recovery period.
- 2. Observation: You will stay overnight but will be in the hospital less than 24 hours after your recovery period.
- 3. Inpatient: You will stay in the hospital for I or more days. Inpatient surgeries require more nursing care after your recovery period.

GETTING READY FOR YOUR SURGERY

To prepare for surgery, you will need to do some things at home before coming to the hospital:

- Cut down or quit smoking. Smoking causes health problems that slow down your recovery time.
- Report any changes in your health to your surgeon (including flu and cold symptoms).
- Follow instructions regarding medications before your surgery. You may have additional medications to take or you may be required to stop taking certain medications.

THE DAY OF SURGERY

On the day of your surgery, you will need to

- Refrain from eating or drinking (including no water or chewing gum) for a specific time before surgery. This will help prevent you from vomiting and breathing stomach contents into your lungs during surgery. Your surgery may be cancelled if you do eat or drink!!
- Take only the medications that your nurse or doctor told you to take. Drink only a small amount of water with pills.
- Take a bath or shower
- Brush your teeth
- Remove all makeup, nail polish, and jewelry
- Leave money, credit cards, and valuables at home
- Bring with you to the hospital:

Cases and solutions for contacts, glasses, hearing aides and dentures that you may wear.

Medications or forms you have been asked to provide. Toothbrush, toothpaste, slippers, and any other items you will need if your surgery requires you to stay overnight.

If you are an outpatient (same day surgery patient):

- Wear loose comfortable clothing
- Make plans for an adult to:
 - Listen to your discharge instructions
 - Drive you home after surgery—YOU MAY NOT DRIVE YOURSELF HOME AFTER SURGERY.
 - Stay with you for the rest of the day after you arrive home from surgery.

COMING TO THE HOSPITAL

Admitting

Please come to the hospital 2 hours prior to your scheduled surgery time. Check in at the hospital's Admitting Office near the main hospital entrance, unless other arrangements have been made for you.

Same Day Surgery Unit

A hospital staff member will direct you to the Same Day Surgery Unit. Family members can escort you. On the unit, you will change into a hospital gown. A nurse will check your heart rate and blood pressure and may start an IV (intravenous line). The nurse will also ask you some questions. You may notice that the nurses and doctors will often ask some of the same questions. This is done for your safety so that important things about you are checked and re-checked (for example: correct surgery, correct side, allergy information).

Anesthesia

Your Anesthesiologist, a doctor or a certified nurse anesthetist will help you stay comfortable and relaxed during surgery and will check your test results and health history. He/she will tell you about the type of anesthesia you will receive. You may also be given some medication that will help you relax. This medication can also make you so relaxed that you may not remember anything until after leaving the operating room.

Family Waiting

When it is time for surgery your family will be directed to the surgery waiting area or back to the Same Day Surgery patient room, depending on your surgeon's preferences.

THE OPERATING ROOM

Your anesthetist and a nurse will take you to the operating room. The lights will be bright and the room may feel cool. The doctors and nurses will normally be wearing masks, hair coverings, sterile gloves, and sterile gowns, although some procedures do not require all of these protective coverings.

You will be put onto a special bed. Sticky patches will be put on your chest to monitor your heart. A blood pressure cuff will be put on your arm and a clip will be put on your finger to monitor your oxygen level. Your anesthesia provider connects these to monitoring equipment to keep track of your vital signs throughout your surgery.

TYPES OF ANESTHESIA

General anesthesia affects your entire body. Anesthetics (medication to make you sleepy) may be given through your IV line and/or as a gas that you breathe. Once you are asleep, a tube is placed inside your mouth and through your windpipe into your lungs to give you the anesthetic gases during surgery. This "breathing" tube is usually removed before you wake up, so you won't know the tube has been inserted or removed. You may notice a sore or scratchy throat when you wake up.

Regional anesthesia affects only a particular section of your body. You may receive some medication to help you relax. You may be awake but will feel no pain.

Local anesthesia and IV sedation Local anesthetic will be used to numb the area around the incision (where the skin is cut). You will receive medication to make you comfortable and relaxed during your surgery.

5

AFTER SURGERY

When surgery is over, you will go to the Post Anesthesia Care Unit (PACU) while the anesthesia wears off. The nurse will check your vital signs (pulse and blood pressure) and dressing site. Depending on your type of surgery, you may have some tubes attached to your body. These tubes are needed to provide fluid and oxygen, remove stomach gases, drain fluid from the incision site, and remove urine. Let your nurse know if you are cold, in pain or if you have an upset stomach. Warm blankets and medications are available to help make you feel more comfortable.

While you are in the PACU, your surgeon will talk to your family to let them know how you are doing.

If you are an inpatient you will be in the PACU for about 1-2 hours. You will then go to your hospital room. Your family will be told when you go to your hospital room. They will be able to visit you there.

If you are an outpatient and depending on the type of surgery you have had, you may spend approximately I hour in the PACU or you may be taken back to the Same Day Surgery Unit to complete your recovery phase after you wake up.

Family members will be able to be with you while you finish your hospital recovery on the Same Day Surgery Unit. You will spend I - 2 hours in this area before you go home. The nurses will assess you and determine when you meet discharge criteria.

DISCHARGE INSTRUCTIONS

When it is time for you to go home after outpatient surgery, you will be given some written instructions about how to care for yourself.

- You may be sleepy so another adult must listen to these instructions and drive you home.
- You will not be able to go home unless another adult is with you.
- You should not drive or operate dangerous machinery for 24 hours after anesthesia.
- You will need an adult to be with you after you get home the day of surgery.

YOUR RECOVERY

Exercises

You will be told to cough and deep breathe to help prevent breathing problems and pneumonia after surgery. You may be given a special breathing device that measures how deep you are breathing. You will want to hold or support your incision area to prevent discomfort while coughing.

Preventing Blood Clots

Your surgeon may order special elastic stockings or pressure devices for your legs to improve blood flow and prevent blood clots. Doing ankle pumps (pointing and flexing your feet) will also be helpful. Soon after surgery the nurses will help you to turn in bed, sit up, and walk. These activities will help get your body functions back to normal.

Pain Control

You may be given pain medication in the hospital or be sent home with a prescription for some. Let your nurse or doctor know when you have pain. It is important to keep your pain level low so you will be able to move around easily to prevent other problems. You can measure your pain by rating it on a scale of one to ten with ten being the highest pain level and one being the lowest pain level. You will be asked to set a pain score goal.

PAIN CONTROL AND PAIN MEDICATIONS

If you take a pain medication as you are told, you will not become addicted to it. However, for your safety, it is important to not drink alcohol, not drive, and not operate dangerous machines while taking some pain medications. Read the label or speak with your nurse.

If you have major surgery, your surgeon may order a type of pain medication called a Patient Controlled Analgesia (PCA). This uses a pump and syringe system with tubing connected to your IV line. When you want some pain medication, your press a control button. Pain medication is then given directly into your blood stream, taking away pain in just a few minutes. You are the only person who should press the control button and never your family member. The PCA pump is only used for patients while they are in the hospital.

EATING AND DRINKING

Your digestive system may be slow after surgery, especially after having abdominal (stomach area) surgery. If you are an inpatient you may need to be fed through your IV line and may have a tube in your nose to keep you stomach empty.

You may be given ice right after surgery, then clear liquids (broth, jello, tea, water). You will be able to eat regular foods as you feel better. How soon you can have liquids or solid food may depend on the kind of surgery you have and any special orders from your doctor.

NAUSEA, CONSTIPATION, AND GAS

Nausea is a common problem caused by anesthesia and pain medications. Some ways to help prevent nausea include:

- Eating easily-digested foods like crackers, toast, jello, soft drinks, tea, or clear broths.
- Eating small amounts.
- Avoiding fatty meats and fried foods.

Let your nurse or doctor know if you have severe nausea so you can be given medications to help you feel better. Follow your doctor's instructions to prevent nausea and vomiting after surgery.

Constipation and gas pain are other problems that may occur after anesthesia, surgery, and pain medications. To help you feel more comfortable and to get your body functions back to normal:

- Drink lot of fluids.
- Turn from side to side in the bed every I to 2 hours.
- Walk around the hospital unit or around your home several times a day.



GOING HOME

Before you go home from the hospital, you will receive instructions about how to care for yourself at home. You will also receive a list of your current medications and a Food an Drug Interaction guide.

Your surgeon may order some new prescriptions. If you are taking medication for heart problems, diabetes, or other medical problems, ask your regular doctor or pharmacist about possible food and drug interactions (problems caused when 2 or more drugs work against each other).

Activity

When you leave the hospital, you will receive a list of activities to avoid. Activities to avoid may include:

- Driving
- Lifting heavy objects like a child, large and heavy purse, groceries, wet laundry
- Difficult activities such as yard work, running, going up and down stairs
- Sexual activity may also be restricted.

Feeling Tired

If is common to feel tired after any kind of surgery. You will need to rest at least the first few days after surgery. Increase your activity level slowly so you don't get too tired or strain your incision are. Be sure to ask your surgeon when you will be able to return to work. For major surgery, this may be 4 to 6 weeks.

Bathing and Showering

If you have a dressing, it is important to keep it dry. Water can damage stitches and can open up the incision, helping germs get in and lead to an infection. Your surgeon will tell you when it is safe to get the incision area wet.

10

INFECTIONS AND BLEEDING

An incision that is a little red and swollen is normal. However, it is important to contact your surgeon as soon as possible if you notice:

- · Increased redness or swelling of the incision
- · Incision becoming warmer or hot
- Smelly fluid draining from the incision
- Fever and chills

A bit of pink to red fluid from your incision may be normal. If the fluid is bright red, a small blood clot may have broken. Apply a clean washcloth over the incision and call your surgeon. Also, call your surgeon if you have severe pain or a burning sensation that is new.

OFFICE VISIT AFTER SURGERY

When you go home, you will receive instructions about an office visit with your surgeon. If is important to see your surgeon for a follow up visit after surgery to see how you are healing. You may need to have stitches, staples, drains, or a cast removed.



CALL YOUR SURGEON IMMEDIATELY IF YOU EXPERIENCE:

- Severe pain or nausea.
- Signs of infection or bleeding.
- Opening up of your incision.
- Numb, painful, swollen, white or blue fingers or toes.
- If your dressing comes off.
- If your tubing comes out.

ASKING QUESTIONS

Ask your doctors or nurses any questions you have. Write down your questions for your follow up visit. Keep these phone numbers handy:

Admitting Office 254-8864

Same Day Surgery 254-8887

Your Doctor



Daviess Community Hospital
1314 East Walnut Street Washington, Indiana 47501
(812) 254-2760
www.dchosp.org