

Getting ready for and recovering from



Surgery

Island Health Surgery Resources

ABRIDGED VERSION*



*Please note that the UNABRIDGED version of this booklet has additional information such as hospital conveniences and visitor guidelines; it is available on the *Getting Ready for Surgery* page of Island Health's public website (<https://www.islandhealth.ca/learn-about-health/surgery/getting-ready-surgery>).



About this Booklet

This booklet was developed with input from patients, doctors and health care providers. It provides general information to help you prepare for your surgery and recovery.

Please read this booklet as soon as you get it!

If your surgeon or nurse gives you information that is different from what is in this booklet, please follow their directions.

The instructions in this booklet are based partly on the Enhanced Recovery after Surgery (ERAS) plan. The goal of this plan is to get you back to regular activities as soon as possible. To do this, you need to play an active part in getting ready for and recovering from your surgery.

Bariatric surgery patients: Please follow the eating and drinking information in your Bariatric booklet, or follow the instructions given to you by your Bariatric Program Team.

If you are not sure what you should do, please ask your Bariatric Program Team!

Surgery-Specific Companion Booklets

Companion books are available for some surgeries. These booklets provide extra information and are meant to be read with this booklet. Ask your surgeon or nurse if there is a companion booklet specific to your surgery.

You can find copies by:

- Asking your surgeon's office, or
- Going to the *Getting Ready for Surgery* page of Island Health's public website: <https://www.islandhealth.ca/learn-about-health/surgery/getting-ready-surgery>

Help your care team help you!

Share this booklet with your care team so they know about your plans to recover and get home as soon as possible.

Please note that the information in this booklet is current as of the date printed on it.

Your Surgery

Please be on time the day of your surgery.

When you come to the hospital, please make sure to bring your BC CareCard, Personal Health Number or proof of substitute Medical Insurance Plan, or another form of personal ID.

Sometimes your surgery may be earlier or later than planned, or sometimes the date may need to change.

If your surgery date and time needs to change you will be given as much notice as possible and your surgery will be rebooked.

If your symptoms change or worsen at any time during your waiting period:

- Call your family doctor, **or**
- Ask someone to take you to the nearest Emergency Department, **or**
- Call 911

Before Surgery



Preparing Your Home for After Surgery

Before you come to the hospital, think about what you will need when you go home or wherever you will be staying.

Here are some things to think about before you come to the hospital:

- **Stairs:** If your home has stairs, consider setting up a sleeping area on the main floor.
- **Equipment:** Consider what you might need after surgery (e.g., crutches, wheelchair, walker, cane, bath lift, bath chair, etc.) and when you should get them.
- **Safety devices:** Ask your surgeon if you will need any safety devices, such as a bath or shower bar, and where you can get them. If you need to have a safety device installed, arrange to buy it and have it installed before you come to the hospital.

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- **Housekeeping:** If possible, arrange for help with groceries, laundry, house cleaning and other chores for after surgery.
 - If a family member or friend is not able to help with housekeeping, you may want to arrange for a housecleaning service to help you for a few weeks.
 - If possible, prepare 2 weeks' worth of food and stock your pantry.
- **Pets:** Can someone look after them or help with them while you recover?
- **Prescriptions:** Find out if your pharmacist delivers prescriptions; if they deliver, find out if/how much they charge for this service. If they do not deliver prescriptions, arrange for a family member or friend to pick up any prescriptions for you.
- **Visits:** If you live alone, arrange for a friend or family member to call in or visit.

Blood Work and Tests

You may need to have blood tests or other tests done. It is helpful to have all your tests done at an Island Health Lab. **Please get any tests you need done before your surgery date.**



Stopping Medications

Most medications can be taken as usual, up to and including the day of surgery. However, there are some medications that should be stopped before surgery to lower the chance of complications.

- Your surgeon or anesthesiologist will decide when you should start taking your medications again after surgery.
- The next page explains what medications to stop taking before surgery.

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Medications to Stop Taking *at Least 10 Days before Surgery*

If you take any of the following medications (or if you have a coronary stent placed in your heart), you must get specific instructions from your surgeon **at least 10 days before surgery**:

Type of medication	Directions
Insulin	
Anticoagulants (e.g., Coumadin [warfarin], Heparin, dabigatran [Pradax [®]], rivaroxaban [Xaralto [®]])	
Antiplatelet medication (e.g., clopidogrel [Plavix [®]], Ticlid [®] , prasugrel, acetylsalicylic acid ([ASA, Aspirin [®]])	
Birth control pills and Hormone Replacement Therapy (HRT)	

Medications to Stop Taking *7 Days before Surgery*

Seven days before surgery stop taking Vitamin E and all natural health products and herbal remedies (e.g., Garlic, Gingko, Kava, St. John's Wort, Ginseng, Dong Quai, Glucosamine, Papaya, etc.)

Medications to Stop Taking *the Day before Surgery*

The day before surgery, stop taking regular vitamins and iron supplements.

You can take all allowed medications with 30 ml (1 oz) of water per pill up to one hour before surgery.

- You may take Acetaminophen (e.g., Tylenol[®]) for pain, when needed, up to and including the day of your surgery.

If you have an appointment at the Preadmission Clinic at the hospital, you may get more directions about stopping medications there.

Medications I Need to Take Before My Surgery

Medications I need to take before my surgery	Dose	Time

What To Do if you are Not Feeling Well Before Surgery

In the week before surgery, phone your surgeon's office if you:

- Are not feeling well.
- Have a cough, cold or fever.
- Have a scratch, pimple or open area on the skin around the surgical area.
- Have an infection or open area around the surgical area.
- Have had a recent infection, including dental (teeth or mouth), bladder, or skin infection.



Bowel Preparation (Cleaning out Your Bowel)

Some surgeries require the bowel (colon) to be cleaned out before surgery, using laxatives, enemas or other bowel-cleansing agents. You will get instructions from your surgeon if this is needed. Please follow these instructions carefully. If you do not properly clean your bowel for surgery, it will cause your surgery to be delayed or cancelled.



Cleaning Your Skin

Cleaning your skin before surgery helps to remove germs on the skin and prevent infection. It also helps incisions heal.

- Do not remove any hair from the surgical area for at least 1 week before the surgery. If hair removal is needed, it will be done after you check-in.
- **If you are having a surgery that requires an incision**, buy 2 antibacterial CHG (Chlorhexidine) 4% body sponges and follow the directions on the next page.
 - If you are allergic to CHG or have extensive psoriasis or eczema, follow the directions below using regular soap and water.
 - You can buy CHG 4% sponges at most hospital gift shops and at most pharmacies.
- **If you are having a procedure where you will NOT have a skin incision** (e.g., eye, inner ear or dental surgery), shower or bathe and wash your hair the evening before **or** the morning of surgery using your usual soap and shampoo.

Shower/Bathing Instructions if You Are Having a Surgery that Requires an Incision

The Evening before Your Surgery

1. Wash hair with usual shampoo, and rinse.
2. If showering, wet all of the body then move the showerhead to the side to minimize soap loss during lathering with CHG sponge.
3. If bathing, place a minimum amount of water in the tub so that the body can be soaped with the CHG sponge without washing away the suds. Sit down in the bath and be careful not to slip.
4. Open one CHG sponge and wet with a little water. Squeeze repeatedly to produce suds.
5. Wash body from neck to feet using the sponge. Avoid contact with the eyes, inside of the ears, and mouth. If CHG gets into the eyes, rinse well with water.
6. Carefully wash the surgical area, armpits, navel, feet and in between toes (be careful not to slip) and back. Finish with genital and anal areas. Do not rinse until your entire body has been washed and lather has been on skin for at least 2 minutes.
7. Throw the sponge away in the garbage.
8. Rinse the body thoroughly under the shower or in the bath.
9. Use a fresh, clean dry towel to dry the skin from head to toe, finishing with the genital and anal areas.
10. Do not apply deodorant, body lotion, cosmetics, or powder afterwards. Dress in clean clothes. Do not put on any jewelry.

The Morning of Your Surgery

The morning of your surgery, repeat steps 2-10 from the night before.



Eating and Drinking Before Surgery

Eating a healthy diet is a major factor in how well you will recover from surgery.

Bariatric surgery patients: Please follow the Bariatric Pre-Op Liquid Diet in your bariatric surgery booklet.

Limiting what you eat and drink before surgery (known as fasting), helps keep the stomach empty during surgery. This helps prevent vomiting, which could cause choking, and prevents vomit from going into the lungs, leading to pneumonia

If your surgeon does not give you directions for fasting, follow the directions below. Your surgery will be cancelled or delayed if you do not follow fasting instructions.

Before Midnight the Night before Your Surgery

Stop eating solid food at midnight the night before your surgery.

- Do not eat any solid food after midnight; this includes chewing gum and sucking on hard candies.

Drink at least 800 ml (27 ounces; 3 cups) of clear fluids until midnight the night before your surgery.

- See the list of clear fluids that you can drink, below.

After Midnight the Night before Your Surgery and Up To 3 Hours before Your Surgery

You can drink up to 400ml (13.5 ounces; 1 ½ cups) of clear fluids up to 3 hours before your surgery.

Clear fluids are:

- Apple juice
- Water
- Cranberry cocktail
- Black coffee (**no milk or milk substitutes**)
- Clear tea (**no milk, milk substitutes or loose leaves**)

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If you are not diabetic, we suggest that you drink the following fluids that are high in sugar (carbohydrates):

- Apple juice
- Cranberry cocktail

Drinking fluids that are high in carbohydrates is called *carbohydrate loading*.

Carbohydrate loading is recommended because it:

- Helps you stay hydrated before surgery.
- Puts less stress on your body during surgery, because your body will use this energy, rather than your body's energy stores.
- Makes you feel better when you wake up after surgery.
- Helps you recover faster.

Three Hours before Your Surgery

Stop drinking fluids at least 3 hours before your surgery.

What to Bring to the Hospital

- BC CareCard, Personal Health Number or proof of substitute Medical Insurance Plan, or another form of personal ID.
- An interpreter, if you do not understand English.
- A list of all the medications, including vitamins and herbal supplements that you are taking, including dosages.
- A list of allergies (medications, latex, food, etc.)
- Any special protocols you may have regarding your health care needs.
- If you are staying in hospital 24-72 hours or less, bring any respiratory inhalers, eye drops, topical medicated creams, transplant medications, estrogen patches or birth control pills that you need (all other medications and supplements should be left at home).
 - The hospital supplies most other medications, but they may not be the same brand that you are used to.
- Your CPAP, Bilevel or dental appliance (labelled with your name) if you have sleep apnea and use it while sleeping.
- Loose fitting clothing that is easy to get off and on, labelled with your name. Do not wear any tight fitting clothing, or clothing that is difficult to put on or take off (such as belts, small buttons, etc.)
- Glasses or contact lenses, wig, hearing aids, walking aids and dentures with storage cases labeled with your name.
- Any handouts or directions given to you by your doctor or the hospital.

Personal Items

Pack one small overnight bag with a few personal items for your family or friend to bring in AFTER surgery.

- Brush/comb, toothbrush, toothpaste, ear plugs, shampoo, sanitary products, razor and shaving cream, deodorant, dressing gown and reading material.
- Low heeled slippers or shoes that are non-slip and easy to put on. 1-2 packs of sugar-free chewing gum.
- Any immobilizers, air casts, splints or other devices that your surgeon tells you that you will need to have put on in the operating room.
- Any crutches, cane, braces, or walker that your surgeon tell you that you will need, labeled with your name.

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*Island Health recommends that you do not bring any personal items, such as wallets, purses, IPADS, cell phones, laptops, jewelry, money, credit cards or other valuables, with you. If you need these items, ask a family member or friend to bring what you need each day.

Please note that personal recording devices are not allowed in the Operating Room or Recovery Room.

Checklists: The Day Before and the Day of My Surgery

The Day <i>Before</i> My Surgery I Will:	The Day <i>of</i> My Surgery I Will:
<input type="checkbox"/> Confirm my ride home from the hospital.	<input type="checkbox"/> Take my second pre-op shower.
<input type="checkbox"/> Pack my bag for the hospital.	<input type="checkbox"/> Take off jewelry (rings, watches, piercings etc.) and leave them at home.
<input type="checkbox"/> Complete my carbohydrate loading.	<input type="checkbox"/> Only bring recommended items with me.
<input type="checkbox"/> Stop eating and drinking as directed.	<input type="checkbox"/> Be at the hospital when my surgeon's office, the Preadmission Clinic or the booking office, told me.
<input type="checkbox"/> Take my first pre-op shower.	



Admission to the Hospital

Check in at the front desk. You will have a hospital ID band put on your wrist. You will wear the ID wristband during your stay; please do not remove it.

You will be directed to the surgical admission area. In the surgical admission area, you will:

- Be asked to change into a hospital gown.
- Be asked to sign your Consent form (if you have not already done so).
- Receive pre-operative medications and have an intravenous (IV) started, if ordered.

After Surgery

Managing Your Pain after Surgery

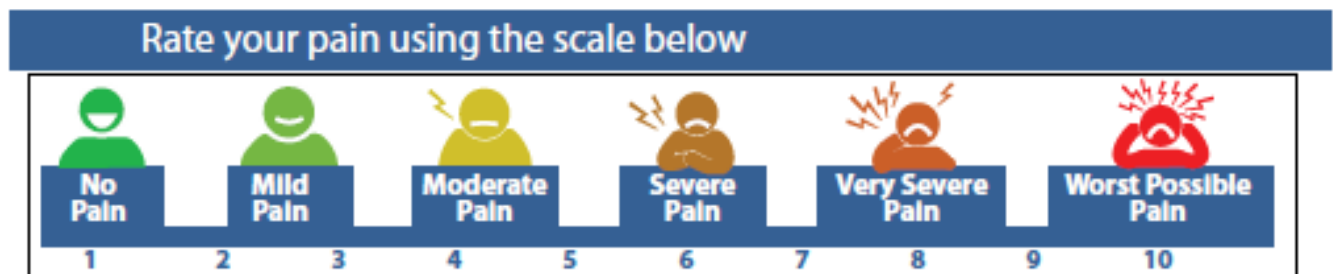
Pain medications work best when taken at regular times and before the pain gets too bad.

If you are not comfortable, tell your nurse. You should be comfortable enough to turn, move your arms and legs in bed, and do your breathing and coughing exercises.

Rating Your Pain

To help measure your pain, your nurse may ask you to rate your pain from 1-10.

- 1 means no pain, and 10 means the worst pain you can imagine.
- It is important to tell the nurse what number is comfortable for you so they can help you manage your pain better.
- You can also describe pain with words like *none*, *mild*, *moderate*, *severe* or *worst possible*.







Get Up and Move

Being as active as you can help you to recover quicker and to prevent problems. Walking will help to clear mucus from your lungs, regain your strength, and prevent getting blood clots. Your health care team will work with you to set daily activity goals.

- The day of your surgery, we will help you to sit at the side of the bed or in a chair.
- The day after surgery, we will help you to take a few short walks and you will sit up in a chair for all meals.
- You will increase your activity every day after that until you are walking at least 3 times a day.

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- Practice the leg exercises below whenever you are in bed.
- Practice your deep breathing and coughing exercises (please see: *ICOUGH*, below).

Ankle Pumps	Ankle Circles
<ol style="list-style-type: none">1. Pump your feet up and down at the ankles.2. Repeat 10x an hour. 	<ol style="list-style-type: none">1. With your legs straight, make circles with your feet in each direction.2. Repeat 10x an hour. 
Straight leg stretch	Heel slides
<ol style="list-style-type: none">1. Pull toes up and press your knees into the bed. Hold for 3 seconds. Relax.2. Repeat 5x an hour. 	<ol style="list-style-type: none">1. Bend one knee and straighten it. Then do the other leg.2. Repeat 5x an hour. 

ICOUGH

One way to help prevent pneumonia is to follow ICOUGH. ICOUGH is an acronym that means:

- **I**mprove lung health
- **C**oughing and deep breathing
- **O**ral care
- **U**nderstand
- **G**et up and move
- **H**ead of bed raised

Improve Your Lung Health

Deep breathing exercises will help keep your lungs healthy and prevent lung problems. There are many types of breathing exercises. Your

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healthcare team will decide which method is best for you and will work with you to practice these exercises every hour

Coughing and Deep Breathing

Deep breathing and coughing exercises help your lungs to fully expand and clear your lungs of mucus. This helps the lungs do the important job of delivering oxygen to the tissues in your body. Take deep breaths often. The goal is 5 deep breaths every hour, followed by coughing at least 2 times. Your healthcare team will help you do this.

Oral Care

Good mouth care is important while you are in hospital. Keeping your mouth clean helps to prevent germs from travelling to your lungs and causing pneumonia.

While in hospital, please make sure you have a toothbrush and toothpaste and any denture cleaning products you may need.

Understand (how you can help patients, families and caregivers)

You and your family are important members of your healthcare team. It is important for you to take an active role in your recovery.

We want you to ask questions! Talk to your healthcare team about how to pre-vent pneumonia and other complications.

Get Out of Bed 3 Times a Day

Being as active as you can will help you to recover quicker and prevent complications.

Walking will help clear secretions from your lungs and help you to regain your strength.

Your healthcare team will work with you to set daily activity goals.

Head of Bed Raised

It is important to keep the head of the bed raised between 30 and 45 degrees.

Being in an upright position will help your breathing and decrease your pneumonia risk.

Recovery after General Anesthesia

During this time, you may be impaired. Therefore, for 24 hours after anesthetic or IV sedation it is recommended that you DO NOT:

- Make important decisions, sign important papers, or go to work.
- Drive a car or work with machinery.
- Do any dangerous activities, like riding bikes, swimming, or climbing ladders.
- Travel alone by public transportation (e.g., bus).
- Drink alcohol.
- Take tranquilizers, sedatives, or sleeping pills.
- Have the main responsibility for care of another person (e.g., babies, small children, elderly person who needs help).

Incisions, dressings and drains

Incisions are closed with stitches (sutures), clips (staples) or dissolvable stitches. Your surgeon will decide which is best for you. You may have a bandage over your incision that will be changed as needed. Ask the surgeon or nurse how often you need to change the bandage, once you get home.

Sometimes your surgeon needs to put a drain near the incision to help remove excess fluid. If this applies to you, your surgeon will explain this before surgery.

Going Home after Surgery

Discharge for overnight stays is usually 9:00 AM. The staff will tell your family member or friend when to pick you up. Remember, you need to plan for a ride home.



Driving

Anesthetic drugs, including intravenous (IV) sedation, may stay in the body for up to 24 hours after your operation. During this time you may be impaired.

Therefore, for 24 hours after anesthetic or intravenous sedation it is recommended that you DO NOT drive a car or work with machinery.

Ask your surgeon or nurse when you will be able to drive after your surgery.



Eating and Drinking at Home

Depending on your surgery, you might have to eat a special diet. Someone will review your diet with you before you leave the hospital. If you have questions, you can call 811 (HealthLinkBC) any time and ask to speak to a Dietitian.

It might take some time before your appetite returns to normal. To heal, your body will need extra calories, nutrients and especially protein. Here are some tips to eating well after surgery:

- Drink at least 6-8 glasses of water each day (1 glass equals 250 mL, or 1 cup), or as directed by your doctor.
- Eat foods high in protein, such as chicken, beef, fish, eggs, tofu and dairy.
- Try to eat 5-6 small meals per day, rather than 3 big meals. If you are not able to eat enough food each day, you can drink 1 or 2 liquid protein drinks each day.
- It is best to avoid alcohol for at least 4 weeks after surgery.

Bariatric surgery patients: Please do not follow the information in the *Eating and Drinking at Home* section; instead, follow the instructions given to you by your Bariatric Program Team.



Bathing

Check with your surgeon or nurse to see when you can shower or bathe after surgery. There are different instructions for bathing after certain types of surgeries.

- Wash your hands and remove any dressing before showering. It is okay to get the incision wet and to wash the area gently with mild, unscented soap.
- After showering, check your incision to ensure that there are no signs of infection. Gently pat the incision with a clean towel; do not rub the area.
- Avoid soaking your incision in a bath, hot tub or swimming pool for 2 weeks after surgery, or until it is completely healed.



Health Concerns: Who to Contact

Call 911 if you have:

- Chest discomfort with sweating, nausea, faintness or shortness of breath.
- Shortness of breath that gets worse and is not relieved by resting
- Fainting spells.
- Bright red blood in stool or urine, or when you cough.
- Sudden problems with speaking, walking or coordination.

Call your Surgeon if you have:

- Bleeding- enough to soak through a tissue.
- Drainage from your incision that is persistent or changes in appearance or colour (e.g., yellow or green).
- Increased tenderness, redness or warmth around the surgery site.
- Irritation or blisters from your dressing or tape.
- Pain that is not relieved by your medication.
- A fever spike (greater than or equal to 39° Celsius/102.2 Fahrenheit) with or without shakes and body chills.
- A high-grade fever (38.5° Celsius/101.3 degrees Fahrenheit and over) for 2 days or more.
- Your calves (lower portion of your legs) become swollen and painful.

If you cannot reach your surgeon:

- Call your family doctor, **or**
- Go to a walk-in medical clinic, **or**
- If it is after clinic hours, go to a hospital emergency department.

For non-emergency health information and services:

- Contact HealthLinkBC – a free-of-charge health information and advice phone line available in British Columbia.

HealthLinkBC (translation services are available in over 130 languages)

- Phone: 8.1.1 from anywhere in BC (7.1.1 for deaf and hearing-impaired assistance [TTY]).
- Email: www.healthlinkbc.ca