

Preparing for Your Surgery and Hospital Stay

Royal Columbian Hospital



Pre-Admission Clinic

Date:

Time:

My Surgery

Date:

Check-in Time:

Surgery Time:

No food or milk products after midnight (12:00 a.m.) the night before surgery

If you are having bowel surgery, we give you specific instructions for when to stop food

Stop drinking clear fluids 3 hours before your Surgery Time
(unless instructed differently)

**If you do not follow these instructions,
your surgery could be cancelled and rescheduled for another date**

Bring this booklet to the Pre-Admission Clinic appointment and day of surgery.



Your surgeon's office calls you **1 business day before** your surgery to tell you what time to check-in at the hospital.

If you have not been called by 2:00 p.m. that day, call your surgeon's office.



Call your surgeon's office as soon as possible if you get a cold, fever, cough, or new illness/infection before surgery. Also, call if you become pregnant.



It is very important that you follow all the instructions from the Pre-Admission Clinic and in this booklet so there are no delays on your surgery day.



Sometimes we have to postpone a person's surgery due to unexpected events and emergencies. We review all options before deciding to postpone any person's surgery. We let you know as soon as possible. Your surgery will be rescheduled for another day by the surgeon's office.

As instructed by the anesthesiologist or my surgeon:



☐ I am to **stop taking** these medicines before my surgery and when.

What to stop

When to stop

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☐ I am to **take these medicines the morning of** surgery with a sip of water.

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Hint: Use the check boxes in this booklet to keep track of what you need to do and what you have done.

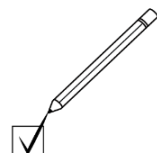


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Preparing for Surgery

In the months and weeks ahead

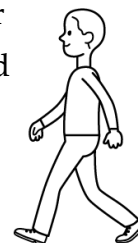
You are the most important person on your care team. You play a key role in staying as healthy as you can be before surgery and in your recovery after surgery.

Before surgery, focus on things you can do to be as strong and as healthy as possible. This helps you recover faster. You are also less likely to have any problems during or after surgery.

- ✓ **Healthy Diet:** Eat a balanced diet with healthy foods that include vegetables, fruit, lean protein, as well as foods rich in iron and calcium.



- ✓ **Activity and Exercise:** Stay active and exercise regularly (strengthens your muscles and improves your blood flow). Even walking 10 minutes a day and increasing the amount of time you walk will aide in your recovery. For advice, talk to your family practitioner or call the Physical Activity Services at HealthLinkBC (8-1-1) or healthlinkbc.ca/physical-activity.



- ✓ **Alcohol:** Limit how much alcohol you drink. If you have concerns about limiting alcohol, talk to your family practitioner.

Note: You cannot drink any alcohol for 24 hours before your surgery.



- ✓ **Smoking:** Stop smoking. You can get free nicotine patches or gum to help you quit. To register for the BC Smoking Cessation Program, call 8-1-1 or visit www.quitnow.ca. If you cannot quit, try to cut down.



HealthLinkBC.ca

For information on diet, exercise, alcohol, and smoking, **call 8-1-1.**

If you have any health concerns or want to improve certain aspects of your health before your surgery, speak to your family practitioner.

Family practitioner
Refers to family
doctor or nurse
practitioner

Plan ahead: You might need help the first few days at home after surgery. Make plans with family or friends to help you with meals, laundry, shopping, and getting to and from appointments.

Pre-Admission

This is a time where we review your general health and the medications you take. We also give you instructions on how to get ready for your surgery and what to expect while in the hospital.

To do this, we might ask you to come in for a Pre-Admission Clinic visit, arrange to see you using technology (virtual health visit), and/or speak with you by telephone.

Pre-Admission Clinic Visit

What to bring:

- ☐ This booklet
- ☐ Your BC Services Card / BC Care Card (personal health number)
- ☐ Photo Identification (such as a driver's license)
- ☐ The medicines you are currently taking in their original containers. This includes prescription medications, medicines you buy off the shelf in the pharmacy (or over the internet), vitamins, and herbal supplements.
- ☐ A support person if you wish (to help you remember what is said).
- ☐ An interpreter
If you don't speak or understand English well enough for medical conversations, you can ask us to arrange a medical interpreter for your visit. Bring someone with you as well to help with interpreting, especially if the interpreter needs to leave.

Medical interpreter
Interprets medical words that others (family/friends) might not understand how to interpret

During your visit, you meet with a nurse. You might also meet with an anesthesiologist who talks with you about any specific health concerns, choices for anesthesia, and options for managing your pain during surgery. You might have blood work or other tests done while at the hospital.

Anesthesiologist
During your surgery or procedure, this doctor:
- monitors your overall well-being
- gives the medicine that keeps you comfortable

If you have diabetes, you will get instructions during your Pre-Admission Clinic phone call or visit about when and what to eat and drink, and how to take your diabetes medicine before your surgery.

Anesthesia options

Depending on the surgery (or procedure), there are a number of possible options for how to keep you comfortable before, during, and after your surgery. These are called 'anesthetics'.

An anesthesiologist explains the options and recommends which would be best for you based on the type of surgery you are having, any health conditions you have, as well as what you prefer.

On the day of your surgery or procedure, you and the anesthesiologist for your surgery decide which anesthesia(s) option is best for you. No matter which option(s) is chosen, your anesthesiologist constantly monitors you before, during, and after the surgery, making sure you are comfortable.

Common anesthesia options to consider

- **General Anesthetic** – Medication given through an intravenous that causes a very deep sleep (unconsciousness). The deep sleep is controlled and easily reversed, allowing you to 'wake up' once the medications have been stopped at the end of the surgery.
- **Spinal Anesthetic** – Medication is injected near the spine to 'freeze' or numb your lower abdomen and legs, blocking feeling and movement from the waist down. This is a very common anesthetic, especially for hip and knee surgeries, C-sections, and many other procedures.
- **Nerve Block** – Medication is injected around a specific nerve or group of nerves to numb a specific part of the body, such as an arm or leg. A nerve block can be used as the main anesthetic, or along with a general or spinal anesthetic.
- **Local Anesthetic** - Medication is injected to numb a small, specific part of the body. This type is used for most surgeries, usually along with other types described here. For some minor procedures, local anesthetic might be all you need.
- **Intravenous Sedation** – For a spinal anesthetic, nerve block, or local anesthetic, you might also be given a sedative. The effects range from mild relaxation to deep sedation, depending on your surgery and what is needed to keep you comfortable.

Intravenous
Also called an 'I.V.'
(sounds like 'eye-vee')

One week before

☐ Arrange for:

- A ride to the hospital
- A ride home from the hospital
- An adult to stay with you and help you for a few days at home after



☐ Stop taking:

- All vitamins and herbal/health supplements (such as garlic, ginkgo, kava, St. John's Wort, ginseng, don quai, glucosamine)
- Fish oils



A number of these products are natural 'blood thinners'. If you continue to take them, it could increase your chances of bleeding after surgery.

☐ Continue to take your regular medicines unless you have been told something different by the anesthesiologist or your doctor.

- Use the space on the inside cover to list which medicines to stop and when.
- If you are taking a blood thinner, ask for instructions on how to take it before surgery.



☐ Stop any shaving, waxing, threading, or using any other method of removing hair from around where you are having surgery.



Your safety is important. Any metal on your skin can cause burns or injury during surgery.

☐ If you are having surgery on a limb (an arm or leg), remove nail polish, gel or acrylic nails, nail add-ons, and false nails from that limb before the surgery.

☐ If you have piercings that need a special tool to take them out, arrange to have them removed.

Nail polish, nail add-ons, and false nails are places where germs grow.

☐ Read all the instructions given to you and get the items needed.

- If you are having Bowel Surgery and your surgeon has asked you to do a 'bowel preparation', read the instructions carefully to find out when to start.

Skin Cleaning

Did the Pre-Admission Clinic or your surgeon ask you to clean your skin in a special way before surgery?

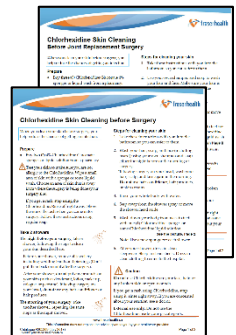
☐ Yes. Buy from a pharmacy the **Chlorhexidine Gluconate Antimicrobial Product** described in the skin cleaning instructions given to you.

Wash with the product the day before and the morning of surgery (2 washes).

If having joint replacement surgery, wash with the product 2 days before, the day before, and the morning of surgery (3 washes).

☐ Yes but allergic to chlorhexidine. Wash with soap and water.

☐ No. No special skin cleaning needed. Wash with soap and water.



The day before

- ☐ Follow your regular daily routine.
- ☐ If you are having bowel surgery, follow the instructions for how to prepare your bowel for surgery. Start or continue this preparation as instructed.
- ☐ For 24 hours before surgery, **do not drink any alcohol or use any recreational drugs.**
- ☐ Pack your bag for the hospital.



Personal belongings to pack

- ☐ Non-slip slippers or shoes
- ☐ Bath robe
- ☐ Toothbrush and toothpaste
- ☐ Comb and/or brush
- ☐ Shaving supplies (unscented)
- ☐ Eye glasses and case
- ☐ Dentures and container
- ☐ Hearing aid(s), case, and spare battery(s)
- ☐ Walking aid(s) such as cane, walker, or wheelchair
- ☐ _____
- ☐ _____



Label your bag with your name. Also, you might want to label your belongings.

Note: Ask someone to bring your bag to you **after the surgery**.
We have limited space to store everyone's bags during surgery.

On the day of surgery, you put your clothes and shoes in a plastic bag with your name on it. We give the bag to the person who brought you to the hospital or put it in a secure place until after your surgery.

Remember: Leave valuables at home.

The hospital is a public building. Valuables can go missing.
Send anything home that you are not using.

The night before

- ☐ Between dinner and midnight, drink some juice and eat at a light snack, **or** only drink juice if we direct you to do a 'bowel preparation'.

We suggest around 8:00 p.m.

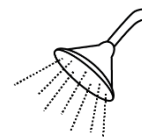
Eating a light snack and/or drinking juice in the evening gives you more energy after surgery.

No Bowel Preparation	or	With Bowel Preparation
3 cups (800 mL) of clear juice (apple or cranberry) plus a light snack Snack examples: - Bowl of yogurt - Bowl of cereal - Piece of toast - Bowl of rice		3 cups (800 mLs) of clear juice (apple or cranberry)
If you have diabetes , follow the instructions given to you.		

- ☐ Remove all jewellery and piercings (do this before cleaning your skin).

- ☐ Clean your skin as instructed by the Pre-Admission Clinic nurse.
If you did not get any specific instructions, take a shower or bath with soap and water tonight. Wash your hair tonight (or in the morning).

Any metal on your skin can cause burns or injury during surgery.



- ☐ Do not put any products on your skin (such as deodorant, lotion, make-up, cologne/perfume).

- ☐ Put on clean pyjamas (bedclothes) and sleep in clean bed sheets.

- ☐ **Do not** eat any food after midnight (12:00 a.m.).

Unless instructed differently, you can drink clear fluids up until 3 hours before your surgery time.



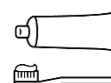
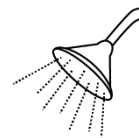
What are 'clear fluids'? Liquids you can see through such as water and juices (apple or cranberry).

No milk products. **No** alcohol. **No** juices with pulp.
No coffee, **No** tea



The morning of

- ☐ Clean your skin as instructed by the Pre-Admission Clinic nurse.
Make sure you remove all jewellery and piercings.
If you did not get any specific instructions, take a shower or bath with soap and water. Wash your hair if you did not wash it the night before.
- ☐ Dress in clean, loose-fitting clothes.
Remember - Do not put any products on your skin (such as deodorant, lotion, make-up, or cologne/perfume). No jewellery or piercings.
- ☐ Brush your teeth (or dentures), tongue, and roof of your mouth.
- ☐ Take your morning medications with a sip of water as directed by the anesthesiologist (or your surgeon).
 - Use the space on the inside cover to list which medicines to take.



3 hours before your surgery time:

- ☐ Drink 1 ½ cups (375 mL) of clear juice.
After this, **do not drink anything**.
If you have diabetes, follow the instructions given to you.



Drinking clear juice before surgery keeps you hydrated, helps control your blood sugar, and helps you from feeling sick to your stomach after surgery.

The last time you drink any clear fluid is
3 hours before your surgery time.



What to bring to the hospital

- ☐ This booklet
- ☐ Your BC Services Card / BC Care Card (personal health number) and Photo Identification (such as a driver's license)
- ☐ Hospital Identification bracelet (if you got one from the laboratory).
- ☐ A list of all the medicines you are currently taking
- ☐ Your diabetes pills or insulin (if you have diabetes)
- ☐ Your CPAP machine or dental device (if you have sleep apnea)
- ☐ An interpreter (if we were not able to arrange for a medical interpreter or you prefer to bring someone with you to act as your interpreter)

Leave all valuables at home:

- ✗ your wallet or purse
- ✗ credit cards
- ✗ money
- ✗ jewellery
- ✗ any other valuables

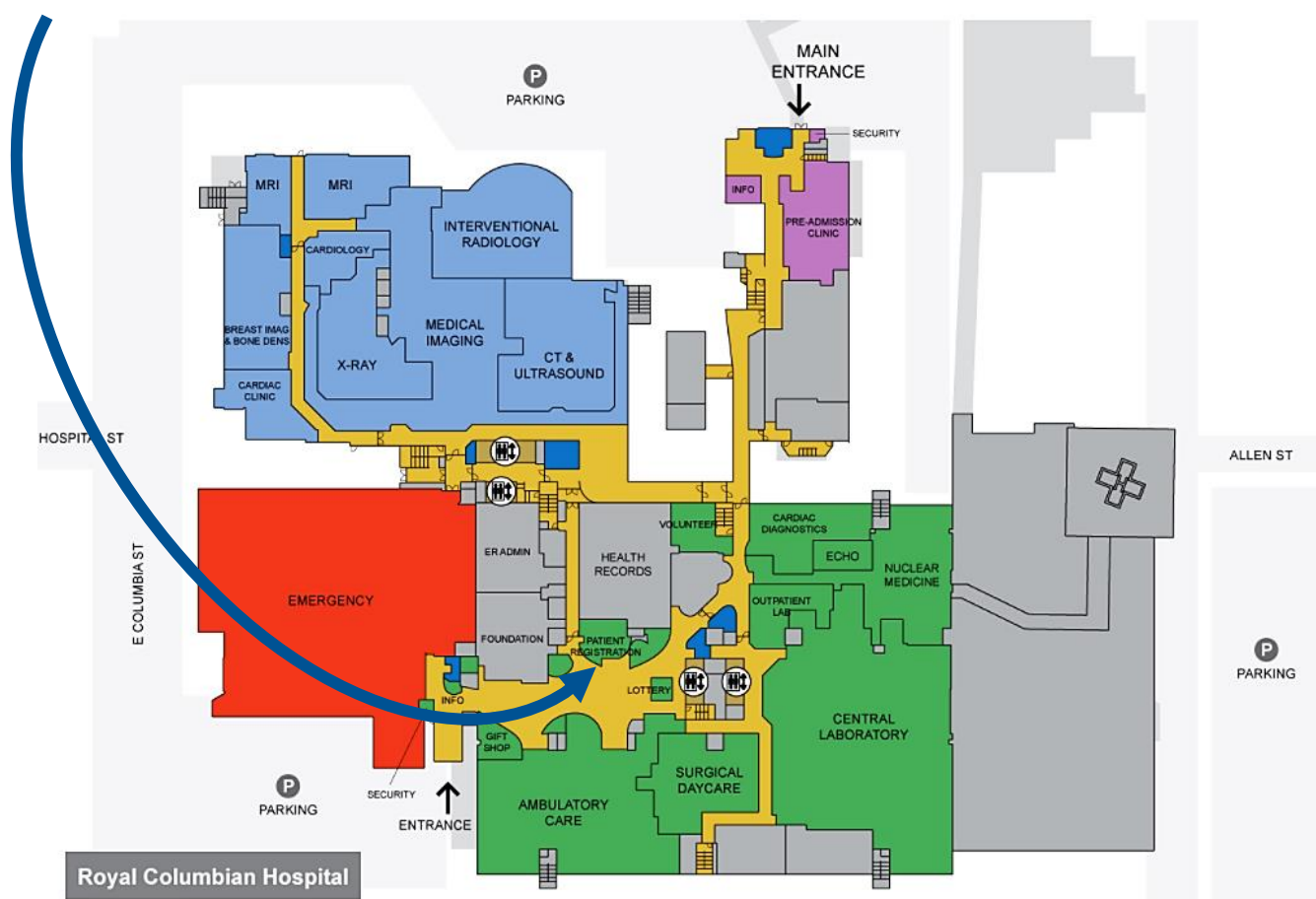
The Day of Your Surgery

Where to go – Royal Columbian Hospital

330 East Columbia Street
New Westminster, B.C.

Report to **Patient Registration** at your hospital 'Check-in Time'.

Patient Registration is located in the **Health Care Centre (Green Zone)**.



Level 1 Map

What to expect before surgery

- You are met by a nurse who:
 - Gives you a hospital gown to change into.
 - Asks you about your medications, allergies, and any reactions you have had to medications.
 - Checks your blood pressure, pulse, and temperature.
 - Starts an intravenous in one of your arms.
 - Gives you some medicine for you to swallow or in your intravenous.
- You are moved to the pre-surgery holding area.
- In the pre-surgery holding area, you meet:
 - the nurses who will be working with your surgeon
 - the anesthesiologist, who reviews your medical history and confirms with you the anesthesia(s) that will be used, as well as the plan for managing pain during surgery (see 'Anesthesia options' on page 3).
 - the surgeon, who confirms your surgery, answers any last minute questions, and might mark your skin with a special pen
- **Once in the Operating Room:**

You will hear us go through a **safety check**.

We will ask you to take part in this safety check by telling us your name and the kind of surgery you are having. We do this to confirm we are doing the correct surgery on the correct person.

We then ask you to remove your glasses, dentures, and finally, your hearing aid(s). We return them to you after your surgery.



What to Expect After Surgery

In the Post-Anesthetic Care Unit

- You are moved from the Operating Room to the Post-Anaesthetic Care Unit (P.A.C.U. or Recovery Room).
- Expect to stay here for at least 1 hour, or longer depending on your surgery.
- You are not able to have visitors at this time.
- During this time, nurses will
 - Check your blood pressure, pulse, breathing, temperature, and surgery site.
 - Ask you about your pain and give pain medicine as needed.
 - Ask you to do some deep breathing and coughing as well as some leg exercises.

In the Surgical Unit

- You can have visitors here. We have open visiting hours. However, remember rest is important for your recovery. Ask your visitors to limit their visits to short periods.
- Your family member or friend can bring in your bag with your personal belongings.
- Your nurses regularly check your blood pressure, pulse, breathing, temperature, surgery site, and pain level.

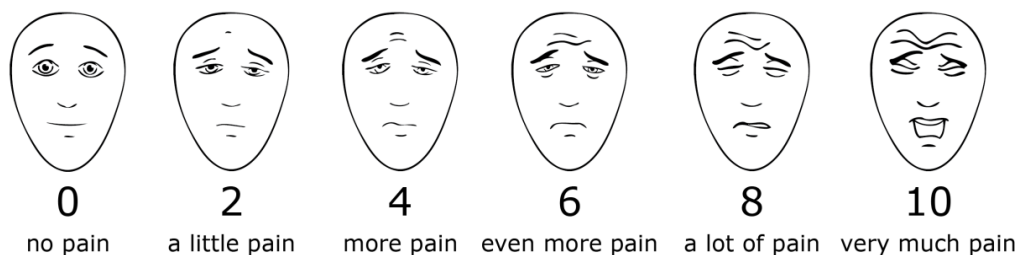


Take part in your recovery

- You play an important part in your recovery.
- Along with doing everything to help with your recovery, the next few pages tell you what you can do to help prevent problems such as pneumonia and blood clots.

Managing pain

- To help us know how much pain you are having, we use a pain scale like this one here. These faces show how much something can hurt (not what your face looks like when in pain). From left to right, the faces show more and more pain. You can point to the face that shows how much you hurt, or tell how much you hurt using words or a number from 0 to 10.¹



If it is easier, you can also describe your pain as 'small', 'medium', or 'large'.

- Your pain needs to be at a comfortable level so you can rest, move, heal, and exercise. You should be able to do normal activities such as washing, sitting, eating, and walking. For most people, this means having a pain score less than 4.
- Tell your nurse if the pain is making it hard for you to move, deep breathe, or rest. Don't wait until you are having a lot of the pain before you ask for help.
- We regularly give medicines for pain to help keep your pain under control. Depending on your surgery, the pain medicines we give could include:
 - Pill
 - Injection (needle or shot)
 - Into the intravenous (I.V.)
 - Epidural (numbing medicine given through a small tube into your back)
 - Nerve block (numbing medicine injected around the nerve near the surgery area)
- Other ways you can help ease your pain:

Do slow, relaxed breathing.	Listen to music.
Change positions	Hold a pillow to splint the surgery area when you cough or move

¹ Faces Pain Scale – Revised (FPS-R). www.iasp-pain.org/fpsr. Copyright © 2001, International Association for the Study of Pain®. Reproduced with permission.

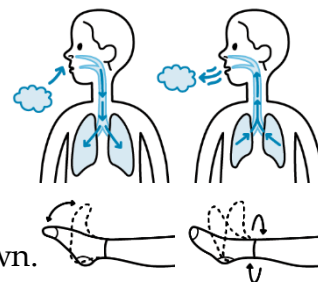
Feeling sick to your stomach

- If you feel sick to your stomach (nauseated) or throw up (vomit), we can give you medicine to settle your stomach.
Let us know as soon as you feel sick.
- Other ways to help settle your stomach:
Place a cool, damp cloth on your face or back of neck.
Take small sips of cold water or suck on ice chips.



Getting moving

- Expect us to ask you to sit up and even get out of bed the day of your surgery, unless your surgeon has ordered something different.
- The first few times you get out of bed, call for a nurse to be with you. Never try to get up on your own until you are steady on your feet.
- Sit in a chair for your meals.
- Go for a walk. Start with one walk and progress to 2 or more times a day.
- Do your deep breathing and coughing exercises at least 10 times every hour. Breathe in and out slowly and deeply 5 times. As you breathe out on the 5th breath, give 1 to 2 strong coughs.
- Do leg exercises. Bend and straighten your legs. Tighten and relax your buttock and thigh muscles. Point your toes up and down.



Drinking and eating

- For most surgeries, you can begin to drink fluids shortly after arriving on the Surgical Unit. For many surgeries, you can start eating within a few hours.
- Your body needs healthy foods with extra calories and protein to help you heal.
- Passing gas is a sign your bowels are starting to 'wake up' after surgery. Your nurse asks you often if you are passing gas or if your bowels have moved (had a poop).



Both having surgery and taking pain medicine can slow your bowels down. Getting out of bed, sitting up, and going for walks helps get your bowels moving.

Keeping healthy after surgery



Clean your teeth and mouth 2 to 4 times every day.



Keep head of bed at 30 degrees and foot of bed at 15 degrees, unless instructed not to.



Sit on the edge of the bed as soon as you can.

Sit in a chair for meals or sit up in bed.



Walk 3 or more times every day.

If pain stops you from getting up, ask for pain medicine.



Do deep breathing and coughing at least 10 times every hour.

Use an incentive spirometer if we give you one.



Wear non-slip shoes or socks when up.

Never try to get up on your own if you are unsteady. Call a nurse to help.



Ask us to take out your urinary catheter, if you have one.



Use the toilet (or bedside commode) to empty your bladder or bowels.

Wipe from front to back.



Clean your hands often.

It is the best way to stop the spread of germs.

Clean your hands with soap and water or hand sanitizer.

Clean your hands before eating and drinking, and after using the toilet and after touching surfaces others use.

Ask others to clean their hands before touching you.

Getting ready to go home

How long you stay in the hospital depends on the type of surgery. Your surgeon tells you how long you might be in the hospital. This is a general guideline.

We also give you instructions and information related to your specific surgery.

You are ready to go when:

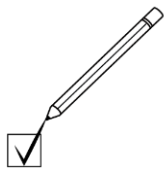
- ✓ You are eating and drinking regular food and drinks.
- ✓ Your bowels are working.
- ✓ Your incision is healing.
- ✓ Your pain is well controlled with pills.
- ✓ You can move around safely.
- ✓ You have a ride home from the hospital.**
- ✓ You have an adult to stay with you and help you for a few days, if needed.

** Please arrange for someone to pick you up any time before 11:00 a.m.

This is so we can get the bed cleaned and ready for the next person

Going home checklist

Before you leave, make sure you can check off all of these things.

- ☐ I know what medications (including new ones) I am taking, how to take them, and why I need to take them. 
- ☐ I have my prescription for medications.
- ☐ I know how to look after my incision.
- ☐ I know when I can drive and return to regular activities (such as work, exercise, sexual activity).
- ☐ I know what activities I am not allowed to do.
- ☐ I know what to watch for and when to get help.
- ☐ I know when to make an appointment for follow-up with my:
 - ☐ surgeon
 - ☐ family practitioner
 - ☐ other healthcare providers (such as home care, physiotherapy)

At Home

When to get help

Also refer to the information we give you about your specific surgery.

Call your surgeon or family practitioner if:

- You have chills or a fever over 38°C (100°F).
- Your incision is warm, red, swollen, or has blood or pus (yellow/green fluid) draining from it.
- You have a cough that continues to get worse.
- You notice stinging, burning, or pain when you urinate (go pee) or your urine smells bad. You have problems passing your urine.
- You have redness, tenderness, or pain in your calf or lower leg.
- Your pain does not decrease or ease with pain medicine, or stops you from moving and recovering.
- You are throwing up or having diarrhea often.
- You feel increasingly tired or dizzy.
- You have other worries or concerns about your recovery.

If you cannot contact your surgeon or family practitioner:

► Call Fraser Health Virtual Care, 10:00 a.m. to 10:00 p.m., daily, **1-800-314-0999**
fraserhealth.ca/virtualcare

► Call **8-1-1** (HealthLinkBC) to speak to a registered nurse any time - day or night.

Available in 130 languages.

For an interpreter, say your language in English. Wait until an interpreter comes on the phone.

Call 9-1-1 if you have any of the following:

- trouble breathing or shortness of breath
- chest pain
- sudden, severe pain



Questions I have...

About Royal Columbian Hospital

Smoke-, Scent- and Latex-Free:



For the health and safety of everyone, we are smoke-, scent-, and latex-free. Smoking is not allowed within the hospital or on our surrounding property.

We ask that you and your visitor not wear or use any scented products (such as perfumes, aftershaves, or colognes).

Please do not bring in any heavily scented flowers like lilies or lilacs. Only Mylar balloons are allowed. No latex balloons or other latex products.

Visiting Hours: We have open visiting hours for friends and family, however rest is important for recovery. We ask that visits be limited to short periods of time. Many units (or wards) have a specific time in the afternoon as a 'rest period'.



Security: Everyone who works or volunteers in the hospital wears identification with their photo, name, and title.



The hospital has 24-hour security. Uniformed guards routinely patrol the building and surrounding property.

Cafeteria: Located in the basement of the Health Care Centre (Green Zone). They offer a variety of meals, snacks, and drinks. Vending machines with snacks and drinks are throughout the hospital.



Television (TV), computer, Wi-Fi:



TV service is available for rent in patient rooms. Order forms and drop-off boxes are on each unit. Computers are available to use in the Patient Resource Centre. Fraser Health Guest Wi-Fi is available for personal devices within the hospital. No password needed.

Patient Resource Centre: Located in the Health Care Centre, main floor (Green Zone). We have information on a variety of health related topics, computers, and Wi-Fi here.



Gift Shop: Located on the main level of the Health Care Centre (Green Zone).



Parking and Transit: Parking on the hospital site is limited. Imperial Parking monitors the parking. The surrounding neighborhood has strict parking restrictions. Buses stop outside the hospital. The Sapperton SkyTrain Station is nearby.



www.fraserhealth.ca

This information does not replace the advice given to you by your healthcare provider.

Catalogue #264970 (December 2020)

To order: patienteduc@fraserhealth.ca

