

About Your Surgery Experience

Getting ready for your surgery at UW (UWMC) - Montlake

This handout and your visit with your surgeon and Pre-Anesthesia Clinic staff will help you get ready for surgery. It is important that you understand what will happen and why. We are committed to working with you for a safe surgery experience.

**You can also read instructions and watch a pre-surgery video on the UW Medicine website:
www.uwmedicine.org/patient-care/how-to-prepare/uwmc**

Name: _____

Date of Surgery: _____

Surgeon: _____

Clinic Nurse: _____

Phone: _____



UW Medical Center - Montlake campus in Seattle, Washington



*Scan for a
digital copy of
this handout.*

Where to Check in for Your Surgery

Weekday Surgeries

- **2nd Floor Surgery Pavilion Admitting**
Surgery Pavilion, UWMC - Montlake campus
1959 N.E. Pacific St., Seattle, WA 98195
- **2nd Floor Pacific Admitting**
UWMC - Montlake campus
1959 N.E. Pacific St., Seattle, WA 98195
- **Roosevelt Ambulatory Surgery Center Admitting**
UWMC - Roosevelt, 1st floor
4245 Roosevelt Way N.E., Seattle, WA 98105

Saturday Surgeries

- **3rd Floor Lobby Admitting**
UWMC - Montlake campus
1959 N.E. Pacific St., Seattle, WA 98195

Arrival Time

Pre-Anesthesia Clinic staff will call you 3 business days before your surgery, between 9 a.m. and 3 p.m. They will tell you which admitting location to use, what time to arrive, and what to bring with you.

If you have not received this call from the Pre-Anesthesia Clinic by 3 p.m. the day of 3 days before your surgery, call **206.598.6334**.

Interpreters

UWMC has interpreters to help you, if needed, before and after surgery. Please tell the patient care coordinator or Pre-Anesthesia Clinic nurse if you want an interpreter. Or call Interpreter Services at 206.598.4425 and ask for an interpreter.

Your Pre-Surgery Checklist

Use this checklist to make sure you are ready for your surgery. Find details for each item on the page listed.

- If you will be going home the same day as your surgery, you must have a responsible adult (*escort*) drive you home. You cannot drive yourself home or take a taxi or a bus by yourself. If you have not made plans for an escort or other approved transportation such as Cabulance, we may need to cancel your surgery. **See page 7.**
- We strongly advise that you have a responsible adult stay with you the first 24 hours after you leave the hospital. **See page 10.**

- Follow your pre-surgery fasting guidelines. **See page 5.**
- Follow your pre-surgery shower and shaving instructions. **See page 6.**
- Do **not** use makeup, deodorant, lotions, hair products, or fragrances on the day of surgery. **See page 6.**
- Remove all jewelry and body piercings. **See page 7.**
- Bring your medical insurance card and a photo ID with you. **See page 7.**
- Bring your pharmacy insurance card, Labor and Industry (L&I) claim number and card, and your Medicare or Medicaid information, if you have them. **See page 7.**
- Bring a list of all the medicines you take, and the doses of each one. This includes vitamins, supplements, and anything else you use without a prescription. **See page 7.**
- Bring a method of payment for any co-pays for medicines needed after surgery. **See page 7.**
 - Pavilion Surgery Center accepts check or credit card.
 - Roosevelt Ambulatory Surgery Center accepts only Visa or Mastercard.
- Bring a copy of your healthcare directive and/or durable power of attorney for healthcare so they can be placed in your medical record. **See page 7.**
- If you use a CPAP machine at night to help you breathe, bring it with you. **See page 7.**
- Do not bring unattended children with you. If children age 17 and under come to the hospital, they must be supervised by a responsible adult at all times, both in the waiting room and in other areas of the hospital.
- Adjust your medicines: Please contact your Surgeon’s Nurse to go over your medication instructions. **Stop** taking these medicines ____ days before your surgery:

Do **NOT** take these medicines on the day of your surgery:

Take these medicines on the day of your surgery with no more than 2 ounces (4 tablespoons) of water:

Meeting with Your Surgeon

Before your visit to the Pre-Anesthesia Clinic, you will meet with your surgeon in a UWMC specialty clinic. At this meeting, your surgeon and other care providers will:

- Review your medical history and home medicines
- Do a physical exam
- Talk with you about the surgery
- Have you sign a consent form

Ask your surgeon how your activity might be limited after surgery and how long these limits will last. Think carefully about what help you will need and arrange for this help before your surgery. Work out things like how you will get to the bathroom, go up and down stairs, prepare your meals, and care for yourself.

Pre-Anesthesia Clinic Visit

The Pre-Anesthesia Clinic will review your medical records before your surgery. We may contact you for more information if you are scheduled for an appointment in Pre-Anesthesia Clinic. If you have an appointment, please bring the following:

- A list of all the medicines you take and the doses of each one.
- **The results of tests you have had at any other hospital or clinic**, especially heart or lung tests such as an electrocardiogram (EKG), stress test, echocardiogram, or pulmonary function tests. We will include copies of these records in your surgical packet.

If you need help getting test results from your doctor or clinic, please ask us and we can help you.

Providers who are experts in anesthesia will review your health survey, medical history, home medicine list, and test results. This information will help them know what kind of anesthesia will work best for you.

You may also need to have blood tests, an EKG, or other tests, depending on your type of surgery. You will not meet your anesthesia team at this visit. You will meet them the day of your surgery.

Medicines Before Surgery

Be sure to tell your surgeon and Pre-Anesthesia Clinic staff what medicines you are taking. You may need to stop taking some of them for a day or more before your surgery. Some medicines you may need to stop taking are:

- Oral diabetes medicines and insulin
- Warfarin (Coumadin)
- Clopidogrel (Plavix)
- Aspirin and other medicines that affect blood clotting, such as ibuprofen (Advil, Motrin, and others) and naproxen (Aleve, Naprosyn, and others)
- Certain diet medicines
- Herbal remedies and supplements

A provider will tell you which of your medicines you can take the morning of surgery (*see page 3*).

Anesthesia

A team of anesthesia providers will be with you during your surgery to keep you comfortable. They will also manage your breathing, heart rate, blood pressure, and any medical issues that might arise.

At your Pre-Anesthesia visit, your providers may talk with you about having 1 or more of these types of anesthesia:

- **General anesthesia:** You are unconscious (asleep) and have no awareness of the surgery.
- **Regional anesthesia:** A numbing medicine is injected into a cluster of nerves, so you do not have feeling in a large area of your body. You may also be given medicine to relax you or help you sleep.
- **Monitored anesthesia care (MAC):** MAC drugs are given through a vein in your arm (*intravenously*). You may receive *sedation* (medicine to make you relax), but you may be awake during your procedure. You may also be given a *local anesthetic*, which numbs the area where the procedure will be done. With MAC, you may be drowsy, very sleepy, or fall into a deep sleep.

During your Pre-Anesthesia visit, please tell your provider if you want to talk with an anesthesiologist about any special concerns.

Before Your Surgery

Unless your doctor gave you instructions for a bowel cleanse, on the day and evening before your surgery, eat normally and take your medicines as usual.

Starting at midnight before your surgery day, follow our *fasting guidelines*.

Fasting Guidelines

You MUST follow our fasting guidelines before your surgery. For your safety, if you do not follow our fasting guidelines, we may need to reschedule your surgery for another day. These guidelines are important. They lower your risk of vomiting and inhaling stomach contents into your lungs during surgery.

Some patients may be able to drink liquids after midnight the night before their surgery. This depends on the type of surgery you are having. Your provider will explain the guidelines that you need to follow.

Follow these guidelines about not eating or drinking before surgery:

For ALL patients:

- Do **NOT** eat after midnight.
- Do **NOT** drink alcohol after midnight.

If you were told **NOT** to drink clear liquids after midnight:

- Take your medicines in the morning as instructed by your provider. Take them with no more than 2 ounces (4 tablespoons) of water.

If you are on a Clinical Care Pathway for your surgery:

- Follow your surgeon's instructions on when to drink your apple juice. Most patients drink 8 ounces before midnight, and 8 ounces when they get to the parking garage at UWMC.

If you were told you MAY drink clear liquids after midnight:

- You may drink liquids such as water; apple, cranberry, or other clear juices without pulp; Gatorade; and clear tea.
- Do **not** drink orange juice, coffee or tea with cream or milk, or other liquids that are not clear.
- Starting 2 hours before you arrive for your surgery, do not drink anything. If you need to take medicines during those 2 hours, take them with no more than 2 ounces (4 tablespoons) of water.

Shower with CHG Soap

Shower or bathe both the night before and the morning of surgery. Wash with a special soap called *Chlorhexidine gluconate* (CHG).

You can buy CHG at most large drugstores. You may use either a 2% or a 4% solution. A common brand is *Hibiclens*, but you may use any brand.

For your showers the night before and the morning of your surgery:

1. If you want to wash your face and hair, do it first using your regular soap and shampoo. Do **NOT** use CHG on your face or hair.
2. After you wash your face and hair, step away from the shower or turn the water off.
3. Use a wet washcloth to apply lots of CHG soap from your neck to your toes. Add more soap as needed to get your whole body clean, especially the part of your body where you will have surgery.
4. Let the CHG soap stay on your skin for 1 full minute. After 1 minute, turn the shower on again and rinse well.
5. Pat your skin dry with a clean towel. Put on **clean** clothes.
6. After your morning shower or bath, do **NOT** put on makeup, deodorant, lotions, hair products, fragrances, or jewelry.

Shaving

- To lower the risk of infection, do **not** shave any part of your body that you do not already shave every day.
- If you normally shave near your surgical site, do **NOT** shave that area for 2 days (48 hours) before the morning of your surgery.

Parking and Directions

Parking at the hospital is validated for a reduced rate. See pages 12 and 13 for maps and directions to parking areas. For more information on:

- **UW Campus parking and fees**, call 206.685.1543
- **Hospital parking**, call 206.598.5275
- **Driving directions**, visit www.washington.edu/admin/commuterservices/get_to_uw/visitors/index.php

Your Ride Home

If you are leaving the hospital the same day that you have surgery, **you cannot drive a car or ride a bus or taxi by yourself.**

- A responsible adult (*escort*) must take you home or to your recovery facility. This person must also help you settle in and make sure you are safe and comfortable.
- If your escort is not present when you check in, we will ask for their name and phone number. **If you do not have an escort, your surgery may be cancelled.** Please notify your Surgeon's office, if there will be problems regarding your transportation.
- Your escort must be at the hospital within 30 minutes of your discharge.

Coming to the Hospital for Surgery

- Do **not** use any makeup, deodorant, lotion, hair products, or scents.
- Wear loose clothing that will be easy to take off and comfortable to wear home.
- Please do not bring valuables with you.
- Remove all jewelry and body piercings.

What to Bring with You

- A list of all your medicines and the doses of each one. Do not bring the actual medicines unless you were told to do so.
- A photo ID, your health and pharmacy insurance cards, and method of payment (co-pay) for any discharge medicines you may need.
- A copy of your healthcare directive and/or durable power of attorney for healthcare, so they can be placed in your medical record.
- Your L&I claim number, if you have one.
- Your CPAP machine if you have sleep apnea and use the machine at night to help you breathe.
- A book to read or project to do while waiting for your surgery to start.

Checking In

On the day of your surgery, come to the location that is checked on page 2 of this booklet.

Most times, we ask you to come in 2 to 3 hours before your surgery. This gives us time to prepare you for your surgery. During this time:

- You will sign admission forms.
- We will check for any changes in your health.
- We will tell you about any changes that might affect your surgery start time.

You may receive information about a urine pregnancy test before surgery. Tell your nurse or an anesthesia staff person if you want to be tested.

Getting Ready for Surgery

Many patients will be in the surgery “prep” area getting ready for their surgery. In a private space, we will ask you to remove your clothes, including underwear. You will put on a hospital gown.

You will need to remove glasses, contact lenses, and hearing aids. You may be asked to remove dentures if you wear them. Please bring cases to store these items, if you have them.

You will meet the nurses, the surgical team, and the anesthesia team who will care for you during your surgery. You will be able to ask them any questions you have about your care.

To reduce your risk of infection, you will be covered with a heating blanket to keep your body warm while you wait to go into the operating room. Ask for a heating blanket if you do not receive one.

Your Support Person

- We cannot provide childcare. If you must bring a child aged 17 or under to the hospital, please bring an adult to be with them at all times in the waiting room and other areas of the hospital.
- Service Animals are welcomed in the hospital and must be accompanied by a caregiver other than the patient during the hospital stay. As a procedural area, we maintain sterile environment in our Surgical Services Department. Service Animals are welcome in waiting areas but not in our department to limit any source of infection to our patients. Exceptions may be made case by case basis with leadership.
 - Service animals are not allowed in the PREOP, OR, RECOVERY, or PACU areas.

Surgical Site Marking

We are committed to making sure you receive high-quality and safe care. While you are here, you or your family will be asked such questions as:

- What is your name?
- What is your date of birth?
- What surgery are you having done?

Please do not be alarmed by these questions. We know who you are. We ask some or all of these questions over and over again for your own safety.

Your doctor will check your medical record and talk with you or a family member to confirm your surgery or procedure site. Most times when you have surgery or a procedure, your doctor will mark the site in pen to help ensure your safety.

If your surgical site needs to be marked, your surgeon will mark the site with their initials. Special care is taken if you are having surgery or a procedure on the right or left side of your body. **Please do not mark yourself or write anything on your body.**

If your site does not need to be marked, we will ask you to confirm what surgery or procedure you are having.



A surgeon writing their initials on a patient's surgery

Starting Your IV

Before your surgery begins, we will start an *intravenous* line (IV). An IV is a small needle and thin tube that are used to give you medicine and fluids during surgery. You might also be given medicine through your IV to help you relax before you go into surgery.

We will first apply numbing medicine to your skin where the IV will be placed. Most times, this is on your hand or arm.

After Surgery

Recovery Room

You will be taken to the recovery room after your surgery. The recovery room is also called the Post-Anesthesia Care Unit (PACU).

Right after your surgery, our priority is to give you the care you need. We want to make sure you are safe as you wake up from anesthesia, and that you receive treatment for pain as needed.

Most patients are in the recovery room for 1 to 2 hours after their surgery.

Monitoring

As you recover from surgery, a nurse will check your breathing, heart rate, and blood pressure often. Your nurse will help you with any nausea or pain you may feel. It is important for you to be comfortable.

Pain Control

Be sure to ask your nurse for pain medicine before your pain gets too bad. Your nurse will ask you to rate your pain on a scale from 0 to 10, where 0 is no pain and 10 is the worst pain. You may receive pain relief by:

- Mouth (pills, capsules, or liquid)
- Medicine put into your IV tube

If you are staying overnight in the hospital, you may also receive:

- Pain medicine given through a small tube in your back (epidural)
- Patient-controlled analgesia (PCA)

About Patient-controlled Analgesia

A PCA machine puts a dose of pain medicine into your IV tube when **you** push a button. With PCA, you do not have to wait for a nurse. You are in control of your pain relief.

Your doctors will prescribe the best dose of medicine for you. You will not become addicted to these medicines if you use the PCA as instructed.

WARNING: For your safety, **only you** should push the button on your PCA. Do **NOT** let your visitors push the PCA button.



With PCA, you control the amount of pain medicine you receive.

Discharge on the Same Day as Your Surgery

If you are discharged from the hospital on the same day as your surgery, and you had sedation or anesthesia:

- You **must** have a responsible adult escort you home or to the place where you will stay while you recover from surgery.
- You **cannot** drive yourself.
- You **cannot** take a taxi or bus by yourself.

If you have not arranged for an adult or approved transportation (such as Cabulance) to escort you when you are discharged from the hospital, we may cancel your procedure. Your escort must help you get into your home or place of recovery and help you settle in.

The First 24 Hours

- We strongly advise that a responsible adult stay with you for 24 hours after discharge. This adult should be able to help take care of you at home or in your place of recovery. This is for your safety, in case you have any problems and need extra care after your surgery. **If you choose not to follow this advice, UWMC is not responsible for your safety.**
- You can expect to have some pain and maybe some nausea after surgery. You may also be sleepy for the rest of the day.
- For 24 hours after having anesthesia, **DO NOT:**
 - Drive
 - Drink alcohol
 - Travel alone
 - Use machinery
 - Sign any legal papers
 - Be responsible for children, pets, or an adult who needs care
- Before you leave the hospital, we will give you:
 - Information about how to care for yourself at home.
 - A number to call to set up your follow-up visit, if this is not scheduled already.

If You Stay Overnight in the Hospital After Surgery

- You may need to wear a hospital gown.
- We will do everything we can to protect your modesty while keeping you safe. Your safety is our first priority.
- You may have *sequential compression devices* (SCDs) on your lower legs while you are in bed. These wraps help prevent blood clots.



SCDs inflate from time to time to help blood circulate in your legs.

- To keep you from falling, we may use:
 - An alarm that tells us when you are getting out of bed
 - Mats on the floor near your bed
 - A belt around your waist when you get out of bed and when you walk.
 - A staff member to stay nearby when you use the toilet or commode.
- Your ability to do things by yourself may change day to day. This means that we may also need to change the things we do to keep you safe.
- You may be connected to tubes and machines.
- Staff will check how you are feeling many times a day.
- We will ask you to take part in tests.

Risk of Falling

While you are in the hospital, your risk of falling is higher. This is because:

- You are in a new place.
- You may be weak and tired from changes in your health or illness.
- You may feel dizzy, lightheaded, or confused after surgery or because of your illness.
- Some medicines can affect your ability to think clearly.
- Some medicines can cause an urgent need to urinate (pee).
- Your bathroom habits are different in the hospital than they are at home.
- Some medicines can affect your muscle strength.
- You may have swollen legs.
- You may move more slowly or shuffle your feet after surgery.
- You may not sleep well away from home.
- Tubes and machines can get in the way of moving easily.

Please ask your nurse if you have any questions or concerns about how we help keep you from falling while you are staying in the hospital.

Helpful Phone Numbers

You may find these phone numbers helpful. If you are using a phone inside the hospital, press only the last 5 digits of numbers that start with 598. (For example, to reach Admitting from a hospital phone, press 8.4310.)

- **Admitting**.....206.598.4310
- **Financial counseling**.....206.598.4320
- **Doctor fees (UW Physicians)**206.543.8606
- **UWMC billing**.....206.598.1950
- **Emergency Medicine Service (Emergency Room or ER)**206.598.4000

- Health Information Resource Center.....206.598.7960
- Interpreter Services.....206.598.4425
- TTY (teletypewriter).....800.833.6384
- Lost and Found.....206.598.4909
- Operating Room.....206.598.4270
- Patient Relations.....206.598.8382
- Pre-Anesthesia Clinic.....206.598.5053
- Roosevelt Ambulatory Surgery Center.....206.598.0900
- Social Work and Care Coordination - Housing Services.....206.598.4170

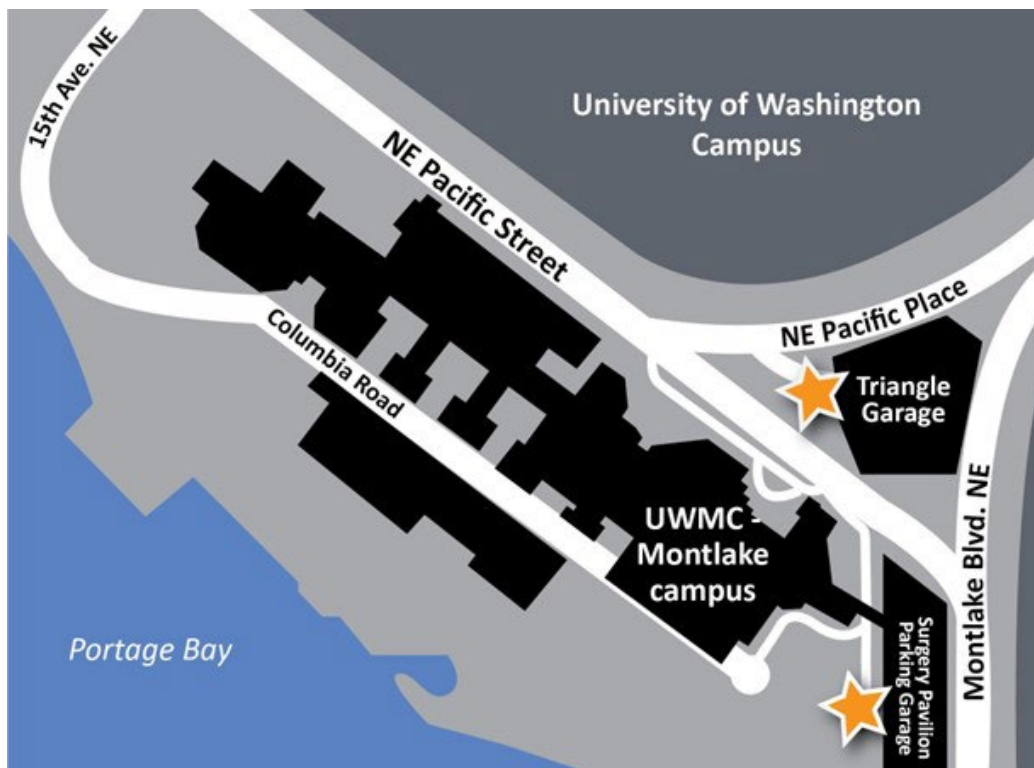
Your surgical clinic will also give you numbers to call if you have questions or concerns after surgery.

Locations and Parking

UWMC – Montlake: UWMC - Montlake is at the south end of the UW campus. The address is 1959 N.E. Pacific St., Seattle. You may park in one of these garages:

- **Triangle Parking Garage** (across N.E. Pacific St. from the hospital)
- **Surgery Pavilion Parking Garage** (at the east end of the hospital)

UWMC - Roosevelt: UWMC - Roosevelt is about 1 mile northwest of UWMC - Montlake, at 4245 Roosevelt Way N.E., Seattle. The parking garage is under the building.



Stars show the entrances to the Triangle Garage and the Surgery Pavilion Parking Garage.

Driving Directions

UWMC - Montlake Campus, 1959 N.E. Pacific St., Seattle, WA 98195

- From Interstate 5:
 - Take Exit 168B (Bellevue, State Route 520) heading east.
 - Take the Montlake Blvd. exit.
 - Follow the signs to University of Washington Medical Center.
- From Interstate 405:
 - Take Exit 14 (to Seattle via State Route 520) heading west.
 - Take the Montlake Blvd. exit.
 - Follow the signs to University of Washington Medical Center.



UWMC - Montlake campus is east of Interstate 5 and north of State Route 520.

UWMC - Roosevelt, 4245 Roosevelt Way N.E., Seattle, WA 98105

- From Interstate 5:
 - Take the N.E. 45th St. exit (Exit 169) and go east on N.E. 45th St.
 - Turn right heading south on Roosevelt Way N.E. Go 2½ blocks.
 - UWMC - Roosevelt is on the right.

Questions?

We want to partner with you to give you our best care. Patients who are involved in their care have better results and fewer problems.

Your questions are important. Ask your caregiver any questions you may have about the care you receive. If you have a concern, tell a staff member or call UWMC's Patient Relations at 206.598.8382.

