



术前准备计划

- 术前计划:
- 安排好出院交通工具。确定你进出车辆方便。
- 出院后的头 2-3 天，你需要有人照顾并为你准备食物。安排在这段时间里有家人或朋友全天 24 小时的陪同。
- 安排好在你不在时有人照顾你的宠物。
- 告诉你的家庭医生你即将要做的手术。如果你没有家庭医生，告诉你的门诊护士。
- 如果你担心出院后的去处，告诉你的治疗团队。他们会帮忙安排你和社工见面。
- 手术前你要去预麻门诊安排你手术药物。

手术前 5 天:

- 如果你没有糖尿病：开始喝 Ensure Surgery，一天三次，连喝五天。每天勾选 3 个框。
- 如果你有糖尿病：喝半盒 Ensure Surgery，一天 6 次，连喝五天。每天勾选 6 个框。

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如果需要造瘘:

- 你需要见我们的造瘘护士了解相关事宜。
- 护士会在你的身上标出造口位置并用透明胶贴着。不要摘除胶纸。 \*-

手术前一天

- 按照指示服用 GoLYTELY。
- 按照指示服用 Neomycin, and Metronidazole。
- 准备住院物品。让家人或朋友在你入院后把你的物品带来医院

你携带的物品 (如果需要):

- C-PAP 机
- 现在服用的药物
- 轮椅，步行车，拐杖
- 助听器，眼镜，假牙
- 医疗生前预嘱，如果有

你的家人可携带的物品:

- 处方药物的费用 (现金，信用卡或借据卡)
- 电子产品和充电器

不要携带:

- 药物，除非医生指示
- 首饰或贵重物品

手术前一晚

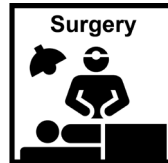
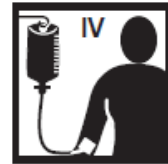
- 用我们给你的抗菌肥皂或纸巾淋浴或擦澡。
- 午夜前: 如果你没有糖尿病，喝一盒 Ensure Clear。
- 抵达医院前 8 个小时: 不要吃肉或高油脂食物。
- 抵达医院前 6 个小时: 不要吃任何东西。你可以在抵达医院前 2 个小时前喝透明液体。



## 手术当天

### 离家前:

- 用我们给你的抗菌肥皂或纸巾再一次淋浴或擦澡。
- 按照指示服用日常药物。
- 如果你没有糖尿病，在\_\_\_\_\_喝 1 盒 Ensure Clear。
- 抵达医院前 2 个小时:** 不要吃/喝任何东西。



### 在医院

- 到 Maleng Building 底层 (G 层) 手术登记处登记。
- 如果有，请把你的生前医疗预嘱交一份给登记处工作人员。
- 护士会带你去手术预备区。
- 如果你有糖尿病，我们会给你测量你的血糖。
- 我们会给你插静脉管，通过静脉管给你输液或打抗生素。
- 我们会用消毒棉签擦拭你的鼻孔来降低手术后感染。
- 麻醉师可能会通过在你的背部插硬膜外管来给你止痛药。
- 我们会拿一个热毯子给你保暖，提供复原，和降低感染风险。(就算觉得够暖了还是要盖着)
- 麻醉团队会带你到手术室做手术。

### 手术后

- 你会被转移到康复区的病床上，然后转到住院部。
- 你会有:**
- 一根插在你的手臂上给你输液和抗生素的静脉管。
  - 预防血栓的裹脚带裹在你的脚上。
  - 一根在手术前就需插在你的背部提供止痛药的硬膜管。
  - 一根插在你膀胱里的尿管。



### 如果需要造瘘

- 在你的伤口上会有一个绷带
- 一个收集你的排泄物的造瘘保护膜与造瘘袋。

### 你的护士会帮助你

- 学习呼吸运动来预防肺炎。
- 提醒你在住院期间每小时使用 10 次诱导性肺量器。
- 如果可以饮食，开始进食透明性液体
- 坐在椅子上
- 如果可以行走，在 2 小时内下床
- 在晚上 10 点前在走廊走动

## 手术后第一天

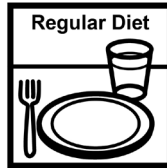
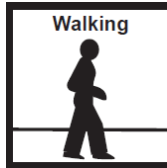
### 药物和治疗

- 你的护士会在早上帮你拔掉尿管。

在住院期间，你躺在床上的任何时候脚上都必须戴着预防血栓的裹脚带。

### 饮食和运动

- 每天 2-3 次的在走廊走路对你的复原很重要。
- 如果你有硬膜管，不要在没有护理人员的陪同下自行下床。
- 只要你能吃固体食物的时候就可以加强饮食。订餐请用床边电话拨打 45678。



### 后续护理

- 你会跟你的护理团队人员讨论你的出院计划。

## 手术后第二天

### 药物和治疗

- 我们会用药物与非药物方法来管理你的疼痛。
- 你的护理团队会：
  - 拔掉你的硬膜管和给你口服止痛药。
- 在早上帮你撕掉伤口上的绷带让伤口透气。

### 运动

- 你需要尽可能的多在走廊走动来加快你的康复。

### 后续护理

- 你会跟你的护理团队人员讨论你的出院计划：
  - 如果你的出院计划是回家，确人在你出院当天中午会有车来接你和家里有人可以照顾你。
  - 如果你担心出院后的去处，告诉你的护理团队帮你安排和社工见面。



## 第三天到出院前

### ❑ 出院前提必须:

- 可以进食和排气。
- 在活动的情况下你的疼痛被很好的控制住。
- 你可以在走廊里行走。
- 你的伤口已经干了而且没有感染迹象。
- 你不再需要输液。

### 运动

- ❑ 你需要尽可能的多在走廊走动来加快你的康复。

### 后续护理

#### ❑ 你会跟你的护理团队人员讨论你的出院计划:

- 如果你的出院计划是回家，确人在你出院当天中午会有车来接你和家里有人可以照顾你。
- 如果你担心出院后的去处，告诉你的护理团队帮你安排和社工见面。



## 出院当天

### 药物和治疗

- ❑ 如果你回家，你的医生会给你开新药方，包括止痛药。你可以在 Harborview（海景医院）或你自己选择的药房拿药。
- ❑ 如果你去康复院，他们会提供你出院后的药物。

### 后续护理

- ❑ 在你出院前，我们会和你讨论你的复诊预约
- ❑ 你的家庭医生会收到你住院期间的医疗档案。
- ❑ 你的护士会跟你复习你的出院指示。
- ❑ 祝早日康复!



## 出院后在家

- 如果你出院回家:
- 出院 2 天后，住院部护士会打电话问候你询问你目前情况。
- 手术后 2 周你如果还需服用鸦片类止痛药，跟你的家庭医生讨论一下疼痛控制的选项。
- 跟家庭医生反映任何健康问题或顾虑。
- 你需要在\_\_\_\_\_周后回普通手术门诊部复诊。



## 疑虑

### 手术前

- ❑ 手术前一天下午 3 点前，联系患者护理协调员 206.744.3195
- ❑ 手术前一天下午 3 点后，联系外科门诊外科 206.744.5432.

### 出院后:

- ❑ 工作日上午 8 点到 4 点，联系 206.744.3241
- ❑ 晚上，周末和假日，联系出院后护理热线 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.

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### 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

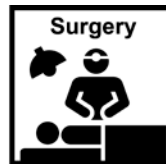
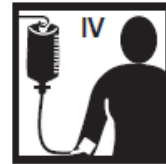
### Before You Leave Home

- 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

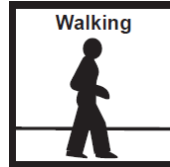
- Your nurse will remove your urine catheter early in the morning.
- Whenever you are in bed during your hospital stay, you will wear leg wraps to help prevent blood clots.

### 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.



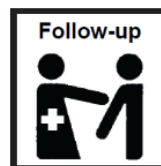
### Continuity of Care

- 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