



ለቀዶ ጥገናዎ (አፕራሲዮኑ) ጥላን ማውጣት

ከአፕራሲዮኑ በፊት:

- ከሆስፒታል ከወጡ በሁለት ወይ ቤት የሚወስድዎትን ሰው ያዘጋጁ። በመኪናው ውስጥ በምቶት መቀመጥ መቻልዎን እርግጠኛ ይሁኑ።
- ከሆስፒታል ከወጡ በሁለት እያገገሙ እያሉ ለሁለትና ሶስት ቀን ምግብ የሚሰራልዎትን ሰው ያዘጋጁ። በዚህ ውቅት 24 ሰዓት ከርሶ ጋር የሚቆይ ዘመድ ወይም ጉዋደኛ ያዘጋጁ።
- እርሶ በሌሊት ሰዓት የቤት እንሰሳዎን የሚንከባከብ ሰው ያዘጋጁ።
- ለመደበኛ ሃኪምዎ (PCP) ቀጠሮ ስለተያዘለት አፕራሲዮን ይንገሩ። PCP (መደበኛ ሃኪም) ከሌለዎት ለክሊኒክ ነርስ ይንገሩ።
- ከሆስፒታሉ እንደወጡ የሚሄዱበት ቦታ የሚያሳስብዎት ከሆነ ለሚንከባከብዎት ቡድን ይንገሩ። ከሶሻል ዎርከር ጋር ቀጠሮ ይይዙልዎታል።
- በአፕራሲዮኑ ወቅት ስለ መዲሃኒኮችዎ አጠቃቀም ለመነጋገር ፕሪ-አኔስቴዥያ የተሰኘ ቀጠሮ ይያዝልዎታል።

ከአፕራሲዮኑ 5 ቀናት በፊት ጀምሮ:

- የተሰጠዎትን “እምጋክት አድቫስ ሪኮቫሪ” ፈሳሽዎን ለአምስት ቀናት በቀን ሶስት ጊዜ ይጠጡ።
- የስክዋር ህመምተኛ ከሆኑ በቀን ድስት ጊዜ ግማሽ ካርቶን ይጠጡ።

ቀን: 1	ቀን: 2	ቀን: 3	ቀን: 4	ቀን: 5
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

በሆድ በኩል ቆሻሻ ማውጫ (አስቶሚ) መቅደድ አስፈላጊ ከሆነ:

- ከአስቶሚ ነርስ ጋር ቀጠሮ ይኖርዎታል።
- የቆሻሻ መውጫው (አስቶሚ) የሚቀደድበት ቦት ለአፕራሲዮን አድራጊው ሃኪም በግልፅ እንዲታይ ምልክት ይደረጋል።

አንድ ቀን ከቀዶ ጥገናው በፊት

- ጎሊዩትሊውን (GoLYTELY) በተነገርዎት መንገድ ይውሰዱ።
- Neomycin እና Metronidazole መድሃኒቶች በተነገርዎት መንገድ ይውሰዱ።
- ለሆስፒታል ቆይታዎ ይዘው የሚመጡትን ሁሉ ያሰናዱ። ከአፕራሲዮኑ በሁለት የሆስፒታል አልጋ ሲያገኙ ዘምድዎችዎ ወይም ጉዋደኞች ያሰናዱትን እቃዎች ይዘውልዎት ይምጡ።

ምን ምን እንደሚያመጡ (አስፈላጊ ከሆነ):

- C-PAP ሲፓፕ መሺን
- እየወሰዱ ያሉትን የመድሃኒት ዝርዝር
- ዎከር, ዊልፔር

ጆሮ ላይ የሚደረግ መስሚያ፣ መነፅር፣ አርቴሬሻል ጥርስ

- የተዛዘ ወረቀቶች (ካለዎት)
- ቤተሰቦችዎ ሊያመጡልዎት የሚችሉ ቁሳቁሶች:**

- የኤሌክቶርኒክ እቃዎች
- ከኢንሹራንስ ለሚተርፍ ክፍያ መዲሃኒት መግባቱ ገንዘብ (ጥሬ ገንዘብ፣ ቻርጅ ወይም ዴቢት)

ተይዘው የማይመጡ ነገሮች:

- መድሃኒቶች (ይዘው ይምጡ ካልተባሉ በስተቀር)
- ጌጣጌጥ እና ሌሎችም ክፍ ያለ ዋጋ ያላቸው እቃዎች

ከአፕራሲዮኑ በፊት ምሽት:

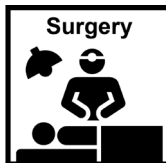
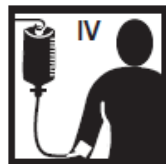
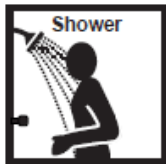
- ሰውነትዎን ይታጠቡ ወይም በተሰጠዎት አንቲ ባክቴርያ በሆነ ሳሙናና ስፖንጅ ይጠራርጉ።
- ከእኩለ ሌሊት በፊት: የስክዋር በሽታ ከሌለብዎት: አንድ ካርቶን እንሹር ክሊር ይጠጡ።
- ለቀዶ ጥገና ለመምጣት 8 ሰዓት ሲቀርዎት: ስጋ ወይም ቅባት የበዘበት ምግብ አይብሉ።
- ለቀዶ ጥገናው ለመምጣት 6 ሰዓት ሲቀርዎት: ምንም ነገር አይብሉ። ለቀዶ ጥገናው ሆስፒታል ለመድረስ ሁለት ሰዓት እስኪቀርዎት ድረስ በውሰጡ የሚያሳይ ጥርት ያለ ፈሳሽ ሊጠጡ ይችላሉ።



የቀዶ ጥገናው እለት

ከቤት ከምወጣትዎ በፊት:

- ደግመው ሰውነትዎን ይታጠቡ ወይም በተሰጠዎት አንቲ ባክቴሪያ በሆነ ሳሙናና ስፖንጅ ይጠራርጉ
- በተነገርዎት መሰረት የተለመደውን መድኃኒትዎን ይውሰዱ።
- የስኩዋር በሽታ ከሌለዎት በ_____ ሰዓት አንድ ካርቶን ኢንሹር ስርጀሪ ይጠጡ
- ለአፕራሰዮኑ ከመድረሱ ሁለት ሰዓት አስቀድሞ: ምንም ነገር እንዳይበሉ ወይም እንዳይጠጡ።

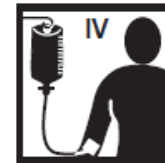


ሆስፒታል ከደረሱ በሁዋላ:

- ሜሌንግ ህንፃ “G” ወልል ላይ ባለው የአፕራሰዮን መመዘገቢያ ደስክ ይመዘገቡ።
- የኑዛዜ ወረቀት ካለዎት አንድ ግልባጭ የእንግዳ ተቀባይ ደስክ ላይ ላሉት ስራተኞች ይሰጡ።
- ነርስ መጥታ ወደ ቅድመ-አፕራሰዮን (Pre-Op) ክፍል ትወስድዎታለች።
- የስኩዋር በሽታ ካለብዎት የደምዎ የስኩዋር መጠን ይለካል።
- አንቲባዮቲክና ፈሳሽ መስጫ ቱቦ (IV) በከንዶ ላይ ባለ የደም ስር ይገባልዎታል።
- የአፍናጫዎ ቀዳዳዎች በጀርም መግደያ (antiseptic) ይጠረጋል። ይህም ከአፕራሰዮኑ በሁዋላ ሊከተል የሚችል የብክለት (infection) አደጋ ለመቀነስ ነው።
- የማደንዘዣ ሀኪም (Anesthesiologist) የህመም ማስታገሻ መድኃኒት መስጫ መስመር (epidural line) በጀርባዎ ላይ ያስገባ ይሆናል።
- የሚያሞቅ: እንዲሁም ለማገገም የሚረዳ፣ የኢንፈክሽን (ብክለት) አደጋ የሚቀንስ ብርድ ልብስ ያለብስዎታል (መቀት ቢሰማዎትም ብርድ ልብሱን እንደለበሱ ይቆዩ)።
የሚያስተኛ መድኃኒት የሚሰጡዎት ቡድን ወደ ቀዶ ጥገናው ክፍል ይወስድዎታል።

ከቀዶ ጥገናው በሁዋላ:

- ወደ ማገገሚያ ክፍል ይወሰዳሉ፤ ከዚያም ወደ ሆስፒታል አልጋ ክፍል ይወሰዳሉ።

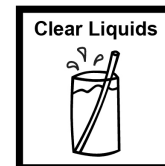


የሚከተሉት ይደረገልዎታል:

- አንቲባዮቲክና የፈሳሽ መስጫ የአይቪ (IV) መስመር በደም ሥር ይገባልዎታል
- የደም መርጋትን ለመከላከል እግሮችዎ ላይ ጥምጣም ይደረግልዎታል።
- የህመም ማስታገሻ መስጫ እንዲያገለግል በአከርካሪዎች መሃል ከቀዶጥገናው በፊት ቱቦ ገብቶልዎት ከሆነ እንዲቆይ ይደረጋል።
- ከፊኛዎ ሽንት ለማውጣት ቱቦ

ቆሻሻ ለማውጣት በሆድ ቀዳዳ (አስቶሚ) ተበጅቶ ከሆነ የሚከተለው ይደርጋል።

- ቁስልዎ ላይ ባንዴጅ
- በሆድ ቀዳዳ (አስቶሚ) ቆሻሻ መቀበያ ከረጢት



ነርስ በሚከተሉት መንገድ ይረዱዎታል:

- የሳንባ ምች እዳያገኝዎ የመተንፈስ ልምም
- የትንፋሽ ሜትሩን በሰዓት 10 ጊዜ በሆስፒታል ቆይታዎ በየቀኑ እንዲጠቀሙ በማስታወስ
- ጥርት ያለ ፈሳሽ መውሰድ ለመጀመር
- ወንበር ላይ ለመቀመጥ መርዳት
- በሁለት ሰዓት ውስጥ ከአልጋ እንዲነሱ
- ከምሽቱ አስር ሰዓት ላይ በእግር ኮሪዶሩ ላይ መሄድ



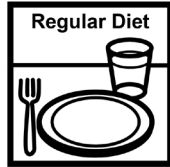
በሁለተኛው ቀን (ቀን: 1)

መድሃኒቶችና እንክብካቤዎች

- ነርሶዎ በጠዋት የሽንት ቱቦን ታወጣልዎታለች
- ሆስፒታል ውስጥ እያሉ አልጋ ላይ በሚተኙበት ጊዜ ሁሉ የደም መርጋት እንዳይከሰት እግር ላይ ጥምጣም ይኖርዎታል.

ምግብና እንቅስቃሴዎች

- ለማገገም እንዲረዳዎ መተላለፍያው ላይ በቀን (ሁል ቀን) ከሁለት እስከ ሶስት ጊዜ ይሂዱ
- የኤፕዱራል ቱቦ ካለብዎት ከእንክብካቤው ቡድን ውጭ ብቻዎን ከአልጋ እንዳይወርዱ
- ጠጣር (ሶሊድ) ምግብ ሙብላት እንደቻሉ ወደ ጠጣር ምግብ መሸጋገር ይችላሉ። ምግብ ለማዘዝ ከአልጋዎ ሆነው በዚህ ስልክ ይድውሉ 4.5678



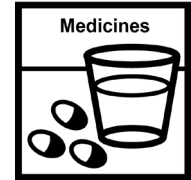
የእንክብካቤ ቀጣይነት

- እንክብካቤ ከሚሰጥዎት ቡድን ጋር ሆነው ከሆስፒታል ስለአወጣጥዎ ፕላን (አቅድ) ይወያያሉ።

ቀን: 2

መድሃኒቶችና እንክብካቤዎች

- ህመምዎን በመድሃኒትና መድሃኒት-አልባ በሆነ ዘዴ እንቆጣጠርዋለን።
- የእንክብካቤ ቡድንዎ:
 - የአፒዱራል (መድሃኒት መስጫ) ቱቦውን አውጥተው በአፍ የሚወሰድ መድሃኒት ይሰጥዎታል።
 - በጠዋት እሽጉንን ፈትተው ቁስሉ አየር እንዲያገኝ ያደርጋሉ።



እንቅስቃሴዎች

- ቶሎ እዲያገግሙ መተላለፊያው መንገድ ውስጥ በተቻለዎት ድግግሞሽ ይሂዳሉ።

የእንክብካቤ ቀጣይነት

- ከእንክብካቤ ሰጪው ቡድን አባል ጋር ከሆስፒታል ስለአወጣጥዎ ፕላን የሚከተሉትን ይነጋገራሉ፤
 - ወደ ቤትዎ የሚሄዱ ከሆነ ወደ ቤት የሚወስድዎት ሰው መኖሩን ያረጋግጡ። ወደ ቤትዎ የሚያደርስዎት ሰው እኩለ ቀን አካባቢ ዝግጁ መሆኑን ያረጋግጡ። እንዲሁም ቤትዎ ውስጥ የሚረዳዎት ሰው ያዘጋጁ።
 - ከሆስፒታል ሲወጡ መሄጃ የለኝም ብለው የሚያሳሱበዎት ከሆነ ለሚንከባከብዎት ቡድን ይንገሩና ሶሻል ዎርከር እንዲያነጋግሩ ይረዱዎታል።



ከመውጣት በፊት ሶስት ቀን ሲቀርዎት

- ከሆስፒታሉ ለመውጣት ዝግጁ የሚሆኑት፤
 - መብላት እንዲሁም መፍሳት ሲችሉ
 - በንቅስቃሴ ህመምዎን መቆጣጠር ሲቻል
 - መተላለፊያው ውስጥ መሄድ ሲችሉ
 - ቁስሎ ሲደርቅና የብክለት (ኢንፈክሽን) ምልክት ከሌለው
 - የፈሳሽ ቱቦ (IV) አስፈላጊነቱ ካበቃ

እንቅስቃሴዎች

- ቶሎ እዲያገግሙ መተላለፊያው መንገድ ውስጥ በተቻለዎት ድግግሞሽ ይሄዳሉ።

የእንክብካቤ ቀጣይነት

- እንክብካቤ ከሚሰጥዎት ቡድን ጋር ሆነው ከሆስፒታል ስለአወጣጥዎ ጥላን (እቅድ) ይወያያሉ።
 - ወደ ቤትዎ የሚሄዱ ከሆነ ወደ ቤት የሚወስድዎት ሰው መኖሩን ያረጋግጡ። ወደ ቤትዎ የሚያደርስዎት ሰው እኩለ ቀን አካባቢ ዝግጁ መሆኑን ያረጋግጡ። እንዲሁም ቤትዎ ውስጥ የሚረዳዎት ሰው ያዘጋጁ።
 - ከሆስፒታል ሲወጡ መሄጃ የለኝም ብለው የሚያሳሱበዎት ከሆነ ለሚንከባከብዎት ቡድን ይንገሩና ሰሻል ዎርከር እንዲያነጋግሩ ይረዱዎታል።



ከሆስፒታል በሚወጡበት ቀን

መድሃኒቶችና እንክብካቤዎች

- ወደ ቤት የሚሄዱ ከሆነ ሃኪምዎ አዲስ መድሃኒቶችን ያዘልዎታል። የህመም ማስታገሻን ይጨምራል። የታዘዙትን መድሃኒቶች ከሃርበርቪው ወይም እርሶ ከፊለጉት መድሃኒት ቤት ሊያስሞሉ ይችላሉ።
- ወደ ነርሲንግ ሆም የሚሄዱ ከሆነ ሲወጡ የታዘዙዎትን መድሃኒት እነሱው ያስሞሉልዎታል።

የእንክብካቤ ቀጣይነት

- ከሆስፒታል ከመውጣት በፊት ለክትትል ወደክሊኒክ የሚመለሱበትን ቀጠሮ ስለመያዝ እናነጋግርዎታለን።
- ለመደበኛ ሃኪምዎ (PCP) የህክምና ፋይልዎ ስለሆስፒታሉ ይደርሰዋል።
- ከሆስፒታል ስለአወጣጥዎ መመሪያ ነርሶ ታነጋገርዎታለች።
- በማገገምዎ ላይ ባለው መልካም ለውጥ እንኩዋን ደስ አለዎት!



እቤት ከገቡ ብሁዋላ

- ከሆስፒታል ሲሰናበቱ ወደ ቤት የሚሄዱ ከሆነ፤
 - ከሆስፒታል ወጥተው በሁለት ቀን ውስጥ የክፍሉ ነርስ ጤንም እንዴት እንደሆነ ለማወቅ ይደውሉልዎታል።
 - ከአፕራሲዮኑ ሁለት ሳምንት በሁዋላ የአፒዩድ ህመም ማስታገሻ አስፈላጊነት ካላበቃ መደበኛ ህኪምዎን ስለህመም መቆጣጠርያ መድሃኒት ምርጫዎ ያማክሩ
- ስለማንኛውም የጤና ጉዳይ ጥያቄ ካለዎት መደበኛ ሃኪምዎን ያነጋግሩ
- ለክትትሉ ከ _____ ሳምንት በሁዋላ ወደ ጀነራል ሰርጀሪ ተመልሰው ይመጣሉ።



ጥያቄ ወይም የሚያሳሱበዎት ጉዳይ?

ከቀዶ ጥገናው በፊት :

- አንድ ቀን ከአፕራሲዮኑ በፊት 3 p.m. እሲኪሆን ድረስ፣ ለታካሚዎች እንክብካቤ አቀነባባሪው በዚህ ስልክ ይደውሉ። 206.744.3195.
- አንድ ቀን ከአፕራሲዮኑ በፊት 3 p.m. ሲሞላ ለአምቡላቶሪ ሰርጀሪ በሚቀጥለው ስልክ ይደውሉ 206.744.5432.

ከሆስፒታል ከወጡ በሁዋላ

- ክሊኒክ (በሥራ ቀናት 8 a.m. እስከ 4 p.m.): 206.744.3241
- ዲስቻርጅ ነርስ (ምሽት በሥራ ቀናት እና በአመት በአል ቀናት): 206.744.3276

Abdominal Surgery CareMap: Your Hospital Stay

For _____

Planning for Your Surgery

- Make plans for:
 - Your ride home after your hospital stay. Make sure you can easily ride in the vehicle.
 - A responsible adult to help you after you get home. You will need help with your care and preparing meals for 2 to 3 days. Arrange for a friend or family member to be with you 24 hours a day during this time.
 - Pet care while you are away, if needed.
- Tell your primary care provider (PCP) that you are having abdominal surgery. If you do not have a PCP, talk with your clinic nurse.
- If you have concerns about where you will go when you leave the hospital, tell your care team. They will set up a time for you to talk with a social worker.
- You will have a pre-anesthesia visit before your surgery to plan for your medicines during surgery.

Starting 5 days before surgery:

- If you do **not** have diabetes:* Drink 1 carton of Ensure Surgery drink 3 times a day for 5 days. Check 3 boxes for each day.
- If you have diabetes:* Drink ½ carton of Ensure Surgery 6 times a day for 5 days. Check 6 boxes for each day.

Day 1 DATE		Day 2 DATE		Day 3 DATE		Day 4 DATE		Day 5 DATE	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you will have an ostomy:

- You will visit with an ostomy nurse to learn what to expect.
- The nurse will mark the *stoma* site on your body and cover it with a clear dressing. Do **not** remove the dressing.

Day Before Surgery

- Take your Golytely as instructed.
- Take your Neomycin and Metronidazole medicine as instructed.
- Pack for your hospital stay. Ask your family or friends to bring your belongings after you have settled into your hospital room after surgery.

What you will bring (if needed):

- C-PAP machine
- List of medicines you now take
- Walker, wheelchair, cane
- Hearing aid, glasses, dentures
- Advance directive(s), if you have them

What your family can bring:

- Money for prescription co-pay (cash, charge, or debit card)
- Electronic devices and chargers

Do NOT bring:

- Medicines, unless you were told to bring them
- Jewelry and other valuables

Night Before Surgery

- Use the antibacterial soap or wipes you were given to take a shower or sponge bath.
- Before midnight:** *If you do **not** have diabetes:* Drink 1 carton of Ensure Clear drink.
- Starting 8 hours before you arrive for surgery:** Do **not** eat meat or food that is high in fat.
- Starting 6 hours before you arrive for surgery:** Do **not** eat anything. You may drink clear liquids (drinks you can see through) up until 2 hours before you arrive at the hospital.



Surgery Day

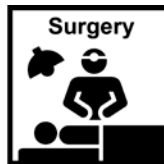
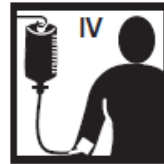
Before You Leave Home

- Take another shower or sponge bath with the antibacterial soap or wipes given to you.
- Take your daily medicines as you were told.
- If you do **not** have diabetes: Drink 1 carton of Ensure Clear at _____.
- Starting 2 hours before you arrive for surgery:** Do **not** eat or drink anything.



At the Hospital

- Check in at Surgery Registration on the ground floor of the Maleng Building (level G).
- Give staff at Registration a copy of your advance directive(s) if you have them.
- A nurse will call you to come to the pre-op area.
- If you have diabetes, we will check your blood sugar.
- An *intravenous* (IV) tube will be placed in your arm to give you fluids and antibiotics.
- Your nose will be swabbed with antiseptic. This will help reduce your risk of infection after surgery.
- An anesthesiologist may place an *epidural* line in your back to give you pain medicine.
- You will be given a heating blanket to keep you warm, improve healing, and lower the risk of infection. Keep the blanket on even if you feel warm enough.
- The Anesthesiology Team will take you to the operating room for your surgery.



After Surgery

- You will be moved to a bed in the recovery area, and then moved to a bed in a hospital unit.

You will have:

- An IV in your arm to give you fluids and antibiotics
- Wraps on your lower legs that inflate to help prevent blood clots
- An *epidural* catheter in your back to give you pain medicine, if you had one placed before surgery
- A tube in your bladder to drain urine

If you have an ostomy, you will have:

- A bandage over your wound
- A wafer and an ostomy bag to collect the output

Your nurse will help you:

- Learn breathing exercises to prevent pneumonia
- Use your *incentive spirometer* (breathing device) and remind you to use it 10 times each hour every day while you are in the hospital
- Start a clear liquid diet, if you can handle drinking
- Sit up in chair
- Get out of bed within 2 hours, if you can handle walking
- Walk in the hallway by 10 p.m.



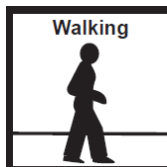
Day After Surgery (Day 1)

Medicines and Treatments

- Your nurse will remove your urine catheter early in the morning.
- Whenever you are in bed during your hospital stay, you will wear leg wraps to help prevent blood clots.

Diet and Activity

- It is important for your recovery that you walk in the hall 2 to 3 times every day.
- If you have an epidural, do **not** get out of bed without help from a member of your care team
- You will advance your diet as soon as you can handle solid foods. To order food, call 4.5678 from your bedside phone.



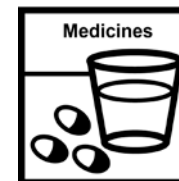
Continuity of Care

- You will talk with a member of your care team about your discharge plan.

Day 2

Medicines and Treatments

- Your pain will be managed with medicine and non-medicine methods.
- Your care team will:
 - Remove your epidural and give you pain medicine by mouth
 - Remove your bandages in the morning so that your wound is open to the air



Activity

- You will walk the hall as often as possible to help you heal faster.

Continuity of Care

- You will talk with a member of your care team about your discharge plan:
 - If your discharge plan is to go home, confirm your ride home will be ready by noon on your discharge day and that you will have help at home.
 - If you have concerns about where you will go after discharge, tell your care team so that you can talk with a social worker.



Day 3 Until Discharge

- You will be ready for discharge when:
 - You are able to eat and are passing gas
 - Your pain is well controlled when you are active
 - You are able to walk in hallway
 - Your wound is dry and has no sign of infection
 - You no longer need your IV

Activity

- You will walk the hall as often as possible to help you heal faster.

Continuity of Care

- You will talk with a member of your care team about your discharge plan:
 - If your discharge plan is to go home, confirm your ride home will be ready by noon on your discharge day and that you will have help at home. If your driver cannot come by noon, they may meet you in the discharge lounge.
 - If you have concerns about where you will go after discharge, tell your care team so that you can talk with a social worker.



Discharge Day

Medicines and Treatments

- If you are going home, your doctor will write a prescription for new medicines. This includes pain medicines. You may fill your prescription at Harborview or at the pharmacy of your choice.
- If you are going to a skilled nursing facility, they will provide all of your medicines.



Continuity of Care

- Before you are discharged, we will talk with you about your follow-up clinic visits.
- Your PCP will receive medical records from your hospital stay.
- Your nurse will talk with you about your discharge instructions.
- Congratulations on your progress with recovery!



At Home After Discharge

- If you go home after discharge:
 - A unit nurse will call you 2 days after discharge to see how you are doing.
 - If you still need opioid pain medicine more than 2 weeks after surgery, talk with your PCP about your pain control options.
 - Talk with your PCP about any other health issues or concerns
 - In ___ weeks, you will return to the General Surgery Clinic for follow-up care.



Questions or Concerns?

Before surgery:

- Until 3 p.m. the day before surgery, call the Patient Care Coordinator at 206.744.3195.
- After 3 p.m. on the day before surgery, call the Ambulatory Surgery Unit at 206.744.5432.

After discharge:

- Weekdays from 8 a.m. to 4 p.m., call 206.744.3241.
- Evenings, weekends, and holidays, call the Discharge Nurse at 206.744.3276