UW Medicine

MEDICAL CENTER

Middle Fossa and Translabyrinthine CareMap

Before, during, and after your hospital stay

	Activities Before Surgery		
1 to 4 Months Before Surgery	1 to 2 Weeks Before Surgery	24 Hours Before Surgery	
First Clinic Visit:	Pre-Op Clinic Visit:	Diet:	
 Have your consult visit and make the decision to proceed with surgery. Tell your provider about all medicines you are currently taking. 	 Your provider will discuss this CareMap with you so you know what to expect before, during, and after the procedure. Your provider will talk with you about your hospital stay and discharge plan. 	 Do not eat any solid food after midnight. You may drink clear liquids up to 2 hours before surgery. 	
Diet:	You will sign consent forms for the procedure.	Medicines:	
Your provider will talk to you about healthy diet and active lifestyle.	Tell your provider about all medicines you are currently taking.	Closely follow all instructions your provider gave you about what Medicines	
Labs and Tests:	Schedule follow-up clinic visits after surgery.	medicines to take on the day of surgery. Your surgery may be	
 Take an audiogram to test your ability to hear sounds, if your provider ordered one. You will have an X-ray exam, if your provider ordered one. 	 Labs and Tests: Take an audiogram, if you have not already. Take your pre-surgery lab tests. Your provider may have you take an MRI or CT scan. 	 canceled if you take medicines we asked you not to take. When you come to the hospital, bring a list of all medicines you are currently taking so your provider can review them. Preparations: After showering do not use deodorant, scents, perfume, make-up, or leave-in hair products. Wash your hair the night before. Bring your own CPAP/BiPAP to the hospital, if you will need one. 	
 Medicines: Your provider will talk with you about medicines including anticoagulants (medicines that prevent blood clots). Activity: Aim to walk 1 to 2 miles per day 	 Medicines: Stop taking all supplements (such as fish oil, vitamins, and others). Follow your provider's directions for stopping all anti-inflammatory or anti-coagulant medicines. Activity: Aim to walk 1 to 2 miles per day before surgery day. 		
before surgery day.			

Surgery Day (Day 0)			
Before Surgery (Pre-Op)	On the Hospital Unit		
Check in at Surgery Registration at your assigned time. You can check in on the 2nd floor of the Surgery Pavillion.	 You will wake up in your hospital room. You will have a <i>Foley catheter</i> (tube) in your bladder to remove urine, if needed. We will give you medicines through your IV to help with digestion and nausea. 		
\Box A nurse will call you to come to the pre-op area.	□ We will give you clear liquids to sip, and ice chips to chew.		
 We will place an intravenous (IV) tube in your arm. This will be used to give you fluids and antibiotics. The IV will also be used for sedation when you are in the operating room. 	 Monitoring and Tests: Nurses will assess you when you arrive and throughout your stay to: Check on you often to make sure you are safe and comfortable Check your surgical site, breathing, blood pressure, and heart rate 		
Your surgeon will mark the surgical site on your body.	You may need to take a CT head scan, if your provider ordered one.		
 We will give you a heating blanket to keep you warm and help prevent infection. The anesthesiology team will talk with you and 	 Pain Management: First, we will give you pain medicine through your IV. When your digestion is working again, we will give you pain pills. 		
take you to the operating room (OR).	As your body recovers from surgery, you will slowly return to a normal diet.		
We will place compression devices on your legs to help with blood flow. These fill with air and squeeze your legs to help prevent blood clots.	 Do not get out of bed without help from hospital staff. Your nurse will tell you when it is okay for you to stand up on your own. Activity: 		
Monitoring and Pain Management:	□ Sit up on the edge of your bed, as soon as you are able. Wait for your nurse Sit on Bed		
Your nurse will check your blood glucose levels and vital signs.	to help you sit up. A physical therapist (PT) will assess you.		
You will be given acetaminophen (Tylenol) for pain.	□ You will be given deep breathing exercises to do one time each hour.		

Days 1 - 3 (Until Discharge)	Self care at Home After Discharge	Questions or Concerns?
Monitoring & Pain Management: You will begin to take pain pills	1 Week After Surgery: Walking Have your post-procedure clinic visit. Have your post-procedure clinic visit.	Your questions are important. Call your care team if you have
instead of IV medicine, when you are able.Your doctor will prescribe pain	 Walk multiple times per day. Start to slowly <i>taper</i> (decrease) your pain medicine. Take it only as needed. Ask your nurse how to do this. 	questions or concerns.
medicines based on your needs.Nurses will continue to monitor your vital signs.	 We will give you instructions for showering. 1 Month After Surgery: 	 UWMC-Montlake Neurological Surgery Clinic: (206) 598-5637 UWMC-Montlake Otolaryngology-
 You may have an <i>audiogram</i> test to test your hearing. If you have a false eath star it 	 Do not lift anything that weighs more than 15 pounds (this is about 2 gallons of water) Do not strain, push, or pull heavy objects. 	Head and Neck Surgery Center: (206) 598-4022
If you have a Foley catheter, it will be removed when you are able to use the toilet on your own again.	 Do not strain, push, or pull heavy objects. Do not do any strenuous activity. Ask for help with household chores, such as vacuuming, lifting, and gardening. After 1 week you may shower at any time: 	For urgent needs after hours: Call ENT resident on call at (206) 598-6190
Diet:Return to a solid food diet, when you are able.	 For Translabyrinthine patients with abdominal fat graft, do not submerge your abdominal incision in water for one week after surgery. If you have a dressing on your head, do not get the dressing wet. 	
Activity:	Continue or start PT (physical therapy), as instructed.	
 Aim to sit up in a chair at least 4 times a day Your nurse will help you take short walks, when you are able. 	 Continue walking multiple times a day Medicines: Take stool softeners, as needed. Take acetaminophen (Tylenol) and ibuprofen (Motrin) as needed for 	
Goals for discharge:	breakthrough pain	
Return of bowel function.Walking around safely.	 Follow-up Visits: Your first follow-up visit will be in 1-2 weeks to remove your sutures (stitches). 	
Diabetic and pharmacy education completed, if indicated.	Your second follow-up clinic visit will be in 1 month for your audiogram.	