

W E L C O M E T O

# Surgical Services at Methodist Hospital

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DATE OF SURGERY

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TIME OF SURGERY

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ARRIVAL TIME FOR SURGERY

**REPORT TO:**

**Access Center**

North Lobby, Methodist Hospital

**Methodist Hospital Outpatient Surgery Center**

Next to Methodist Estabrook Cancer Center

**Methodist HealthWest Outpatient Surgery**

16120 West Dodge Road (North Entrance)



**METHODIST**

The meaning of care.™

Questions? Call (402) 354-5100 or (800) 787-4470

**MONDAY-FRIDAY 7:30 A.M. - 6 P.M.**

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Methodist Health System and its clinical affiliates prohibit the use of tobacco products on all properties. This includes all outside locations and parking lots.

## INTRODUCTION

This booklet provides important information about your upcoming surgical stay with us. Please understand that the material cannot cover everything about your operation.

Your doctor and other members of your care team will plan and discuss with you and your family the specific care and activities you will need before and after your surgery. Throughout your surgical experience, your care team will gladly answer your questions.

We encourage you to take an active role in your care. After reading this booklet and talking with your doctor and other members of your care team, you should know:

- ▶ Your role in preparing for your surgery, discharge and home care.
- ▶ Your choice about the use of any blood conservation procedures.
- ▶ The date, time and location to report for surgery.
- ▶ Your food and fluid restrictions before surgery, including NPO orders (nothing by mouth).
- ▶ How and why to do your recommended deep breathing, leg and foot exercises.
- ▶ The importance of not smoking before surgery (*if you smoke*).
- ▶ Your role in pain management.

### BLOOD CONSERVATION PROGRAM

You will be asked if you would like to participate in the Methodist Hospital Blood Conservation program. This program offers options for conserving your blood or building up your blood count, if needed. For more information, discuss this option with your doctor or visit:

[www.bestcare.org/bloodconservation](http://www.bestcare.org/bloodconservation).

## BEFORE YOUR OPERATION

Your doctor may order lab tests and procedures, such as blood or urine tests, X-rays, EKG, etc. You will be contacted before your surgery to schedule the tests that need to be done, to get specific instructions and to answer any questions. If you have had these tests done recently, please mention this when the nurse contacts you.

Use this booklet to write down information about previous surgeries, illnesses, medications, allergies and advance directives. Refer to this information when the Access Center calls and when you talk with your doctor.

If you have a cold, fever, urinary tract infection or illness of any kind on the day before or the day of your surgery, please call your doctor.

Follow your doctor's instructions carefully. Take medication only as directed, including over-the-counter and prescription medication. If you are taking aspirin or blood thinners, discuss this with your doctor or nurse.

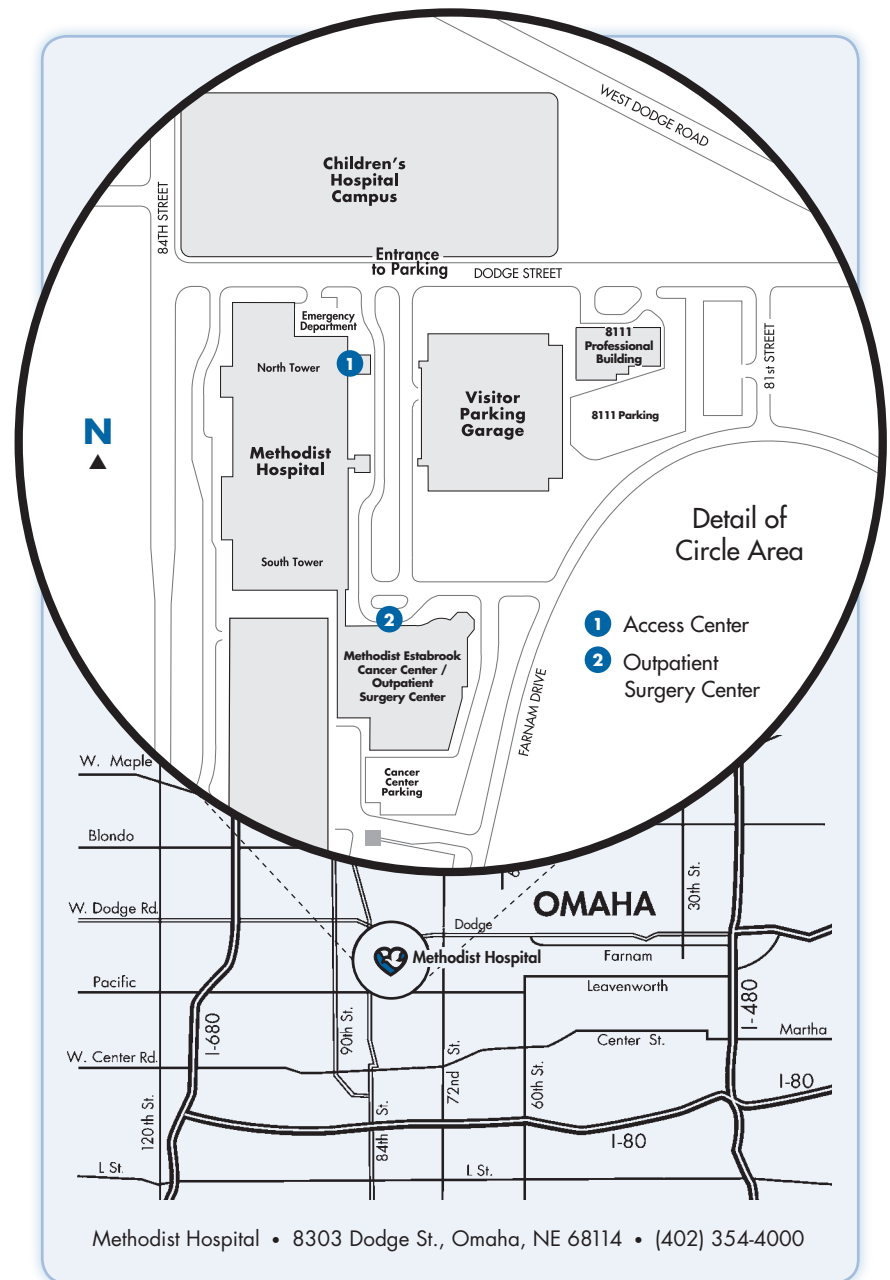
Cleanliness is part of the preparation for surgery. Take a shower the night before and the day of surgery as directed by your health professional. You will use a special CHG product as you would soap. For details, see Pages 8-9.

During your stay with us, you may continue to wear your wedding ring unless surgery is being done on the left hand, arm or shoulder. Leave all other jewelry (including body piercings), credit cards, cash and other valuables at home. If you wear contact lenses or glasses, bring a container to protect them during your operation. Hearing aids may be left in or removed depending on the type of operation involved.

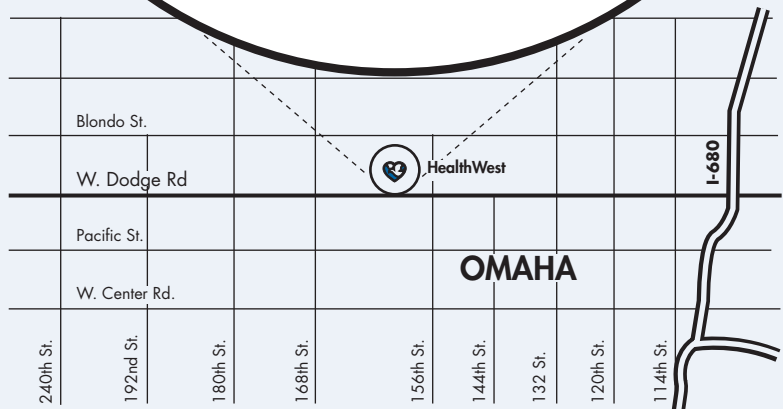
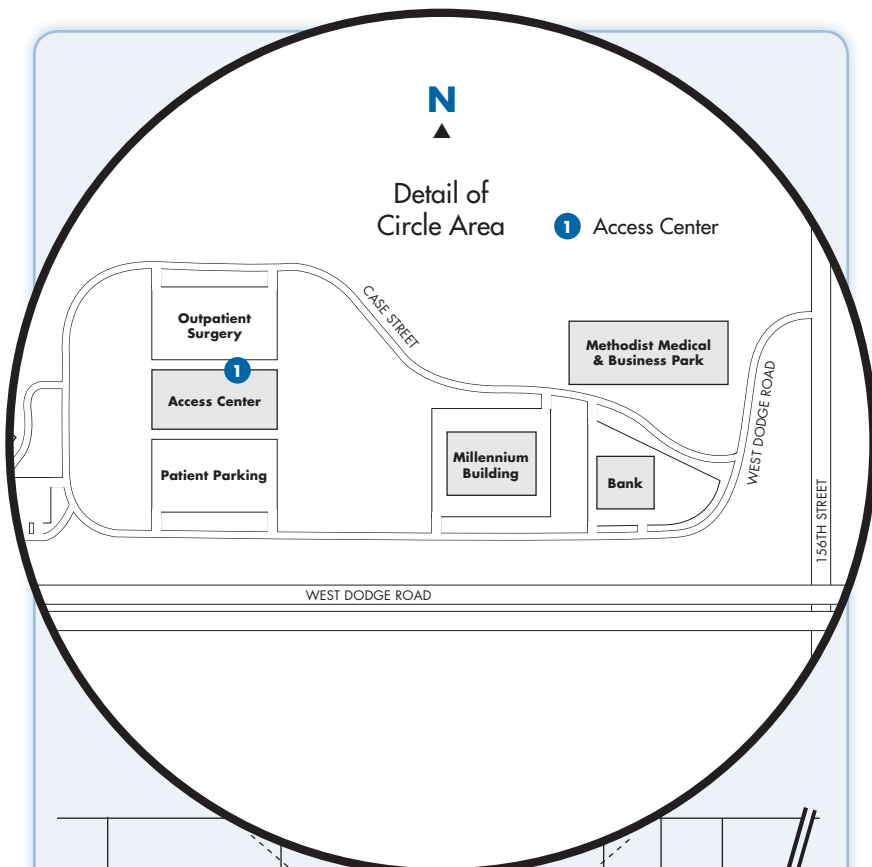
If you plan to remain in the hospital overnight after your operation, you may want to bring a few of your own personal items, such as a robe, slippers, pajamas, toothbrush, toothpaste and hair brush. Leave these items in the car until you are in your room after the surgery.

Free valet parking is available through a combination of valet stands and after-hours service from Security personnel and a visitor parking structure is available on the east side of the hospital. Visitor parking guides and campus maps are available from the Access Center and at [www.bestcare.org](http://www.bestcare.org). (See pages 3-4 for maps and parking diagrams.)

## METHODIST HOSPITAL MAP & PARKING



## HEALTHWEST MAP & PARKING



HealthWest • 16120 West Dodge Road, Omaha, NE 68118 (402) 354-0707

## PACKING DO'S AND DON'TS

### DO BRING WITH YOU:

- ▶ Insulin and/or inhalers, if you use these
- ▶ Your insurance information
- ▶ Appropriate clothing
- ▶ Personal care items
- ▶ Crutches or walker (identified with your name)
- ▶ Walking shoes
- ▶ Eyeglasses
- ▶ Contact lenses with case
- ▶ Hearing aides

### DO NOT BRING WITH YOU:

- ▶ Valuables
- ▶ Tobacco products

### DO NOT WEAR TO THE HOSPITAL:

- ▶ Makeup

### IF YOU SMOKE

You already know that smoking is unhealthy. But did you know that smoking is especially unhealthy before surgery? Smoking affects breathing and circulation, making your anesthesia harder to manage. By quitting smoking, you can speed healing and reduce your risk of complications after surgery. These complications may include pneumonia, heart trouble or wound infection.

Please note that Methodist facilities are tobacco-free. Be sure to talk with your doctor about your tobacco use before surgery.

**GETTING READY FOR YOUR SURGERY:  
WORKING WITH THE ACCESS CENTER NURSE**

Use the space below to write down important information. Have this ready when a nurse calls you before your surgery. The Access Center will need your Social Security number, primary care doctor, emergency contact names and phone numbers, and whether you have an advance directive.

**ALLERGIES**

Be sure to tell your doctor or nurse if you have a latex allergy.

**MY CURRENT MEDICATIONS**

*(including herbals and over-the-counter medications)*

Please check with your doctor if you take blood thinners (such as Coumadin), aspirin products or diet medication. Your doctor will tell you if and when you must stop taking any of your medications before surgery.

NAME	DOSAGE	FREQUENCY & SCHEDULE (A.M. / P.M.)	STOP DATE (BEFORE SURGERY)

**MEDICAL CONDITIONS:**

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**PAST SURGERIES AND PROCEDURES** *(include years)*

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**PRE-OP APPOINTMENT** *(Date/Time):* \_\_\_\_\_

**ARRIVAL TIME:** \_\_\_\_\_

**ARRIVAL TIME CHANGED TO:** \_\_\_\_\_

**FOOD AND DRINK**

- NPO (nothing by mouth) after midnight
- NPO after (write time) \_\_\_\_\_
- Clear liquids until: \_\_\_\_\_

**NPO**

NPO means “nothing by mouth.” Do not eat or drink anything after midnight unless directed otherwise by your doctor, Access Center nurse or anesthesiologist. This also means no water, gum, breath mints or medication. You may brush your teeth and rinse your mouth with water, but do not swallow.

**SPECIAL MEDICATIONS**

Prior to surgery, your doctor may prescribe certain medications. Take these as directed by your doctor. Write down any specific instructions about taking medication before your surgery:

MEDICATION	WHEN TO TAKE

## BATHING BEFORE SURGERY

All people have germs (harmful bacteria) on their skin. Germs may cause an infection in your incision after surgery or medical procedures.

To help prevent an infection, your doctor wants you to bathe with a special soap that contains chlorhexidine gluconate (CHG). CHG kills the germs that can cause an infection. Brand names of products that contain CHG include Dyna-Hex®, Betasept® and Hibiclens®.

It is important that you wash your total body with a CHG product two times before you have surgery. Shower with CHG once the night before and once the morning of your procedure.

- ▶ The night before your surgery or procedure, shower with CHG:
  - Wet your entire body and hair with warm water.
  - Shampoo your hair with your own shampoo.  
**(Only those people who are having head or neck surgery will use CHG as a shampoo. See below.)**
  - Wash your body from the neck down with CHG.
  - Completely rinse CHG off your body.
- ▶ The next morning, take another shower with CHG before coming to the hospital.

### SPECIAL CHG INSTRUCTIONS *(For Head/Neck Surgery)*

Shower and shampoo using CHG the night before your surgery and the morning of your surgery.

- The night before surgery, wet your entire body and hair with warm water.
- Shampoo your hair with one-fourth of a bottle of CHG.  
*(Note: No information is available about the use of CHG on chemically treated hair.)*
- Do not get CHG in your ears, eyes, nose or mouth. *(To protect your ears, you may want to use cotton balls or ear plugs.)*
- Use one-fourth of the bottle to wash the rest of your body.
- Repeat these steps the morning of surgery.

## PREPARING TO USE CHG

- DO NOT SHAVE any body hair in the planned surgical area. Razors can nick the skin. Skin bacteria can enter the tissue through a nick. This could cause an infection after your surgery.
- If possible, take a CHG shower, not a tub bath. Science tells us the shower gets rid of more germs than a bath.
- If you will need help, plan to have someone help wash any parts of your body that you cannot reach. Hard-to-reach areas might be your back, legs and feet.

## USING CHG

- Do not get CHG in your ears, eyes, nose or mouth. If you do get CHG in these areas, rinse with lots of water right away.
- It is important that you wash **all** of your body, not just the area where the incision(s) will be.
- CHG does not lather like your regular body soap.

## AFTER USING CHG

- CHG continues to kill the germs even after you rinse with water.
- Do not put any other lotions, powders, perfumes, etc., on your skin. These items may prevent CHG from killing the germs.

## WHERE TO GET CHG

You will need one four-ounce bottle of the CHG product. CHG products include Dyna-Hex®, Betasept® and Hibiclens®.

You may pick up one four-ounce bottle of a CHG product at no charge at the Methodist Health System locations listed on the back cover, or, if you prefer, you may purchase the CHG product at a local pharmacy.

## CHG WARNING

Do not use CHG if you are allergic or sensitive to it. Allergic reactions that can occur with CHG include itching, redness and irritation. If you have an allergic reaction, stop using CHG and call your doctor. If you have a severe, life-threatening reaction, call 911.

## TO HELP PREVENT COMPLICATIONS AFTER YOUR OPERATION

There are several exercises you will learn to help your recovery go smoothly. These exercises will help prevent circulation and lung complications following your surgery. The day before surgery is an excellent time to practice these exercises. Do these as instructed while you are awake on the day before your surgery.

### DEEP BREATHING

1. Inhale as deeply as possible.
2. Hold your breath for a second or two.
3. Exhale all breath out of your lungs.
4. Repeat several times.

### WOUND-SPLINTING

1. Brace your hands over the incision or place a pillow over the incision and hold firm.
2. Use this procedure when performing the deep-breathing and coughing exercises.

### COUGHING

1. Inhale deeply.
2. Hold for a second.
3. Cough deeply from your abdomen using your stomach muscles.

### LEGS

1. Bend the knee on each leg by sliding your foot back along the bed.
2. Stretch out each leg completely.
3. Relax.

### FEET

1. Push the toes of both feet toward the foot of the bed.
2. Then pull toes toward your chin.
3. Relax both feet.
4. Circle both ankles — first to the right, then to the left.

### PREVENT VTE

Performing these leg and foot exercises will help to prevent blood clots from forming in your veins. Blood clots are a complication called venous thromboembolism or VTE. VTE is the most common preventable cause of hospital death.

### VTE INCLUDES:

- Deep vein thrombosis (DVT) — a blood clot that forms in a vein deep inside an extremity, often a leg.
- Pulmonary embolism (PE) — when a blood clot breaks off and travels to the lung(s).

It is very important to move as much as possible following surgery to prevent VTE. Walking is the most important thing you can do to help prevent blood clots from forming. Walking helps improve the flow of blood throughout the body, including the legs.

Walk as soon as possible after surgery. The staff will help you get out of bed, walk to the bathroom and walk in the halls. A good goal is 100 feet at least three times a day. This is about one-half the distance around your hospital floor. Set a daily walking goal for yourself.

For more information about blood clot prevention, ask your health care provider for the educational fact sheet “Preventing VTE.”

### RESOURCES

- Methodist Health System Web site: [www.bestcare.org](http://www.bestcare.org)
- [www.dvt.net](http://www.dvt.net)  
Resource for risk factors, risk assessment, questions to ask your doctor, glossary, animations (including how a clot forms).
- Methodist Hospital closed circuit TV (Channel 35) . “DVT: Are You at Risk?” is shown Monday, Wednesday and Friday at 3 a.m., 11 a.m., 7 p.m.

## MAKING PLANS FOR HOME RECOVERY

You and your family should discuss plans for your home recovery with your doctor or nurse before you come to the hospital for surgery.

### DISCUSS THE FOLLOWING QUESTIONS:

- Will you need any help with daily activities, such as bathing, dressing and eating?
- Will you need any special equipment, such as a walker or crutches?
- Will you have any activity limitations?
- Will you need help getting home from the hospital?
- Do you need to check with your insurance about coverage for post-hospitalization needs, such as home health care? Methodist Hospital's Social Services Department can assist you with insurance, home health care questions and community resources. For Methodist Hospital Social Services, call (402) 354-2346. For Methodist Home Health & Hospice, call (402) 354-3200.

*For more detailed information on discharge planning, turn to page 18 and 19.*

## TIME FOR YOUR OPERATION

### SURGERY PERMIT

You will be asked to sign a surgery permit, which allows the surgeon to perform the operation. If you are a minor (under 19 years of age), a parent/guardian must sign the consent form and be present at the hospital during your operation.

### FAMILY

Time to visit with your family before your operation is limited. It takes about two hours for the nurse to prepare you for your operation.

While you are in the pre-op holding area and during your operation, your family will be able to wait in the surgery waiting room located on the first floor.

Please have your family check in at the Surgery Desk in the waiting room when they enter and leave the area. A volunteer surgery hostess will be there to serve coffee and make the wait as pleasant as possible. The volunteer or surgery liaison nurse will be informed when your surgery is completed and can update your family. Generally, the surgeon is available to talk to the family after your operation.

### FAMILYVUE FOR REAL-TIME UPDATES

A new patient tracking system at Methodist Hospital makes it easier for family members to follow a loved one's progress through surgery. Coded patient names appear on FamilyVue monitors with the actual times the patient goes to pre-op, surgery, recovery, etc. Materials explaining the system are available at check-in.

### FAMILYVUE LOCATIONS:

- Inpatient and Outpatient Surgery waiting rooms
- Cafeteria (second floor)
- Cyber Joe's Internet café (first floor)

### SURGERY LIAISON NURSE

A surgery liaison nurse will meet the patient's family in the waiting room to inform them of the patient's progress, answer questions and assist as needed. This nurse has direct contact with the surgeons and nurses in the operating room.

## YOUR SURGICAL JOURNEY

### PREOPERATIVE CARE UNIT (POCU)

After check-in, you will be taken (walking, by wheelchair or cart) to the POCU area. Nurses will care for you here until it is time for your surgery. An anesthesiologist may visit you in this area on the day of surgery and may order medication that will help you relax. The POCU is a quiet area where you are encouraged to relax and let your medication work for you.

An IV (intravenous solution) will be started in your hand or arm through a needle that is put into your vein. The IV provides a rapid, easy method of giving medication and fluid.

You may become sleepy and may notice that your mouth feels dry. For your safety, it is important to remain on the cart/bed with the side rails raised to help prevent injuries or falls.

### OPERATING ROOM (OR)

You will be moved to OR where all personnel are dressed in scrub clothes, caps, and masks. The OR is cool and brightly lit.

### POST ANESTHESIA CARE UNIT (PACU)

When your surgery is over, you will be taken to the PACU. Your heart may be monitored and you may receive oxygen for a short time after surgery. Warm blankets are available for your comfort.

Your blood pressure, pulse, respiration, temperature, bandages and drainage tubes and special equipment will be checked frequently. Nurses will check to see how awake and alert you are. They may ask your name or what day it is. They will also ask about your pain level.

If you had surgery using local anesthesia, you will be taken directly to your room.

### OBSERVATION UNIT - 1ST FLOOR SOUTH

If you need to stay at Methodist Hospital less than 23 hours after your surgery, you may stay on the Observation Unit. This is located on the 1st Floor in the South Tower near the GI Lab and the surgery area.

### CRITICAL CARE

If your doctor feels that it is necessary, you may be taken to the Critical Care unit. Here, specially trained nursing personnel and support staff will provide frequent monitoring of your condition.

After you have arrived, the nurse will let your family members know when they can come see you in the Critical Care unit.

## AFTER YOUR OPERATION

When you are back in your room, the nurses will continue to check your vital signs. This means checking your blood pressure, temperature, pulse and respiration. They will also check your bandages, IVs, drainage tubes and comfort level frequently.

### THE NURSE WILL ASK YOU TO START YOUR EXERCISES:

1. Breathe deeply to keep your lungs clear.
2. Perform leg and foot exercises for circulation.
3. Perform any other exercises as appropriate.

### FLUIDS

Your fluid (IV or oral) intake is very important to your recovery. The nurse will be measuring and recording the amount of fluid intake and urine output the morning of your operation. This will continue until your doctor indicates this measure is no longer necessary. Your doctor will determine when and what type of fluids you may have after your surgery.

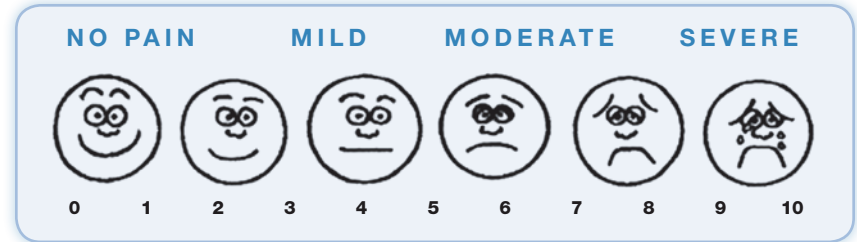
### COMFORT

Pain is an individual experience. It is essential that you tell your nurses about your pain so we can better control it. While you are in the hospital, you will be asked to rate your pain on a regular basis using the pain intensity scale on the opposite page. This scale will tell your health care team how much pain you are having and how helpful pain treatments are.

### PAIN SCALE

Our shared goal is to keep you at or below a level of pain that will allow you to:

- Cough and deep breathe
- Walk and move around
- Be satisfied with your level of comfort
- Promote faster healing



### BECAUSE YOUR COMFORT IS IMPORTANT:

- Talk to your nurses and doctors about your pain so they can find the right medications and treatments.
- You are the only person who can tell us how much pain you have and if treatments are working.
- Treatment for pain may include medication, heat/cold, music, massage, relaxation, spiritual support, etc.
- Try to anticipate pain so it can be controlled before it becomes severe.
- Some pain after surgery is expected. Pain, when properly controlled, should not keep you from doing self-care activities.
- You may be awakened to take pain medication during the first few days. As you heal you can take pain medication as you need it.

*Control your pain. Don't let pain control you.*

**PATIENT-CONTROLLED ANALGESIA (PCA)** allows patients to receive pain medication as they need it through a programmed pump. The pump is set up so you are not given too much medication. Only the patient should push the button that gives the medication.

## YOUR CONVALESCENCE

Your activity and diet will increase slowly following surgery. You will be encouraged to do as much for yourself as you are able. Your participation in your health care is essential to a speedy recovery.

### WALKING

Walking is much easier with your body erect, abdomen supported, and a strong arm to lean on.

### STAPLES, STITCHES, DRAINS

There is no specific schedule for removal of your staples, stitches or drains. Your doctor will determine when it is time for their removal.

### PATIENT/FAMILY EDUCATION & DISCHARGE INSTRUCTIONS

Your doctor(s) and nurses will give you specific home care instructions. Instructions will cover diet, activity, exercise, medications, incisional care, medical equipment and follow-up visits to your doctor(s). Be sure you are informed about these areas of your care. Please ask if you have any questions about your hospital or home care.

### DISCHARGE INFORMATION

With advances in medical treatment and technology, the length of hospital stays has been reduced. Patients can often continue recovery in their own homes. To make sure you are ready for discharge from a medical point of view, your doctor will check for the following:

- Stable blood pressure, temperature and heart rate
- No evidence of bleeding
- Pain is controlled or manageable
- Passing urine, or a catheter is in place
- Passing gas or stool
- Taking food and fluids
- Moving about safely with or without an assistive device.

There may be a time when you are medically ready for discharge, but not ready to live on your own or continue your recovery at home. In this case, your doctor may recommend an alternate level of care. Extended care facilities may be a choice if you require continued treatment such as IV medication or physical therapy.

If you, or your family, need help with discharge transportation, continued care or other details, a medical social worker can help you. Please ask your nurse to contact a social worker.

Please discuss discharge planning with your health care providers. Advance planning for the time that you will leave the hospital will make the discharge process go smoothly. Use this checklist to prepare for discharge.

### PATIENT DISCHARGE CHECKLIST

- Have you arranged for transportation from the hospital?
- Do you have all of your personal belongings?
- Have your valuables been returned from the safe?
- Have the medications you brought to the hospital from home been returned to you?
- Have you received any new prescriptions?
- Do you understand your new medication instructions?
- Do you know when you need to see your doctor after discharge?
- If you need help with your care at home, have arrangements been made?

If you have any questions about your discharge, please speak with the nurse or ask to talk to a social worker. The social worker can help you with any arrangements or concerns you have about your discharge.

If you are having surgery at  
**METHODIST HOSPITAL  
OUTPATIENT SURGERY CENTER**

or

**METHODIST HEALTHWEST  
OUTPATIENT SURGERY**

On the morning of your surgery, report directly to the facility where your surgery will be performed. An approximate dismissal time will be discussed with you.

A responsible adult must drive you home after surgery and stay at home with you for the next 24 hours. You cannot leave by taxicab unless you go with a responsible adult.

If your doctor feels that you should stay overnight, you will probably be transferred to another unit:

- Methodist Hospital Outpatient Surgery Center patients who stay overnight are typically transferred to the Hospital's Observation Unit on 1st Floor South, located by the GI Lab and surgery area.
- Methodist HealthWest Outpatient Surgery patients who stay overnight are typically transferred to the Short Stay Unit. This unit is also on the ground floor and inside the north entrance of Methodist HealthWest.

For more information, call (402) 354-5100 or (800) 787-4470.

## ADDITIONAL RESOURCES

### PASTORAL SERVICES/CHAPEL

Pastoral Services staff members are available 24/7. They can provide visitation, prayer, spiritual encouragement and information about living wills or advance directives. To request Pastoral Services while at Methodist Hospital, dial "0" on a house phone or speak with your nurse. A chapel is located on the first floor, off the South Lobby of Methodist Hospital.

### FAMILY RESOURCE CENTER

The Family Resource Center is located on the Methodist Hospital First Floor Lobby in the North Tower next to the Gift Shop. Patients, family members and visitors are encouraged to visit the Center for health-related information and videos. An RN is available to help you with your health information needs.

Hours of operation are Monday – Friday, 9 a.m. – 5 p.m.

For more information, call (402) 354-4301.

### PUBLIC-ACCESS COMPUTERS

For the convenience of our patients and visitors, Methodist Hospital has public-access computers available at these locations:

- Family Resource Center
- Surgery waiting room
- Cyber Joe's Internet Café
- Family lounges on the patient care units
- Methodist Estabrook Cancer Center Library.

### CAREPAGES WEB SITES

Free, private Web pages to help stay in touch with family and friends are available to all Methodist Hospital patients. By creating a CarePage, patients and their families can:

- Share a patient's condition and progress without repeated phone calls.
- Receive messages of support.
- Post photos.
- Send compliments to caregivers.

For more information, visit [www.bestcare.org](http://www.bestcare.org).

**Methodist Hospital**  
**8303 Dodge Street**  
(402) 354-4000

Family Resource Center, 1st Floor, North Lobby  
Information Desk, 1st Floor, North & South Lobbies

**Methodist Outpatient Surgery Center**  
Just south of Methodist Hospital, next to  
Methodist Estabrook Cancer Center  
(402) 354-4200  
Outpatient Surgery Desk

**Methodist HealthWest**  
**16120 West Dodge Road, North Entrance**  
(402) 354-0502  
Access Center Desk

**For more information, call**  
**(402) 354-5100**  
**or visit [www.bestcare.org](http://www.bestcare.org).**

