

Preparing for Your Surgery and Hospital Stay

Abbotsford Regional Hospital

Pre-Admission Clinic	Date:	Time:
Anesthesiologist	Date:	Time:
Other:	Date:	Time:
My Surgery – Hospital Check-in	Date:	Time:
		Stop drinking at:
		Stop eating at:
•	_	inking when told, or be rescheduled for another date
Special instructions:		

Bring this booklet to the Pre-Admission Clinic appointment <u>and</u> day of surgery.

- The hospital 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 4:00 p.m., call 604-851-4878.
- 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.

I am to stop taking these medicines What to stop	s before my surgery and when. When to stop
•	ννηση το στορ
•	
•	
I am to take these medicines the n	norning of my surgery with a sip of water.
•	•
•	•
•	•
Use the check boxes in this bonneed to do and what you have	
need to do and what you have What to bring with you to the hos	done.
need to do and what you have What to bring with you to the hos This booklet	pital the day of your surgery Care Card (personal health number)
what to bring with you to the hos This booklet Your BC Services Card / BC and Photo Identification (such	pital the day of your surgery Care Card (personal health number)
what to bring with you to the hos This booklet Your BC Services Card / BC and Photo Identification (such	pital the day of your surgery Care Card (personal health number) h as a driver's license)
what to bring with you to the hos This booklet Your BC Services Card / BC and Photo Identification (such	pital the day of your surgery Care Card (personal health number) n as a driver's license) et (if you got one from the laboratory). ently taking, in their original containers.
What to bring with you to the hos This booklet Your BC Services Card / BC and Photo Identification (such Hospital Identification bracele The medicines you are currer If you have diabetes, your diabetes.	pital the day of your surgery Care Card (personal health number) n as a driver's license) et (if you got one from the laboratory). ently taking, in their original containers.

your wallet or pursemoneyany other valuables

jewellery

credit cards

Table of contents

Preparing for Surgery	1
In the months and weeks ahead	1
Pre-Admission	2
Anesthesia options	
One week before	
Three days before	
The day before	
The night before	
The morning of	
The December 2011	
The Day of Your Surgery	
Where to go	
What to expect before surgery	9
What to expect after surgery	10
In the Post-Anesthetic Care Unit	10
In the Surgical Unit	10
In the Surgical Unit	10
In the Surgical Unit	10 11 12
In the Surgical Unit	10 11 12
In the Surgical Unit Managing pain Feeling sick to your stomach Getting moving Drinking and eating	10 12 12 12
In the Surgical Unit	10 11 12 12 13
In the Surgical Unit Managing pain Feeling sick to your stomach Getting moving Drinking and eating Keeping healthy after surgery Getting ready to go home	10 11 12 12 13
In the Surgical Unit Managing pain Feeling sick to your stomach Getting moving Drinking and eating Keeping healthy after surgery	10 11 12 12 13
In the Surgical Unit Managing pain Feeling sick to your stomach Getting moving Drinking and eating Keeping healthy after surgery Getting ready to go home	10 12 12 12 13 14

- 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.

Questions I have		

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 <u>and</u> 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.

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

Anesthesiologist
During your surgery

or procedure, this

doctor:

Medical interpreter

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.

overall well-being
- gives the medicine
that keeps you
comfortable

- monitors your

If you have diabetes, the anesthesiologist or surgeon will give you instructions for when to eat and drink, and how to take your diabetes medicine.

If you do not have instructions, call 604-851-4878 at least one (1) business day before surgery. Ask to speak to a nurse.

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



A number of these

products are natural

'blood thinners'. If you continue to take them,

it could increase your chances of bleeding

after surgery.

Stop taking:

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



- Fish oils

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.



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.

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

Nail polish, nail addons, and false nails are places where germs grow.

during surgery.

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

- If you are having Bowel Surgery <u>and</u> 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 <u>and</u> the morning of surgery (2 washes). If having joint replacement surgery, wash with the product 2 days before, the day before, <u>and</u> 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.



Three day	s before	_
Stop usin	g all recreational drugs.	
The day b	efore	
Follow y	our regular daily routine.	
	e having bowel surgery, follow the instructions for how to prepare vel for surgery. Start or continue this preparation as instructed.	
For 24 ho	ours before surgery, do not drink any alcohol.	
Pack you	r bag for the hospital.	do L
Pe	rsonal belongings to pack Non-slip slippers or shoes	
	Bath robe	Label your bag with
	Toothbrush and toothpaste	your name. Also, you might want to label
	Comb and/or brush	your belongings.
	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	
		_
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, eat a light snack and drink fluids.

* If having **bowel surgery** and have done bowel preparation, **only** drink <u>clear</u> juice (apple, **white** grape, or **white** cranberry juice). **No food.**

Eating a light snack in the evening gives you more energy after surgery.

Snack examples:

Bowl of yogurt and glass of juice
Piece of toast or bowl of cereal and glass
of juice
Bowl of rice and glass of juice

Juice 2 to 3 cups (500 to 750 mLs)

If you have diabetes, follow the instructions given to you.

Remove all jewellery and piercings (do this <u>before</u> 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.

Make sure you clean in under your fingernails, between your toes, and in your belly button.

Wash your hair tonight (or in the morning).

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.

☐ **Stop** eating food as instructed and written on the front cover.

No chewing gum or candies from this time as well.



Continue to drink <u>clear fluids</u> up until 2 hours before hospital check-in time.

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

No milk products. No alcohol. No juices with pulp.

No coffee, No tea



skin can cause burns or injury during surgery.

Any metal on your

The morning of			
(or your surgeon).	dications as directed by the anest	<u> </u>	R. C.
☐ Follow any special instr	ructions given to you by your sur	rgeon or anesthesiologi	st.
Up to 6 hours before h	-in time is at 11:00 a.m. or laterospital check-in time, you can ear		
you get different instru	ctions from your surgeon).		
• ,	After this, do not eat anything. •	•	
Snack options:			
Slice of white toast with honey or jam No butter No margarine No nut butters	Small bowl of rice cereal or corn flakes with milk (skim, 1%, or 2%) No high fibre cereals such as granola, bran, or rolled oats	½ cup (125 mL) of cooked plain white rice No fried rice	
2 hours before your h	ospital check-in time:		Dialin a de actua
	L) of apple, grape, or cranberry	juice.	Drinking <u>clear</u> juice before surgery keeps
- ·	follow the instructions given to		you hydrated, helps control your blood sugar, and helps you
•A:	fter this, do not drink anything	. ◆	from feeling sick to your stomach after surgery.
☐ Make sure you remove	e all jewellery and piercings.		, ,
If you did not get any s	ructed by the Pre-Admission C pecific instructions, take a showe hair if you did not wash it the n	er or bath with soap	
-	tting clothes. at any products on your skin (sa ogne/perfume). No jewellery oa	1 /	
☐ Brush your teeth (or de	entures), tongue, <u>and</u> roof of yo		

The Day of Your Surgery

Where to go – Abbotsford Regional Hospital

32900 Marshall Road Abbotsford, B.C.

Report to Surgical Day Care, 4th floor, Fraser Wing.

If your hospital check-in time is before 7:00 a.m.:

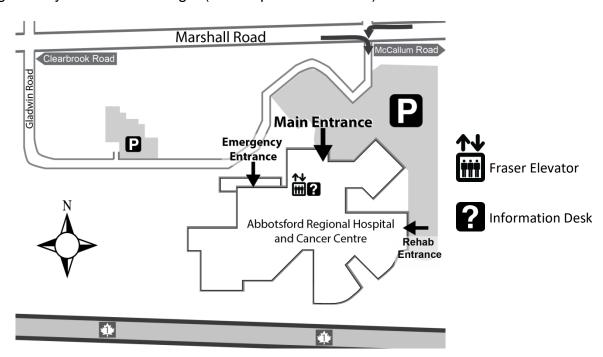
- Enter the hospital through the Emergency Entrance (You are on the 2nd floor).
- Go left as you enter.
- Take the elevator down to the 1st floor.
- Turn left out of the elevator and walk to the main lobby.
- Turn left past the Information desk.
- Take the Fraser elevators on the left to the 4th floor.

If your hospital check-in time is at 7:00 a.m. or later:

- Enter through the main entrance (1st floor).
- Turn right just after the parking meter station.
- Take the Fraser elevators on the left to the 4th floor.

On the 4th floor:

- Exit the elevator.
- Turn right off the elevator, then right again down the hall.
- Surgical Day Care is on the right (doors open at 6:00 a.m.).



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.

Note

If you don't speak or understand English well enough for medical conversations, we will do our best to arrange for a medical interpreter.

We ask that your family member/friend who came with you to stay until you are ready to go into the Operating Room.
Sometimes the medical interpreter has to leave

before this time.



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:
 - 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). wwwliasp-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.

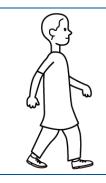


Keep head of bed at 30 degrees and foot of bed at 15 degrees, unless instructed not to.



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

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



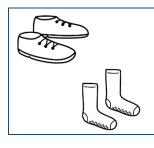
Walk 3 or more times every day.

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

Before you leave, make sure you can check off <u>all</u> 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 Abbotsford Regional 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 on the 1st floor. They offer a variety of meals, snacks, and drinks. Vending machines with snacks and drinks are located in the same area.

Television (TV), computer, Wi-Fi:





TV service is available for rent in patient rooms. You order TV service at the bedside by credit card or by ordering at the TV services desk at the main entrance. Computers are available to use in the Library. Fraser Health Guest Wi-Fi is available for personal devices within the hospital. No password needed.

Library Services: Located on the 1st floor near the



main entrance. We are open to the public. Our library staff are happy to help you access a computer and find health-related information.

Gift Shop: Located on the 1st floor at the end of the lobby near the cafeteria.



Parking and Transit: See the map on page 8.



Imperial Parking monitors the parking. Buses stop outside the hospital.

www.fraserhealth.ca

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

Catalogue #265355 (February 2021)

To order: patienteduc.fraserhealth.ca

