Helping you prepare for your surgery



Let us be your light. We're ready to help with whatever life throws at you.

Anne Arundel Medical Center and Doctors Community Medical Center have come together to form a new, integrated health system that reimagines what community health means. For years, we've shared a dedication to compassionate care, delivered when and where people need it most. Now, we're carrying that same commitment into the future as Luminis Health—a health system that's here to embrace progress. And awaken a new era in care for our communities.

The name Luminis is symbolic of light. It signifies our commitment to being a beacon of hope and healing for our communities. Light is quite literally energy that you can see—and by joining forces and moving forward as one, we're igniting new possibilities for how and where health care is delivered.

Welcome

When it comes to choosing a health system, we know you have more choices today than ever before. We feel honored you've chosen Luminis Health Anne Arundel Medical Center and we appreciate your trust.

As you navigate your (or your loved one's) care from surgery to recovery, this guide is just one way we support your journey and help you get back to the life you love. We've created it with you and your family in mind and hope it helps you feel confident about your upcoming procedure.

We encourage you to ask questions whenever anything is unclear, and wish you a speedy recovery.

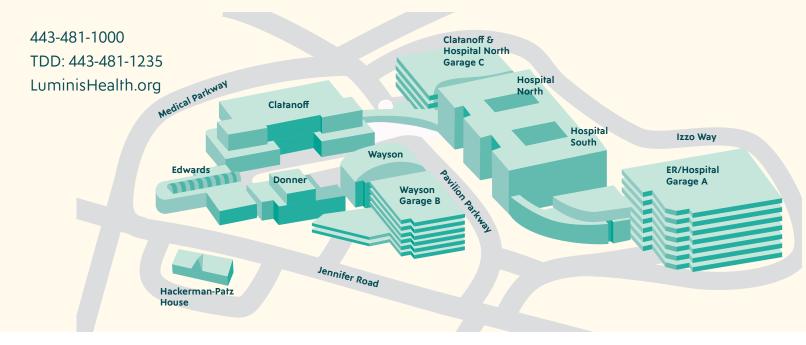
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Getting here

Luminis Health

Anne Arundel Medical Center 2001 Medical Parkway Annapolis, MD 21401



From Annapolis and the Eastern Shore

- Take Route 50 West to Jennifer Road, Exit 23A.
- Continue straight on to Pavilion Parkway.
- Make an immediate right onto Izzo Way.
- Follow signs to GARAGE A.

From Washington, D.C. and Points West

- Take Route 50 East to Parole, Exit 23.
- Bear right onto West Street.
- Turn right on Jennifer Road.
- Cross over Medical Parkway.
- Turn left on Pavilion Parkway.
- Make an immediate right onto Izzo Way.
- Follow signs to GARAGE A.

From Baltimore

- Take Route 97 to
- Route 50 East to Parole, Exit 23
- Bear right onto West Street.
- Turn right on Jennifer Road.
- Cross over Medical Parkway.
- Turn left on Pavilion Parkway.
- Make an immediate right onto Izzo Way.
- Follow signs to GARAGE A.

Important phone numbers

Primary Care Doctor:	Number:
Surgeon:	Number:
Pharmacy:	Number:
Notes:	

Pre-surgery contacts

Pre-Anesthesia Testing Center: 443-481-3624

Edwards Surgical Pavilion: 443-481-5700

Special Dietary Requests: 443-481-6111

South Pavilion Surgical Waiting Room: 443-481-1800

Smoking Cessation Program: 443-481-5366

Hackerman-Patz House Lodging: 410-571-3100

Patient Financial Services Department: 443-481-6500

Post-surgery contacts

Patient Financial Services Department: 443-481-6500

Advocacy Department: 443-481-4821

Better health starts here.

You're having surgery. And you're looking forward to feeling better and getting back to living life fully. We'll be with you every step of the way, providing the information that eases your mind and the care and encouragement that helps you heal.

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We're here to help you.

Sure, it's our plan to get you out of the hospital as quickly as possible. But that's because we know you're most comfortable recovering in your own home. Our team is always just a phone call away. We're ready to answer your questions, ease your concerns and champion your good health. We'll also be sure you have clear, detailed care instructions before you leave us, so you can feel confident you have the information to stay safe and healthy.

The most important part of your recovery plan is YOU. When you and your support person are involved, motivated and ready to participate, you'll feel better, stronger and in charge.

That's why we work hard to:



Empower you

Open, honest conversations keep us all on the same page. We'll walk you through your surgical plan, including the preoperative assessment, preparation for your procedure and what to expect during recovery.



Get you moving

The sooner you move, the sooner you can start to heal. That's why our team will encourage you to get up and out of bed. The small steps lead to bigger ones.



Help you heal

We use the latest advances in surgery and innovative pain management strategies to help reduce the physical stress of surgery and promote your healing. We lead with compassion, understanding and experience to support you at every turn.



Provide a structured recovery

We tailor your recovery guideposts to your health, your needs, and your goals, and will be here for every challenge and milestone.



Surgery and hospital stay: Glossary of common terms

Anesthesiologist: The doctor responsible for providing anesthesia during your procedure, monitoring your vital signs, and administering the medications that keep you asleep during your surgery

General Anesthesia: A medication delivered through an intravenous line (IV) or anesthetic gas that ensures you won't feel, see or hear anything during your procedure.

Spinal or Epidural Anesthesia(Regional Anesthesia): A method of giving you medication by injecting it into your spine, creating a numbness below your chest and limited mobility in both legs. These medications can be given during your surgery to maintain the level of comfort and sleepiness you desire. With this type of anesthesia, your legs will continue to be numb and immobile for several hours after surgery.

Consent Forms: A document that outlines your surgical procedure as well as the date, time, your name, date of birth and other pertinent information. You must sign a consent form to give the surgeon and anesthesiologist permission to perform the procedure.

Vital Signs: Essential signs of life such as your blood pressure, temperature, pulse and respiratory rate are measured to make sure you're stable before, during and after surgery.

IV Fluids: Liquids that are given directly into a vein to deliver a saline solution and electrolytes during your surgery

EKG: Short for electrocardiogram, a test that evaluates your heart's electrical signals to look for heart conditions

APP: Short for advance practice provider-- a nurse practitioner (NP) or physician assistant (PA) who may examine you, assist with the surgical procedures, monitor your progress and recovery, and provide treatment in collaboration with your doctor

PAT: Pre-admission testing, a process that involves an appointment with an APP who will take a medical history and conduct a physical exam to make sure you're healthy enough for surgery.

Putting your health first

At Luminis Health, lifelong health and wellness is our priority. Consider us your partner in:



Helping you quit smoking

Smoking is associated with an increased risk of infection after surgery and can compromise the healing processing. If you're a smoker, we're here with the resources and encouragement you need to consider quitting. "Become Tobacco Free" classes are offered throughout the year, with sessions covering topics related to maintaining a smoke-free lifestyle. These include quitting smoking without gaining weight, managing stress and dealing with other smokers.

You can learn more online at Luminis. Health/Quit-Smoking. You may also contact a smoking cessation program specialist at 443-481-5366 or 443-481-5367 for class dates and times.

Being your home away from home



If you need to travel to us for surgery, consider Hackerman-Patz House you're home-away-from-home. Here, you'll find affordable accommodations for you and your family, where you can rest, relax and regain strength while staying close to the hospital.

Learn more at www.askAAMC.org/Hackerman-Patz/. For reservations or more information, call 410-571-3100.





Keeping you healthy

LHAAMC's Wellness department provides exercise classes, access to a gym for a low-cost fee, weight loss programs and counseling, massage and stress reduction classes. Learn more at askAAMC.org/Wellness.



Managing your health

MyChart offers personalized and secure online access to your medical records, enabling you to securely use the Internet to help manage and receive information about your health. With MyChart, you can:

- Access your medical records from any device anywhere, anytime
- Manage your appointments
- Request prescription refills
- Message your physician
- Update your health profile
- Pay your bill online
- View and download content, such as your medical history, imaging reports or lab results
- Schedule a video visit with participating providers

If you don't already have a MyChart account, you can register at www.mychart.aahs.org/MyChart/Authentication/Login.

2 Countdown to surgery, there are a number of the period of the surgery and the period of the surgery and the period of the peri

In the weeks and days before surgery, there are a number of steps you must take to get ready. Our goal is to make your experience as easy as possible by walking you through the process.

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2-4 weeks before surgery



Make a list and check it twice.

- 1. Complete any needed paperwork: Talk with your primary care doctor, surgeon's office and the hospital about what paperwork is required. Be sure to share any disability or family leave forms you need. You will also want to make sure your surgeon has your:
- Correct name
- Date of birth
- Phone number

2. Contact your insurance company:

You may need a pre-authorization, a precertification, a second opinion or a referral form. You may also want to ask about any co-pays you will be responsible for paying for pre-surgery, surgery and post-surgery services.

If you have a health maintenance organization (HMO) plan, you may also be required to take some additional steps, such as scheduling a pre-admission lab study, for example. So, it's a good idea to call your HMO once your procedure is scheduled to find out exactly what's required.

After your procedure, you may receive several separate bills. These may come from the LHAAMC's Pre-Anesthesia Testing (PAT) Center, the anesthesiologist, the hospital, the surgical assistant and the radiology and pathology departments, if applicable. Please ask your insurance company about any

specific steps you need to take to get those services covered.

Also, you may receive a bill under the name of Adfinitas Health, the medical hospitalist service. The hospitalists work closely with your surgeon to manage your pain, medications and any existing or acute conditions during your hospital stay.

You may have questions about your financial arrangements. If so, please call our patient financial services office at 443-481-6500.

3. Enlist a caregiver: People with caregivers often do better after surgery, and feel more comfortable as they recuperate. Choosing the right caregiver is important for your recovery. You'll want to choose friends and family members who can offer support, motivation and assistance at various points in your recovery — during your hospital stay, driving you home when you're discharged or helping you while recovering at home. You'll need a responsible adult to drive you home when you're discharged and stay with you for at least 24 hours after your surgery.

4. Get medical or specialty clearance:

Your primary care physician must provide a physical evaluation to clear you for surgery (we ask that you schedule the appointment within 30 days before your surgery). You'll receive a letter from your surgeon with instructions for this appointment.

If you cannot get an appointment with your primary care physician, you may use LHAAMC's Pre-Anesthesia Testing (PAT) Center for pre-surgical clearance. We can also give you referrals for consultation with a specialist, if needed.

5. Have your medical information ready:

It's essential that we know any medications you're taking, both prescription and over the counter. Please write down your medications and dosages as well as how often you take them. Reference page 18 for a list of anti-inflammatory medications you should stop taking.

6. Document your health care decisions:

Everyone admitted to the hospital has the opportunity to make decisions concerning their medical care. Please bring copies of your advance directives and health care decisions with you on the day of your surgery.

7. Inform us of your dietary needs: If

you're staying with us overnight and have any special dietary needs or preferences, please contact our Patient and Food Specialist prior to admission to discuss how we can best serve you.

8. Establish discharge plans: It's best to start planning for discharge before your surgery takes place, especially if you'll be going home the day of surgery. You'll need

an adult driver and caregiver that should plan on staying with you for at least 24 hours after surgery.

9. Schedule and complete your Preadmission testing (PAT) and Preoperative visit: These appointments are crucial to ensure you're healthy enough for surgery and give you the chance to ask questions. PAT can be scheduled with your primary care physician 30 days before your procedure or at our PAT center.

10. Set up care for others: Making sure you have care arranged for your children and pets prior to your surgery. This keeps everyone safe while you're focused on your recovery.

11. Stay healthy to reduce your risk for infection: We encourage you to live as healthy as possible before your surgery and to watch for any factors that can increase your risk for infection following surgery, including:

- Any rashes, open wounds, sores, bites or infections anywhere on your body.
- Fever, cough, congestion, diarrhea or another illness 24-48 hours prior to surgery.

In some cases, it may be best to postpone your surgery if you're dealing with certain medical issues.

Pre-admission testing



Schedule and prepare

You can schedule your pre-admission testing appointment with your primary care physician 30 days before your procedure or at our pre-admission testing (PAT) center.

Your pre-admission testing appointment is an essential step in preparing for your surgery. During this appointment, an advanced practice provider (APP) or your primary care physician will take your medical history and conduct a physical exam to make sure you're healthy enough for surgery. If your surgeon would like you to meet with an anesthesiologist, you will meet with them at this appointment.

Labs: You should receive a lab test order from your surgeon or primary care physician. It is best to check with your insurance to determine which labs they cover.

During the appointment, you'll get lab work. Depending on your procedure and medical history you may also have a chest X-ray and an electrocardiogram, and other tests your team feel are needed. You will also be given instructions for surgery day.

Medications: You will receive instructions about the medications you may take prior to your procedure. You will also learn where and when to report on the day of your procedure.

COVID test: You will need to obtain a Covid PCR test three to five days prior to your surgery.

The Sajak test site is open for Covid tests Monday-Friday 9 am to 5 pm and Sat 9 am to 1 pm. No appointment is needed. They are closed Sundays and holidays.

To make an appointment at the Luminis Health Anne Arundel Medical Center's PAT Center, call 443-481-3624 as soon as your surgery is scheduled.

The LHAAMC PAT Center is open Monday-Friday, 7 am to 3:30 pm and is located in the Wayson Pavilion, Suite G60. Free parking is available in Garage B.

You should bring these items to your appointment:

- A photo ID
- Insurance card
- Up-to-date list of current medications, including name, dose and frequency taken
- Names of your physicians and any specialists
- Any medical records associated with your procedure

Your health care decisions

You can count on our team to respect and uphold all wishes and care considerations are a priority to us. We respect and uphold those wishes you specify in your advance medical directive. These health care instructions outline your specific choices regarding the use of life-sustaining equipment, hydration and nutrition and use of pain medications. Upon admission to the hospital, we will askyou if you have an advance directive. If you do, please bring copies of the documents to the hospital with you so they can become a part of your medical record. There are a few different types:

- Appointment of a Health Care Agent (sometimes called a Medical Power of Attorney) is a document that lets you name a person to make medical decisions for you if you become unable to do them yourself.
- Living Wills are written instructions that explain your wishes for health care if you have a terminal condition, irreversible coma or are unable to communicate.

If you'd like more information on advance directives, you may contact The Advocacy Department at Luminis Health by calling 443-481-4821. You can also visit Luminis.Health/Advance-Directives.

For more information or forms for completing a Living Will, Appointment of a Health Care Agent or Health Care Instructions, you may write to:

Maryland Attorney General's Office Opinions Section 200 St. Paul Place Baltimore, MD 21201



Managing medications

Understanding and managing the medications you take are important as you get ready for surgery. Here are a few suggestions:

- 1. Stop medications that increase bleeding: Some anti-inflammatory medications may cause increased bleeding. Seven to 10 days before surgery, stop all anti-inflammatory medications such as:
 - Advil
- Mobic
- Aleve
- Motrin
- Diclofenac
 Multivitamins
- GlucosamineNaproxen
- Herbal
- Vitamin E
- Supplements
- Relafen
- Ibuprofen
- 2. Contact your prescribing physician: If you are on any of the following medications, please contact your prescribing physician for special instructions on stopping the medication.
 - Aspirin
- Pradaxa
- Coumadin
 Xarelto
- Eliquis
- 3. Fill out the medication list: It's important for your care team to know what medications you are taking. Fill out this medication list three weeks before surgery. Bring this list to appointments so you can reference your complete medication list with your nurse or doctor.



Medication list

Use this convenient checklist to ensure you don't miss any details. Bring it to all of your appointments and on surgery day. This chart will help you create a list. Complete it three weeks before surgery and bring it with you to appointments. Keep this with you when the prep nurse calls to write further instruction from them here.

Name of Medicine	Dose (Mg)	Frequency	Reason for taking	STOP taking morning (AM) before surgery	TAKE afternoon (PM) before surgery	TAKE morning (AM) of surgery
Medicine	(Mg)		Taking	DATE	DATE	DATE

Anesthesia and you

Anesthesia keeps you comfortable before, during and after your surgery. Your anesthesiologist is responsible for your safety and wellbeing before, during and immediately after your surgery. We assign most patients an anesthesiologist. You may choose one based on personal preference or insurance considerations. Please contact your insurance company for guidance. Submit requests for specific anesthesiologists in advance through your surgeon's office. This will help the doctors coordinate schedules.

Before surgery: You will meet your anesthesiologist to discuss the most appropriate anesthetic plan. The type of anesthesia you receive is based on your surgical procedure, your preference, your surgeon's preference and the results of the anesthesiologist's evaluation of your medical history.

They don't happen often, but complications or side effects can occur with anesthesia, even when the anesthesiologist takes special precautions to avoid them. Your anesthesiologist will discuss the risks and benefits associated with your anesthetic options.

Day of Surgery: On the day of your surgery, your anesthesiologist will review all your health information to evaluate your general health, including your medical history, laboratory results and current medications. Armed with this information, the anesthesiologist will decide the type of anesthesia best suited for you.

During this time, your anesthesiologist will also answer any questions for you and your family.

You will also meet your surgical nurses. They will start intravenous (IV) fluids, and if necessary, may give certain medications. Once in the operating room, your care team will attach devices, such as a blood pressure cuff and EKG to monitor your vital signs. At this point, you'll be ready for anesthesia.

During surgery: In the operating room, your anesthesiologist monitors and manages your vital functions, including heart rate and rhythm, blood pressure, body temperature and breathing. The anesthesiologist is also responsible for fluid and blood replacement, when necessary.

After Surgery: After surgery, we take you to the Post Anesthesia Care Unit (PACU), where specially trained nurses watch you closely. Here, we observe your breathing and heart functions closely and may give you extra oxygen. An anesthesiologist is available to provide care as needed for your safe recovery.

Luminis Health contracts with Anesthesia Company, LLC, you will receive a separate bill from them. If you have questions about anesthesia insurance coverage contact: Anesthesia Company, LLC at 410-280-2260.

We're here to care for you

You'll be surrounded by a team of experienced and caring professionals when you're in our care. Each one of us has a unique role and responsibility in your care before, during and after.



Advanced Practice Practitioners:

These may include nurse practitioners (NP) and physician assistants (PA) who examine you, assist with the surgical procedures, monitor your progress and recovery, and provide treatment in collaboration with our physician team

Anesthesiologist: A doctor specially trained to provide close monitoring and support measures and to keep you asleep and comfortable during your operation

Certified Nurse Anesthetist

(CRNA): An advanced practice nurse specially trained to provide life support measures and to keep you comfortable during your operation

Clinical Pharmacist: A doctor of pharmacy who works closely with your doctors and nurses to ensure medications ordered for you are safe and effective while you're in the hospital

Dietitian: A person who can explain and offer suggestions to improve your diet and nutrition

Occupational Therapist: A

person who evaluates, assists and implements daily living activities, like bathing, shaving and household activities; makes recommendations for rehabilitation services

Patient Care Technician: The caregiver who assists you with morning care, showers and other basic care

Physical Therapist: A person who evaluates, assists and implements activities, like walking and strengthening exercises; makes recommendations for rehabilitation services

Registered Nurse: A nurse on our cardiology team who has specialized cardiac training, administers medications and monitors your progress

Social Worker or Case Manager

(Nurse): A person with special training in your home care needs and issues surrounding leaving the hospital



1 week before surgery



5 days before

You must stop shaving any area near your surgical site five days before surgery. We'll give you specific instructions on how to prepare your surgical sites before your procedure.

1-2 days before we'll also remind you which medications to take (or not) before surgery. Have your medication and medical history lists prepared and readily available to discuss with the prep team when they call.

Take the time before your surgery to shop for these items you may need after your surgery.

- Thermometer
- Ice pack if needed
- SeneKot-S stool softener with stimulate (generic okay)
- Extra Items, if needed:
- Saltine crackers
- Ginger ale
- Disposable bath wipes



1 business day before

The prep team will call you one business day before your surgery between 2 and 5 pm to tell you when you should arrive (typically two to three hours before surgery). If you miss the call, you may call 443-481-1800 if your surgery will take place in the Hospital Pavilion North or Hospital Pavilion South. Call 443-481-5700 if your surgery will be in Edwards Pavilion.



Night before

You must stop eating at midnight prior to your surgery (except clear liquids). Please read and follow all the guidelines found in this booklet and that were provided by your surgical team.

Remove all jewelry, including piercings. Makes sure to leave valuables at home. Have your ID and insurance card, advance directives ready to take with you to the hospital.

Pre-surgery fasting guidelines

When should you stop eating and drinking before surgery?

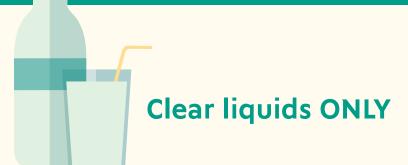
Stop eating everything at midnight prior to your surgery except clear liquids. No food. No gum. No mints. No candy. No coffee. No alcohol. If directed, you may take your morning medications with a small sip of water.



You may drink 20 ounces of clear liquids between midnight and two hours prior to leaving your house for the hospital.

*See EXCEPTIONS below

Liquids



Examples

The only liquids you can drink are water, clear Gatorade, clear tea and apple juice.

People with diabetes may have Gatorade Zero without sugar.

*EXCEPTIONS: ALWAYS FOLLOW SPECIFIC INSTRUCTIONS FROM YOUR

SURGEON. If you have end-stage kidney disease, achalasia (difficulty swallowing), gastroparesis (slow stomach emptying), severe GERD (acid reflux) or a history of gastric bypass surgery, then all drinking must stop at midnight.

PLEASE NOTE: It's extremely important to follow the above instructions. If you don't follow the instructions, your surgery may be delayed or canceled.

For PREP questions or fasting guidelines, please call the PREP charge nurse at 443-481-3920.

Day of surgery

You've got this. Please remember to:

- Leave jewelry, valuables, cash and weapons at home. Avoid wearing makeup or lotion before your procedure.
- If you are using chlorhexidine cloths, do not shower the morning of your surgery.

Bring the following with you:

 Copy of advance directives, which you must print from

Luminis.Health/Advance-Directive

- CPAP machine, if needed
- Insulin pump, pain pump controls or ID card for implantable defibrillator if needed
- Eyeglasses, hearing aids and dentures (these may not be worn to surgery)
- Insurance card, driver's license or photo ID, COVID Vaccination card
- List of medications, dose and frequency
- Two caregivers who have no symptoms or signs of any illness
- This Surgery Guide
- Personal hygiene items
- Loose-fitting clothing to wear when discharged

Your arrival and parking:

Please allow plenty of time to drive to the hospital and park. If you're already in the hospital, your caregiver should arrive two hours before your scheduled surgery. Make sure you know the name of the Pavilion where your surgery will take place. Use the map on page 4 for location references.

- Hospital Pavilion South parking is in Garage A. After entering the building, continue down the hallway to a bank of elevators on your right. Take the elevator to the second floor and check in at the front desk at the Hospital Pavilion South procedural waiting area on the second floor.
- Hospital Pavilion North parking is in Garage C. The information desk will direct you down the hall to the elevator bank. Take the elevator to the second floor and check in at the front desk at the Hospital Pavilion North surgical waiting area.
- Edwards Pavilion parking is in Garage C. Enter the building and continue to the right towards the Clatanoff Pavilion Walk through the Clatanoff Pavilion to check in at the front desk at the Edwards Pavilion surgical waiting area.





Registering for your procedure

A customer service representative will complete your registration. They will provide waiting room instructions and our Post-Anesthesia Unit guidelines, as well as information about how to follow our electronic status board color codes. Once you are registered, you'll remain in the lobby until we call your name.

Pre-operative care

When ready, we take you to the preoperative area to be prepped for surgery. The nurse reviews your history, starts any needed IVs and takes any necessary labs. You'll also likely receive antibiotics and other medications, as needed, once we start your IV. Your team will also complete necessary safety checks. Once you're prepped for surgery, your caregiver is allowed to wait with you.

Surgery begins

After you're prepared for surgery and your surgical team has completed all safety checks, we will move you to the operating room. The OR nurse will help position you safely on the operating table and give you a warm blanket. During your procedure, your nurse may provide updates to your family or caregivers

through the patient advocate in the surgical services waiting area.





Risk factors: Many things can increase your risk of infection after surgery, including:

- Previous infections in wounds in other areas.
- Repeat or revision surgeries.
- Being overweight.
- Diabetes and high blood sugar.
- Smoking.
- Steroid use, including Prednisone.
- Close contact with others with skin infections.
- Infections at other sites (such as dental infections, chronic sinusitis, upper respiratory infections, rheumatoid arthritis, history of MRSA infection or colonization).

Take precautions: Any existing infection can be dangerous when you're having surgery.

- Please inform your primary care physician and surgeon of any acute illnesses within 24-48 hours prior to surgery. Including things such as fever, cough, congestion and rashes.
- Do not shave the body part where your operation will occur five days before surgery.
- Maintain a normal blood sugar level before and after surgery if you have diabetes.
- Wash your hands thoroughly before and after dressing changes.
- Keep your wound clean, dry and covered.
- Use Mupirocin as directed.

Your road to recovery

Healing is a journey. It begins in the post anesthesia care unit and continues through your hospital stay and discharge. We'll guide you on that journey and help you move forward with confidence.

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Your surgery journey

Immediately post-op

After surgery, you'll stay in the Post-Anesthesia Care Unit (PACU) as you wake up from anesthesia. Please refer to the PACU visitation policy guidelines form you were given during registration for details. The length of time you spend in the PACU depends on the type of surgery or procedure you had and the type of anesthesia you received. When you're ready, we'll transfer you from the PACU to an outpatient or inpatient bed.

Rest, heal and recover

While you're in the PACU your anesthesiologist and surgeon and specialized registered nurses care for and observe you as you wake up from your anesthetic. Your care team will monitor your pain and vital signs, focusing on your comfort and safety needs including:

Activity: Depending on your procedure our physical therapy and occupational therapy team will see you throughout your stay to assist you in regaining your strength and independence, and help with discharge planning.

Medications: Your nurses and surgical team will manage your medications to help you recover safely.

Pain management: No matter the time, please tell us if you're in pain. Managing your pain helps you rest and heal, and makes it possible to have a better hospital stay. We will partner with you to manage your pain and do everything we can to give you a safe and comfortable recovery.

There are many kinds of pain medication available, and we may need to try different combinations. We can give you medication on a preset schedule or as-needed. Your nurse will help you decide what's best for you and your situation. If you are staying overnight a nurse will work with you on managing your pain while you sleep.

Discharge and going home

There are benefits to going home early. Returning to a comfortable environment and getting back to your normal daily routine promote a faster recovery.

Your surgeon and medical team determine when you're able to leave the hospital. You must be medically stable and meet all your goals.

Your nurse will discuss your medications and home care instructions with you and your caregiver prior to discharge.

We must know you can safely perform specific tasks before we discharge you. We also want to make sure:

- Your pain is tolerable.
- Nausea and vomiting are controlled.
- Lab values are normal.
- Vital signs (blood pressure, heart rate, oxygen) are stable.
- A safe discharge plan is in place.

We're here for you. To answer your questions. To ease your fears. To rally around you on your way to a strong recovery. Even when you go home—from the hospital, an appointment or therapy session—know we're always just a phone call away.

Surgeon's phone number

Discharge checklist

Do you know how to:

- Take your medication?
- Prevent infections?
- Manage your pain?

Does your caregiver know how to:

- Change your dressing?
- Identify signs and symptoms of infection?
- Follow exercise instructions given by your surgeon?

Going home safely:

- Ask someone responsible to drive you. You may not take a taxi or other driving service home unless accompanied by a responsible adult.
- Travel in a vehicle with easy entry and exit.
- Place a plastic bag over the seat to make it easier to "slide" into a comfortable position.
- Make sure you have written instructions concerning your medications, activity and diet.



Incision care

It's essential to wash your hands well when tending to your incisions. Most times, incisions are closed with dissolvable sutures and sealed with Dermabond glue. If Steri-Strips (surgical tape) are in place, you may remove them after a week if they haven't fallen off on their own. If you went home with drains, you may cover them with plain gauze and tape. Change them at least daily unless they become saturated and you need to change them more often. Once your incision stops leaking, leave it open to air.



When to call your doctor

Please call your surgical team if you experience any of the following:

- Extreme fatique
- Elevated temperature above 101 degrees F (38 degrees C), twice within 24 hours
- Pain in your calf that becomes worse with movement a few weeks after surgery
- Persistent bleeding or oozing from your incisions
- Sharp pain when you take a breath
- Skin rash
- Swelling in your ankles or leg pain
- Urinary tract infection: frequency, burning, or blood with urination

There are times when patients need to be readmitted to the hospital. If this is the case for you, we prefer you to come here to continue your care. But if you do visit another hospital, please let your care team here know. We can work with other providers to ensure everyone is up to date on the care you've received.



When to call 911 or go to the ER

Please call 911 or go to the emergency room if you experience any of the following:

- Bright red stools
- Bright red blood
- Fainting spells
- Heart rate is more than 150 beats per minute with shortness of breath
- Severe abdominal pain
- Severe chest pain
- Shortness of breath that isn't relieved with rest
- Sudden numbness or weakness in arms or legs
- Sudden severe headache

Getting back to living

Everyone recovers at different rates, but most people need about six -to -eight weeks of healing before they can return to a normal routine. You'll gradually grow stronger, but you're likely to have both good and challenging days. Take things slowly and rest when you get tired. Once you're home from the hospital, follow all of your surgeon's instructions for the best possible outcome.

Home care: Depending on your surgery or procedure, as well as your recovery process, you may need help for the first week or two. Plan for family or friends to be available to help you. Simple tasks at home, such as laundry, yard work and cooking, may be difficult to do while you're healing. Try to do what you can before surgery, or ask friends and family for help. Doing too much, too soon will set back your healing.

Changes to your diet: It's not unusual to experience poor appetite after surgery, but your desire to eat solid foods will return. Be sure you drink plenty of fluids to avoid becoming dehydrated. If you're nauseous, ask your doctor for anti-nausea medications and take them with food. A healthy diet that includes foods low in sodium, cholesterol and saturated fats supports your recovery. So does eating smaller, more frequent meals. If you have a poor appetite, consider supplemental drinks like Ensure, Boost or Glucerna, which is lower in sugar. It's also important to keep your blood sugars within a normal range of 80-150. Elevated blood sugars delay wound healing and can increase your risk of infection.



Activity: Activity restrictions depend on your surgery or procedure. Consult with your surgeon or therapist before you return to activities, including driving. You must be off all narcotic pain medication before you can safely operate a vehicle.

Be sure you get up and move often. Walk three to four times per day. Activity promotes healing and reduces your risk of getting pneumonia after surgery. It's also important to cough and do deep breathing exercis es to clear mucus in your lungs.

Maintain a normal routine, but please avoid heavy lifting. Between activities, be sure to rest with your legs elevated at heart level.

Sleeping: For a while, you may have difficulty sleeping. This is normal and should improve. Do not take a sleeping pill unless you check with your doctor's office. You may need more rest than usual as you heal.

Toileting: Be aware that if you're taking opioid pain medication you may experience constipation. As directed, it can be helpful to use stool softeners or laxatives. Stay well hydrated and walk frequently.

Follow-up care: At the time of your discharge, you'll be receive discharge instructions specific to your surgery. The timing for your first doctor visit after surgery will depend on your procedure and condition. The frequency of follow-up visits and therapy depends on your progress.



Managing pain

You should expect to have some pain after surgery. We'll work with you before discharge to keep pain tolerable and tailor your pain management plan to your needs and health.

The type of pain medicine prescribed to you is based on several personal factors, such as any allergies you have, the type and severity of your pain and your sensitivity to pain medication. Let us know about pain medicines that have worked well for you in the past and those that haven't. We want to ensure medicine helps you feel better, not worse.

We'll likely prescribe pain medications "as needed." But taking pain medication at regular intervals, at least in the beginning, can prevent the pain from getting intense. Oral pain medications take time to work and usually last from three to four hours.

Over-the-counter (OTC) medicines, like acetaminophen, often lessen your pain with fewer side effects than prescription medications. Check with your surgeon before taking OTC medication.

Prescription pain medications can also cause constipation. If you don't have regular bowel movements, contact your doctor. Drink plenty of fluids, increase fiber in your diet and take stool softeners as directed.

Other therapies, such as meditation, listening to music, aromatherapy and massage may also help you control your pain. You can help by getting plenty of sleep, maintaining a healthy diet and limiting the time you spend visiting with others, in person or on the phone, until you feel stronger.

Helpful tips

As you recover, you may need to modify your activities for a brief time depending on the surgery or procedure you had. This might include:

- Changing your sleeping position or location
- Getting assistance with routine personal care.
- Applying ice at least six to eight times each day to decrease discomfort and swelling, if instructed by your surgeon
- DO NOT apply heat to your wound after surgery, as this can increase swelling and pain.
- Walk five minutes of every waking hour to decrease stiffness and pain.
- Try alternative therapies such as meditation, listening to music, aromatherapy and massage.
- Plan to take oral medications at least 30 minutes before it's needed so they have time to work. The relief generally lasts three to four hours.
- Drink lots of fluids and use stool softeners to avoid constipation.
- Stop taking pain medication and seek medical attention if you experience, difficulty breathing, difficulty urinating, hives or a rash.

Questions and Notes:				

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