

# Getting ready for and recovering from

Surgery Island Health Surgery Resources





# 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 than 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.

### **Surgery-Specific Companion Booklets**

Companion books are available for some surgeries. These booklets provide extra information and are meant to be read with this *Getting ready for and recovering from your Surgery* 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 Island Health's Surgery 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.

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# Preparing for Surgery





### Your surgery

#### Please be on time the day of your surgery.

Sometimes your surgery may be earlier or later than planned.

#### Sometimes surgery dates and times need to change.

If this should happen, 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.
- Name of your surgery:

• Admission (check-in) time:

- Hospital:
- Date of your surgery:

- Time of your surgery:
- Likely length of hospital stay is \_\_\_\_\_ days. You may go home earlier or later, depending on your recovery.

# Advance Care Planning

### How can I get a copy of an Advance Care Plan?

Download a copy of the BC Government's My Voice: Expressing My Wishes for Future Health Care Treatment advance care planning guide:

http://www.speak-upinbc.ca/my-voice/ To order hardcopies of the advance care planning guide in single or in bulk:

- Visit Crown Publication's website https://www.crownpub.bc.ca/Product/
   Details/7610003494 s or
- Call Crown Publications at 250.387.6409 or toll free in BC at 1.800.662.6105 Monday through Friday, 8:30am to 4:30pm Pacific Standard Time. A charge for shipping and handling, plus applicable taxes will be applied to your order.

Discuss your health care wishes, including what to do if you have a life-threatening event during your hospital stay, with your family and doctor. Write down your wishes in an Advance Care Plan.

Writing an Advance Care Plan means your voice will guide health care decisions if you are not able to make them for yourself.



Where can I find more information about Advance Care Planning?

You can get more information about advance care planning, and links to the guide at:

- The BC Government's website: <u>www.gov.bc.ca/advancecare</u>
- Island Health's Advance Care Planning Services page:
   www.islandhealth.ca/our-services/advancecare-planning/advance-care-planning
- If you do not have access to a computer, you can call HealthLink BC at 8.1.1 for





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

Get things ready ahead of time so they are ready when you leave the hospital. Try to arrange for family or friends to help you.

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.

- **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 housecleaning, 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.

# Personal health information

Consider making a list with the following information and place it in a ziplock bag, with a recent picture of yourself, a copy of your Advance Care Plan and any other important health information.

Label the bag "Personal Health Information" and tape it to your fridge. You can use this information if you need any urgent medical care after your surgery.

Information to include:

- Name
- Address
- Phone numbers(s)
- Personal Health Number
- Allergies
- Current Medications
- Medical conditions

- Family doctor's name and phone number
- Surgeon's name and phone number
- Date and reason for last hospitalization
- Name of person to notify in case of emergency

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# Where to get equipment

Red Cross Loan Cupboards www.redcross.ca Toll Free: 1.800.565.8000 Or check local listings for area phone number.	<ul> <li>Locations throughout BC.</li> <li>Provides "free" equipment for 3 months; however, donations are gratefully accepted!</li> <li>Limited supply of equipment and may not have all the items you need.</li> <li>The Basic <i>Equipment Request Form</i> is available on the Red Cross website.</li> </ul>		
Community Programs Tel:	<ul> <li>Check if your community has a loan cupboard (e.g., legions).</li> </ul>		
Medical Supply Stores Tel:	<ul> <li>Check local listings for area phone numbers and locations.</li> <li>Equipment for rent and/or purchase.</li> <li>May deliver to your home and/or install.</li> <li>Costs may be covered by extended health plans; check your plan.</li> </ul>		
Government Agencies	<ul> <li>Veterans Affairs Canada (VAC)</li> <li>Website: <u>https://www.canada.ca/en/veterans-affairs-canada.html</u></li> </ul>		
Friends/Family	<ul> <li>Tel: 1.866.522.2122</li> <li>Ask friends and family if they have equipment</li> </ul>		

# **Pre-Admission Clinic**

Some people are asked to attend a hospital Pre-Admission Clinic (PAC) before their surgery. The purpose of the PAC is to make sure that you are prepared for your surgery before you are admitted to the hospital. The PAC staff will phone you 1 day to 4 weeks before your surgery if you need a PAC appointment. Not everyone needs to attend a PAC appointment.

For more information about PACs, visit the Island Health Surgery website.

https://www.islandhealth.ca/learn-about-health/surgery/getting-ready-surgery

If you are asked to attend a PAC appointment, the PAC helps make sure that you:

• Are medically fit for surgery.

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- Are aware of the instructions to follow to prepare for surgery.
- Have made all the needed plans for your recovery.
- Are informed about what to expect before and after surgery.

Please bring an interpretor if you do not understand English.



### **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. This makes it easier and faster for the hospital to get the results. If you have your blood work done at another lab, get a printed copy of it and bring it with you to your PAC appointment.

# Appointments with other specialists

Some people need to see specialists (e.g., diabetes doctor, heart doctor) before surgery. Others are asked to take part in research.

If any of these apply to you, your surgeon, family doctor, or hospital will make arrangements and let you know.

You will want to take a list of your allergies, medications (including vitamins, and herbal supplements), copies of recent test results, and any special protocols you may have regarding your health care needs.

## What to do if you are not feeling well before surgery

In the week before your 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.





# **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 determine when you should restart your medications after 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 <sup>®</sup> ].)		
Antiplatelet medication		
(e.g. clopidogrel [Plavix®], Ticlid®,		
prasugrel, acetylsalicylic acid ([ASA,		
Aspirin <sup>®</sup> ].)		

# **Stopping medications**

- 7 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.)
- If you have a visit at the Preadmission Clinic at the hospital, you will get more directions about stopping medications there.
- 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<sup>®</sup>) for pain, when needed, up to and including the day of your surgery.



Medications I need to take before my surgery	Dose	Time	

			3
Medications I need to take before my surgery	Dose	Time	
			-
			-
			-
			-
			-



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 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 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.
- If you are having any other type of surgery, 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.

### Skin care

#### 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

1. The morning of 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.

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.

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

If your surgeon does **not give you directions** for fasting, **follow the directions on the next page**.

> Your surgery **will be cancelled or delayed** if you do not follow fasting instructions.

# **Before Surgery 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 1/2 cups) of clear fluids up to 3 hours before your surgery.

#### **Clear fluids are:**

• Apple juice

- Black coffee (no milk or milk substitutes)
- Water

- Clear tea (no milk, milk substitutes or
- Cranberry cocktail
- loose leaves)

**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 y our 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.





Front desk
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Check in at the front desk. You will have a hospital ID band put on your wrist. You will wear the ID wrist band during your stay; please do not remove it. You will be directed to the surgical admission area.

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.

If you need medication to help relax before surgery, tell your nurse when you are admitted.

Your family member or friend will be asked to take your belongings home for safe keeping, and bring them back after your surgery. If you are alone, the staff will take your items to your room.

### Before going to the operating room

Operating room "holding area"

# Operating room

Before going to the operating room, you will be asked to empty your bladder and remove your glasses/contact lenses, hearing aids, prosthesis, wig, body piercings and/or dentures if required. You will then be moved to the operating room "holding area."

In the operating room holding area you will be asked questions you have already answered. This is to double-check all your information. Your surgeon or anesthesiologist may visit you there. You will be taken into the operating room when it is ready.

In the operating room a nurse will stay with you to explain what is happening, answer any questions and offer support. The surgical team will go through a Safety Checklist when you are in the operating room. This checklist ensures that the entire team understands the surgical plan and that all the required equipment is ready. The length of time of your surgery depends on the type of surgery. After surgery you will be moved to the recovery room.

# Recovery room

In the recovery room, nurses will watch you closely. They will give you medication for pain and nausea as needed.

The length of time you are in the recovery room will depend on the type of surgery and how you react to the anesthetic. It is common to not remember much of your time in the recovery room. If you are staying in the hospital overnight, you will be moved to a nursing unit or, for some patients, a critical care unit.

### Your room

There are many things that can delay your arrival in your room after surgery. We request that family/friends allow extra time for you to get to your room.

# What to expect after your surgery



By knowing what to expect after surgery, you can plan now to help your recovery.

### Manage your pain

It is important to control the amount of pain you feel after surgery. This will help to reduce stress on your body, decrease risk of complications and return you to normal function sooner.

Your nurse will help to take care of any discomfort you may have. Pain can be managed in several ways. This includes pills, injections, patient controlled analgesia (PCA) pumps and epidural injections. Analgesia is another word for pain relief.

**Patient Controlled Analgesia (PCA)** is an intravenous (IV) pump that allows you to give yourself pain medication to reach a level of comfort that is right for you.

**Epidural Analgesia** is when pain medication is put through a long, thin tube into a small space between the bones in your back to help lessen the pain from your surgery.

Your surgeon and/or anesthesiologist will decide the best method for you.

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

• Do not hesitate to tell your nurse when you are getting uncomfortable. You should be comfortable enough to turn, move your arms and legs in bed and to do breathing and coughing exercises.

To help measure your pain, your nurse may ask you to rate your pain from 0-10.

- Zero 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 to manage your pain better.
- You can also describe pain with words like *none, mild, moderate, severe or worst possible.*



# Recovering from surgery

Research shows that there are activities that can speed up your recovery and reduce the risk of complications. Pneumonia is one possible complication.

Pneumonia is a potentially life threatening lung infection that can cause fever, cough, difficulty breathing and other serious risks.



# ICOUGH

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

- Improve lung health
- Coughing and deep breathing
- Oral care
- Understand
- Get up and move
- Head of bed raised

### - Improve lung health



Deep breathing exercises will help keep your lungs healthy and prevent lung problems. There are many types of breathing exercises. Your health care 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 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 per hour followed by coughing at least 2 times per hour. Your healthcare team will help you to do this.



### **Coughing exercise**

- Place a small pillow or blanket over your surgery area to protect or splint your incision. This helps decrease pain with coughing and allows a stronger cough.
- 2. Do your deep breathing exercises.
- 3. After several deep breaths, breath in and cough sharply out.
- 4. Clear sputum into a tissue.
- 5. Rest for a minute and repeat if you still have sputum to clear.
- 6. Do every 2 hours while you are awake and after your deep breathing exercise.



#### Oral care

Good mouth care is important while you are in hospital. Keeping your mouth clean helps prevent germs from going 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

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 prevent pneumonia and other complications.

### - Get up and move

Being as active as you can helps 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.

- 1. Practice your leg exercises whenever you are in bed.
- 2. The day of your surgery, we will help you to sit at the side of the bed or in a chair.
- 3. 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.
- 4. You will increase your activity every day after that until you are walking at least 3 times a day.
- 5. Practice your deep breathing and coughing exercises (ICOUGH- see page 26).



#### Straight leg stretch

 Pull toes up and press your knees into the bed. Hold for 3 seconds. Relax.
 Repeat 5x an hour.

#### **Heel slides**

1. Bend one knee and straighten it. Then do the other leg.

2. Repeat 5x an hour.

### 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

You may feel some minor side effects after general anesthesia. These can include sore throat, hoarseness, nausea, vomiting, headache, sleepiness, lack of appetite or muscle aches and pains. You may also have memory or concentration issues. This is normal for many patients. If you are concerned about this, talk to your doctor or nurse.

You may need to ask the nurses and doctor to speak slowly and clearly, until the anesthesia is out of your system. Some patients may find it easier to write things down using pen and paper.

Memory and concentration issues almost always go away in 24 to 48 hours. Call your doctor for advice if they do not settle down.

Anesthetic drugs, including intravenous (IV) sedation, may stay in the body for up to 24 hours after your surgery.





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).



# Eating and drinking after surgery

**Bariatric surgery patients:** Please do not follow the information in this section; instead, follow the instructions given to you by your Bariatric Program Team. If you're not sure what you should do, please ask!

After surgery, it is a good idea to chew gum. Chewing gum helps treat nausea without medication or side effects. It also helps your body restore normal gut function so you can eat sooner after surgery.

If your surgeon agrees, you can start to chew gum as soon as you are awake and alert. Chew gum 3 times every day for 15-60 minutes between meals.

Your intravenous (IV) will be removed as soon as you are drinking enough liquids. Your diet will be increased depending on the type of surgery you've had and how you are tolerating the food. Generally, it is fine to have food brought in from home, but check with your nurse first.

# Going to the bathroom

Your nurse will watch your bladder and bowel functions after surgery. You may have a catheter placed in your bladder to drain urine, before or during surgery. It will be removed within the first 48 hours after surgery, unless your surgeon decides otherwise.

### 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.

# My preparing for surgery checklist



Please complete this checklist to ensure you have done everything you need to do to prepare for your surgery and recovery.

This checklist is for you, the patient; it is helpful for your caregiver to review it with you, so they know what to expect, and how they can help. The items in this checklist are based on the information in this booklet. If you have any questions, please ask!



### Before surgery I will:



Get a preoperative (pre-op) physical exam with my family doctor or at a walk-in clinic as early as 3 months before, but no later than 1 week before my surgery date (if required by the hospital where I am having my surgery).

Talk to my family doctor about any medical issues that need to be addressed or better managed before surgery.



### Before surgery I will:



- Record my health care wishes, including what to do if I have a life threatening event during my hospital stay, on an Advance Care Plan.
- Quit smoking 6-8 weeks before surgery.
- Avoid alcohol and illicit drugs for at least 3 weeks before surgery.
- Participate in some form of daily exercise.
- Eat healthy food or talk to a Dietitian to improve my nutritional health.
- If I am from out of town, ask my surgeon or family doctor to complete a BC Travel Assistance Program (TAP) form to cover outof- town medical travel BEFORE surgery. (Learn more by calling 1.800.661.2668.)
- Arrange for any equipment that I need.
- Attend the hospital Preadmission Clinic (PAC) appointment (if required.)
- Request a private or semi-private room (if available at your hospital.)
- Identify one person to be my contact person while I am in hospital.
- Make arrangements for someone to:
  - Bring me to the hospital the day of surgery
  - Take my personal items (e.g. IPAD, wallet, jewellery) home.
  - Pick me up and drive me home on the day of discharge. Most discharges times are 9:00 am.





I commit to doing all of the above to prepare myself for my surgery and recovery. I am aware that this document will be shared with my care team so they know about my plans to recover and get home as soon as possible.







# Coming to the Hospital for Surgery

You are responsible for the care and safety of your personal belongings while you are in the hospital.

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.

Personal recording devices are not allowed in the OR or Recovery Room.

If you choose to keep your personal belongings with you, you will be asked to sign a form that indicates you understand you are responsible for the safety of your belongings while you are in hospital. If you are on your own, and unable to care for your items (e.g., you are unconscious), we will make a reasonable effort to keep things safe.



## What to bring:

BC CareCard or proof of substitute Medical Insurance Plan, or
another form of personal ID.

- An interpreter, if you do not understand English.
- Personal Health Number or proof of substitute Medical Insurance Plan. If you do not have these, bring another form of personal ID.
- A list of all the medications, including vitamins and herbal supplements that you are taking, including dosages.
- The names of any medications that may be toxic to your medical condition.
- 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).
   Most other medications are supplied by the hospital, but 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 you have been told by your surgeon that you will need to have put on in the operating room.
- Any crutches, cane, braces, or walker that you have been told by your surgeon that you will need, labeled with your name.



# What not to bring:

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Personal Items, su	ch as wallets, purses	, money, va	aluables and	credit cards.

- Do not wear perfume, aftershave or other scented products.
- Any jewelry or body piercing items. These items cannot be worn in the operating room because they increase the risk of infection and injury to the body, and may be lost or damaged.
- Prohibited items, such as illegal drugs, weapons (such as firearms and knives), alcohol and lighters.
- Large electrical appliances, such as portable stereos or fans.

Do not wear make-up, false eyelashes, hairpins, deodorant or talcum powder. It is okay to wear face cream, artificial nails, and nail polish, although it is best to avoid dark colored or metallic polish. If you are having surgery to an arm or leg, nail polish must be removed from that limb before coming to hospital.





### It is good to ask

We welcome your questions! Every time you speak with a doctor, nurse, pharmacist, or other team member use the following questions to better understand your health:

1. What is my health problem?

- 2. What do we need to do?
- 3. Why do we need to do this?

### Your healthcare team

This is a list of the healthcare team members that may be involved in your care. Depending on your surgery, you may have all of these members on your team, or just some of them.

Other healthcare team members may also be included, depending on your type of surgery.


- **Surgeon:** Does your surgery and directs your medical care after surgery.
- Anesthesiologist: Makes sure your pain is under control during and after your surgery.
- Specialist doctors: Provides care if you have special health needs (e.g., diabetes, heart conditions, lung conditions).
- Registered Nurse (RN): Directs, plans, and gives you nursing care. The RN also asks for input into your care from other members of the team, as needed.
- Licensed Practical Nurse (LPN): Works with the RN to plan and give you nursing care.
- Nursing Unit Assistant: Works at the nursing station, answers the telephone, and completes paperwork.
- **Pharmacist:** Makes sure that you get the medications you need while you are in hospital.

- Physical Therapist: Makes sure that you get moving and do your breathing and leg exercises as soon as possible after surgery.
- Occupational Therapist: Helps you to get back to your everyday activities, such as self-care.
- Dietitian: Answers your questions about what diet to follow at home and how to return to your normal eating. The Dietitian will adjust your diet as needed while you are in the hospital.
- Family Doctor: Your family doctor, if you have one and he or she has privileges, may visit you in the hospital.
- Health Care Aide (HCA): Works with RNs to provide personal care, such as bathing, dressing and toileting. They will also help you with your exercises and help you move in and out of bed.

# Coping with health issues

Sometimes it can be hard to cope with health changes. These can include physical, emotional or social issues that may be affecting you or your loved one. There are members of our health care team who can help, such as Spiritual Health Professionals, Aboriginal Liaison Nurses, or Social Workers. If you or your family would like to talk to someone about your concerns, please tell the nurse when you are admitted or if concerns arise during your stay.

## Private and semi-private rooms

Some hospitals have private or semi-private (two-bed) rooms, which you can request. Contact your hospital to see if private or semi-private rooms are available there. **A request does not guarantee you will get a private or semi-private room.** 

If you request a private or semi-private room, a charge will apply. Many extended health benefit plans cover a portion or all of the cost. Often, we can bill your extended health plan directly. Some plans require that we bill you directly. **You will not be charged for a private or semi-private room unless you request one.** 

To request a room, you need to complete a *Private and Semi-Private Room Request* & *Responsibility Form*. This can be done in person at your Preadmission Clinic Visit or at the Admitting Desk when you check-in.



People having surgery at Victoria General, Royal Jubilee or Nanaimo Regional General hospitals, can phone our Preferred Accommodation Clerk to request a room or to get more information.

**Preferred Accommodations Clerks** 

- Royal Jubilee Hospital or Victoria General
  250-519-5300 ext 12407
- Nanaimo Regional General Hospital 250-755-7691 ext 52297

Website:

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https://www.islandhealth.ca/patients-visitors/preparinghospital-stay/types-hospital-rooms

# Hospital conveniences

# Although most hospitals have these conveniences, it is best to ask before you are admitted for surgery:

- Televisions are available in most patient care lounges. Bedside televisions may be available for rent. A daily rate is charged and must be paid at the time of rental, with a credit card.
- Pay and courtesy phones are located throughout the hospital. Usually it is okay to use your cell phone in the hospital. Check with your nurse first.
- Check to see if wireless internet access is available for patients and visitors.
- Hospital gift shops offer reading materials, personal items, gifts and cards for purchase. Food may be available for visitors in hospital cafeterias, snack shops, or vending machines.

# Fire alarms

While you are in the hospital, you may hear fire alarms. Each hospital has regular fire drills to ensure the safety needs of our patients will be met quickly and safely. If you hear the fire alarm when you are in the hospital, stay in your bed and do not panic. If there is a fire, a nurse will come to get you and make sure you are out of danger.

## Parking

The *Parking* page on Island Health's website has parking rates and maps for most Island Health locations. This page also lists parking rates (hourly and weekly), and bus routes. Please note that parking is regulated at Island Health sites, and is in effect 24 hours per day. Local parking restrictions may be in effect; please check for signs.

https://www.islandhealth.ca/patients-visitors/parking





There are some things that your friends and family can do to help your healthcare team provide the best care they can.

Please share this information with your loved ones before you are admitted to the hospital for your surgery. If you have any questions about any of this information, please ask any member of your healthcare team.

# How visitors can help

While you are having surgery, your family members and friends are encouraged to go home or to the place they are staying. Make sure we have the phone number for your contact person so the surgeon can phone him or her after the surgery.

- Tell your family and friends who your contact person is, so they can check with him or her to see if you are up to having visitors, before coming to visit you. Your contact person can ask your nurse for the best time to visit you.
- Your visitors are encouraged to respect the concerns of nurses and end visits when asked.
- Limit visitors to close family and friends. This helps you get enough rest. People who do not visit can show they care by sending cards or letters.
- Ask your nurse if your visitors can bring in food from home.
- It's important that your visitors are considerate of other patients by visiting you quietly.
- Visitors should only use the public washrooms; the washrooms in the patients' rooms are for the patients only. Ask where the public washrooms are if you are not sure.
- Our staff shares important information about your care during shift change. Shift change happens between 7-8 a.m. and 7-8 p.m. every day. Calls to the unit from your contact person are appreciated outside these time frames.

# Stop the spread of infection

Visitors are asked to:

- Stay home if they are feeling unwell or have a cold, sore throat, cough, flu, fever, diarrhea, or a disease that could spread.
- Only enter the room of the patient they are visiting.
- Wash their hands when they enter and leave a patient room and when they leave the hospital.
- Not bring animals into the hospital.

# Protect everyone's health

Visitors are asked to:

- Avoid wearing perfume, scented hairspray, cologne or aftershave; do not bring in heavily scented flowers.
- Not bring in latex balloons. Foil balloons are okay.
- Not smoke anywhere on hospital property.

## Well wishes

*Well Wishes* is a way for family and friends to send email messages to loved ones in the hospital. You can send well wishes to a family member or friend staying at:

- Cowichan District Hospital WellWishesCDH@viha.ca
- Nanaimo Regional General Hospital patient.nrgh@viha.ca
- Royal Jubilee Hospital patient.rjh@viha.ca
- West Coast General Hospital WellWishesWCGH@viha.ca
- Victoria General Hospital patient.vgh@viha.ca



#### Well Wishes: How it works



### emails

Send your well wishes to one of the email addresses above. Remember to include the patient's full first and last name and room number so we can make sure your well wishes are delivered to the right person.

For more information about Well Wishes, check Island Health's website:

https://www.islandhealth.ca/patients-visitors/sending-well-wishes



### phone calls

To get the patient's room number, call the hospital at:

- Cowichan District Hospital...... 250.737.2030
- Nanaimo Regional General Hospital ...... 250.755.7691
- Royal Jubilee Hospital...... 250.370.8244
- Victoria General Hospital..... 250.727.4157
- West Coast General Hospital..... 250.731.1370

### Living our values

Created from the shared core beliefs of our staff, doctors, volunteers, and Board of Directors, Island Health's vision, purpose and values are the guiding principles we use to provide the highest quality health care services to the populations we serve.



**CARE** will guide everything we do:

Courage: To do the right thing – to change, innovate and grow.

Aspire: To the highest degree of quality and safety.

Respect: To value each individual and bring trust to every relationship. Empathy: To give the kind of care we would want for our loved ones.

Learn more about our strategic direction, including our vision, purpose and values:

https://www.islandhealth.ca/about-us/accountability/strategic-direction/ vision-purpose-values

Compliments and concerns

# How do I send a compliment?

Quality care is important to all of us. You have the right to give feedback about your care and know you will be treated fairly. Your feedback gives us an opportunity to improve the care and services we provide.

If you are receiving care from us, please take a moment to pass on your compliments directly to the person providing your care. Our staff members are thrilled to hear that you have appreciated their care.

If you are no longer receiving care or services, you may contact the **Patient Care Quality Office** to pass on your feedback. They will relay your comments to those who provided your care or service.

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Patient Care Quality Office Royal Jubilee Hospital 1952 Bay Street Victoria, BC V8R 1J8 Memorial Pavilion, Watson Wing, Rm 315 Toll-free: 1.877.977.5797 / Greater Victoria: 250.370.8323 patientcarequalityoffice@viha.ca https://www.islandhealth.ca/patients-visitors/patient-care-quality-office

## How do I lodge a complaint or concern?

If you have a complaint about your care please speak with the health care provider or the Unit Manager for that area first (you can ask for the Unit Manager at the nursing station). It is best to address and resolve a complaint when it occurs. If you have a complaint that remains unresolved, the next step is to contact the Island Health Patient Care Quality Office.

**Please note:** lodging a complaint or concern will not affect your health care in the future; it will help us improve our health care in the future for you and for others!





# 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.

If a family member or friend will be looking after you at home, ask them to be with you for the discharge process. This way, they can take notes and ask questions about any instructions (e.g., care at home, medications) that you are given. If you are discharged before someone is able to pick you up, we may ask you to wait in the Discharge Lounge (available at some hospitals) for your ride.

Before you leave the hospital your nurse will:

- Remove your ID band and dispose of it safely.
- Help you to get dressed, if needed.
- Go over your care instructions with you.
- Provide you with written discharge instructions and prescriptions, when applicable.

You can use this table to write down all the medications and dosages you are to take once you get home.

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Medications I need to take	Dose	Time	

Hospital bill

Most hospital stays are covered under the BC Medical Services Plan. Uninsured residents, non-Canadians, or persons not covered by the health care plan must pay the full cost of their stay and/or procedure prior to admission. You may pay by credit card, debit, check or cash.

> Surgery Reports Depending on the type of surgery, reports are usually ready 2 weeks after the surgery date.

Follow-up Appointments When you get home, call your surgeon's office and make an appointment for \_\_\_\_\_ days after surgery.



Follow the instructions given to you.Fill any prescribed medications and take them as directed.Hang your post-op instructions, and any other details you think might be

helpful to your caregiver, on your fridge door.

Make/keep follow-up appointments with your surgeon and/or doctor.





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.



Plan your day to allow for both rest and activity. Continue with your deep breathing and coughing exercises. Begin taking short walks. Gradually increase how far you walk.



# Going to the bathroom

**Bariatric surgery patients:** Please do not follow the information in this section; instead, follow the instructions given to you by your Bariatric Program Team. If you're not sure what you should do, please ask!

Changes in food and activity levels can cause constipation (hard bowel movements). As well, most pain pills can cause constipation. You can help avoid constipation by:

- Being as active as possible within limits of your surgery.
- Drinking lots of fluids.
- Eating high fibre foods such as fresh fruits, vegetables, whole grain breads and cereals, or bran.
- Taking a mild laxative when needed. Ask your pharmacist or doctor to suggest one.

If you have pain when you get home from the hospital, follow your doctor's orders and take any medications they tell you to take. You can also try these simple relaxation techniques:

- Deep breathing.
- Covering yourself with warm blankets.
- Listening to music you enjoy.

Being positive about your recovery and taking an active role in it will also help how fast you feel better.

Pain BC has a booklet to help you develop a personal toolbox of pain solutions. *Treatment Options for Pain: Beyond Medications, Surgery and Injections* is available on the Pain BC website:

http://www.painbc.ca/chronic-pain/pain-toolbox).

Ask your doctor where to get a copy if you do not have access to a computer.

# Eating and drinking at home

**Bariatric surgery patients:** Please do not follow the information in this section; instead, follow the instructions given to you by your Bariatric Program Team. If you're not sure what you should do, please ask!

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(HealthLink BC) 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.





# Managing stress

Take the time to heal. Rest often, eat well, and generally take good care of yourself. This will help your recovery.



# Going back to work

Check with your surgeon or family doctor before going back to work. When you go back to work depends on the type of work you do and the type of surgery you had. Sometimes it can take 6 to 8 weeks or longer for you to recover enough to go back to work.



Ask your surgeon when it is safe for you to play contact sports, such as hockey or football.

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Alcohol

**Bariatric surgery patients:** Please do not follow the information in this section; instead, follow the instructions given to you by your Bariatric Program Team. If you're not sure what you should do, please ask!

It is best to avoid alcohol for at least 4 weeks after surgery.



# Sexual activity

Some people find they do not have the same interest in sex as they had before surgery. This is normal; interest usually increases as you feel stronger. You can resume sexual activity when your surgeon tells you it is okay to do so, you have enough strength, and your pain is under control.



# 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.

# Bathing

**Bariatric surgery patients:** Please do not follow the information in this section; instead, follow the instructions given to you by your Bariatric Program Team. If you're not sure what you should do, please ask!

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.

If your surgeon or nurse tells you that you can shower daily when you get home, but does not give you specific direction, follow these instructions:

- 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.
- Avoid aiming the showerhead at your incision.
- 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.
- Apply a new dressing only if the incision is draining, or if you want to protect the wound from rubbing on your clothing.
- Avoid soaking your incision in a bath, hot tub or swimming pool for 2 weeks after surgery, or until it is completely healed.
- If it will make you feel more comfortable, you may want to have someone stay in the washroom while you shower.





# 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.

## Who to Contact:

### 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.



# Resources

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The **Your Visit** page on Island Health's website has links to the information you, your family member(s) and visitors need to ensure your time with us is as comfortable as possible:

https://www.islandhealth.ca/patients-visitors/visiting-someone-in-hospital

### Resources

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**Enhanced Recovery BC** – learn more about Enhanced Recovery After Surgery (ERAS) and how using this approach helps patients recover faster and better after surgery. The ERAS approach is based on research and is being used in many hospitals in BC and across Canada. For more information about ERAS, visit.

http://enhancedrecoverybc.ca/

Other Island Health surgery resources you might find helpful are: Meeting your surgeon and Improving your health before surgery booklets



### Available at:



Island Health Surgery Resources

www.islandhealth.ca/learn-about-health/surgery/getting-ready-surgery





notes:

# Tell us what you think!

After reading *this booklet* please respond to the following statements. Your answers and comments will help us improve the information.

Circle one number for each statement:	strongly disagree			strongly agree		
I read all of the information provided. Comments	1	2	3	4	5	
The information is easy to read.	1	2	3	4	5	
The information is easy to understand.	1	2	3	4	5	
Reading this information helped me prepare for and recover from my surgery. Comments	1 	2	3	4	5	
The information answered my questions.	1			4	5	
I would recommend this information to other patients.	1 	2	3	4	5	
Comments						

I prefer to have this information in:

\_\_\_\_\_ A book just like this one

\_\_\_\_\_Separate handouts on each topic that I need

Comments

I would have liked MORE information about:

I would have liked LESS information about:

What changes would you make in this booklet to make it better?

l am:

\_\_\_\_a patient \_\_\_\_a family member

Please give this evaluation form to your health care provider or mail to:

Manager of Surgical Quality Surgical Services 2<sup>nd</sup> Floor, Memorial Pavilion Royal Jubilee Hospital 1952 Bay Street Victoria, BC V8R 1J8





notes:	



