

## **GETTING READY FOR SURGERY**

After you've checked in, you'll be taken to a room to prepare for surgery. You will read and sign a surgery consent form, if you haven't done so already.

You will be given an ID band with your name, and a hospital ID number on it. Keep this band on during your stay.

A family member or friend may be able to stay with you once you are ready for surgery. Try to limit the number of family members you bring with you and designate one member to be your spokesperson. First you'll change into a hospital gown. An IV may be started to give you fluids. You may also be given a sedative to relax you. You will then be taken on a stretcher to a holding area or the operating room. Your family and/or friends will be shown where they can wait.

## **PREOPERATIVE INTERVIEW**

Anesthesia and surgery affect your entire system, so it is important for your anesthesia provider to know as much about you as possible. Prior to your surgery, an anesthesia provider will carefully evaluate you and your medical history and will inquire about your recent medications. In addition, he/she will inform you about the procedures associated with your surgery, discuss your anesthetic choices, their risks and benefits, order appropriate laboratory tests and prescribe medication for you, if needed, before your operation.

## **TYPES OF ANESTHESIA**

Your anesthesia provider along with your surgeon will determine the best type of anesthesia for you, taking your desires into consideration whenever possible. Your anesthesia may include: Monitored Anesthesia Care [MAC], regional anesthesia, or general anesthesia.

## **MONITORED ANESTHESIA CARE [MAC]**

Monitored Anesthesia Care is often used for surgery that is short or does not go deep into the body. Sedatives [medicine to relax you] or pain medicine may be given through an intravenous [IV] line. The surgical site is often numbed with a local anesthetic. You may choose to remain awake or sleep lightly.

## **REGIONAL ANESTHESIA**

Regional anesthesia is often used for surgery on the arms, legs, or abdomen, or during childbirth. Part of your body is numbed by injecting anesthetic near your spine or near nerves in your arms, neck, or legs. The region will begin to feel numb in a few minutes. You may also be given sedatives through an IV to relax you. You may choose to remain awake or sleep lightly.

## **GENERAL ANESTHESIA**

General anesthesia is often used for major surgery, such as on the heart, chest, brain, or abdomen, or when the patient wants to be fully asleep. It may be given as a gas that you breathe or in liquid sent through an IV. Once the anesthetic is started, you will fall asleep. You feel no pain and remember nothing of the surgery.

## **RISKS AND COMPLICATIONS**

The risks and possible complications of anesthesia depend on your overall health. Your anesthesiologist will discuss the risks and complications with you.

## **IN THE OPERATING ROOM**

The operating room provides a safe, comfortable place for surgery. Your anesthesia provider and surgeon are there. Other surgical team members include one or more nurses, surgical technicians, and sometimes an assisting surgeon. Your anesthesia provider is with you the entire time.

## **STARTING YOUR ANESTHESIA**

When you're on the surgical table, monitors placed on your chest and arms help make sure that the surgery proceeds safely. If IV sedation and fluids were not given before surgery, an IV line will be started. The anesthesia provider will begin the anesthesia, and surgery will start. If you choose to stay awake during surgery, you'll see bright lights and a lot of movement nearby.

## **DURING SURGERY**

During surgery, your anesthesia provider watches how you respond to the anesthetics. He/she can help maintain your breathing, heart rate, or blood pressure, if needed. If you need blood or other fluids during surgery, the anesthesia provider will also give them. If you choose to remain awake, he/she may talk to you during surgery to let you know how things are going.

## **AFTER SURGERY**

When your surgery is completed, you will be transferred to the Post Anesthesia Care Unit [PACU], also known as the Recovery Room. The PACU nurses are specially trained to provide expert care to you. They will give you fluids through your IV as needed. They will check your heart rate, blood pressure, breathing, and body temperature, and keep you warm. Most important, the PACU nurses will give you medicine to keep you comfortable.

When you are recovered from anesthesia, you will be transferred to your room if you are staying in the hospital, where nurses will continue to care for you.

If you are planning on going home after your surgery, you will be transferred to the Surgical Day Care [SDC] department where the nurses will continue to care for you and prepare you to go home. You may sit in a reclining chair. Your family and friends may be able to join you. You may be given something to drink and a light snack.

## **GOING HOME**

Be sure to have an adult ready to drive you home. When you are ready to leave, you may still feel drowsy or a little sick to your stomach. Before you leave, you will receive instructions for what to do at home. If you need crutches or other equipment, you will be shown how to use them. If you can, have a person who will be helping you listen to these instructions. Ask any questions you have, such as:

- Are there foods or drinks I should avoid?
- How should I care for my incision?
- What medications should I take?
- What medications should I not take?
- What should I do if I have pain?
- When can I drive or return to work?
- Are there exercises I should do or activities I should not do?

## **RECOVERING AT HOME**

You may be an inpatient (staying in the hospital overnight) or outpatient (going home the day of surgery). Either way, your doctor will decide when you are ready to go home. Before you go, your doctor or nurse will answer your questions about home care, including visiting nurses or home health aides. You will also receive post-op instructions to follow.

You will need a family member or friend to listen to these instructions with you, drive you home, and help as you recover.

At home, follow instructions you've been given. For at least 24 hours, don't drive, use machines or power tools, or drink alcohol. Also, don't make any important decisions or sign important papers.

## **SUPPORT**

For the first day or two, have someone around who can help you and watch for problems. Make sure this person knows what you can and can't eat, what medications you should take, and what other instructions you were given.

## **INCISION CARE**

You may leave the hospital with a bandage or dressing. Your doctor will tell you when to remove it. Keep the dressing clean and dry. Ask your doctor when you can shower or take a bath again. Some bleeding and leakage is normal. But if the bandage soaks through, call your doctor.

## **EATING AND DRINKING**

Your stomach may be upset, and you may be constipated for a few days. You may not feel like eating much. Follow your doctor's orders about food.

- Start off with clear liquids and soup. Then slowly move to solid food. Don't eat fatty, rich, or spicy foods at first.
- Every day, drink at least 6 glasses of clear liquids (such as water, apple juice, or ginger ale,) unless your doctor says not to.

## **ACTIVITY**

Being active helps you heal. Ask your doctor what you can and cannot do after surgery. You may have been shown how to do deep breathing and coughing exercises. These help keep the lungs clear and improve blood flow. Do them as often as instructed.

## **MEDICATION**

- Take pain medication at regular times as directed. Don't wait until the pain gets bad to take it. If the medication doesn't relieve your pain or if the pain gets worse, call your doctor.

- Pain medications can upset your stomach. Taking them with a little food can help.
- Pain medications can make you sleepy or dizzy. Call your doctor if this is severe or if you have side effects.
- Take only as much medication as prescribed.
- If you have been prescribed antibiotics, don't stop taking them until you finish the bottle or your doctor tells you it's okay to stop.

## **FOLLOWING UP WITH YOUR DOCTOR**

After surgery, you will visit your doctor for a follow-up. Before the visit, write down your questions or concerns. Bring this list when you visit your doctor.

## **WHEN TO CALL YOUR DOCTOR**

Call your doctor if you notice:

- Chest pain
- Vomiting lasting longer than 4 hours
- A large amount of bleeding or swelling
- Smelly discharge from the surgical site
- A red, hard, hot, or painful area around the incision or on your legs
- Shortness of breath
- No bowel movement within 3 days
- Fever over 101°
- Allergic reaction to medications such as a rash or hives

# **MAKING YOUR SURGERY SAFE AND COMFORTABLE**

**Valuable information  
about surgery**



One Elliot Way  
Manchester, NH 03103  
603-663-2599 Pre-Surgical Testing

Surgical Day Care  
One Elliot Way  
Manchester, NH 03103  
603-663-2665

Website: [www.elliethospital.org](http://www.elliethospital.org)

