

## About Your Surgery Experience

*Getting ready for your surgery at University of Washington Medical Center (UWMC)*

*This booklet 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 written instructions and watch a pre-surgery video on the UW Medicine website:**  
**[www.uwmedicine.org/patient-care/how-to-prepare/uwmc](http://www.uwmedicine.org/patient-care/how-to-prepare/uwmc)**



*University of Washington Medical Center*

### 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 concerns, tell a staff member or call UWMC's Patient Relations at 206.598.8382.

Other UWMC staff are also available to help.





*University of Washington Medical Center is just east of Interstate 5 and north of State Route 520.*

## 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 would like an interpreter. Or, call Interpreter Services at 206.598.4425 to ask for an interpreter.

## Your Pre-Surgery Checklist

Please follow the instructions on each of these topics as you prepare for surgery:

- Follow your pre-surgery fasting guidelines.**
- Follow your pre-surgery shower and shaving instructions.**
- Do not use makeup, deodorant, lotions, hair products, or fragrances on the day of surgery.**
- If you will be going home the same day as your surgery, you must have a responsible adult drive you home. You cannot drive yourself home or take a taxi or bus by yourself.**
- Remove all jewelry and body piercings.**
- Bring your medical insurance card and a photo ID with you.**
- Bring your pharmacy insurance card, Labor and Industry (L&I) claim number and card, and your Medicare or Medicaid information, if you have them.**
- Bring a list of all the medicines you take, and the doses of each one. This includes vitamins, supplements, and anything else you buy without a prescription.**

- Bring a method of payment for any co-pays for medicines needed after surgery.**
  - Pavilion Surgery Center accepts cash, 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.**
- If you use a CPAP machine at night to help you breathe, bring it with you.**
- Do not bring unattended children with you. Children age 17 and under must be accompanied by a responsible adult at all times in the waiting room and other areas of the hospital.**
- Adjust your medicines:**

**Stop** taking these \_\_\_\_ days before surgery:

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

**Take** these on the day of surgery with 2 ounces (4 tablespoons) of water:

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\_\_\_\_\_

## Driving Directions

To **University of Washington Medical Center**, 1959 N.E. Pacific St., Seattle, WA 98195:

- **From Interstate 5:**

- Take Exit 168B (Bellevue, State Route 520) heading east.
- Take the first exit (Montlake Blvd.).
- 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 first exit (Montlake Blvd.).
- Follow the signs to University of Washington Medical Center.

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

- **From Interstate 5:**

- Take the N.E. 45th St. exit 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.

*Please see the area map on page 22.*

## Locations and Parking

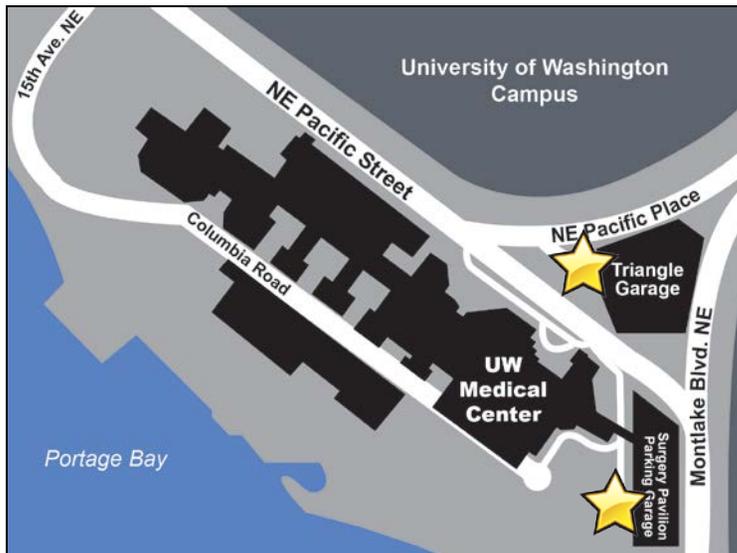
### UWMC

UWMC is at the south end of the University of Washington campus, at 1959 N.E. Pacific St., Seattle. Parking is available in 2 places (see map below):

- **Triangle Parking Garage** (underground and 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, at 4245 Roosevelt Way N.E., Seattle. The parking garage is under the building.



*Stars on this map show the entrances to the Triangle Garage and the Surgery Pavilion Parking Garage.*

## 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

## Your Pre-Anesthesia Clinic Visit

We need information about your health before your surgery. At your Pre-Anesthesia Clinic visit, we will ask you to fill out a health survey and a list of medicines you take at home.

When you come to the Pre-Anesthesia Clinic, be sure to bring:

- **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 diagnostic testing such as an electrocardiogram (EKG), stress test, echocardiogram, pulmonary function tests, etc. We will include copies of these records in your surgical information packet.

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

It is important for us to have this information before your surgery. It will help your doctors know about things that may affect your care and recovery.

Nurses trained in anesthesia assessment will review your health survey, medical history, and home medicine list. If needed, blood tests, an EKG, and a chest X-ray will be done. Depending on your type of surgery, other tests may also be needed.

You will not meet your anesthesia team at this visit, but will meet them the day of your surgery.

### **Medicines Before Surgery**

It is important 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)
- 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 nurse will tell you which of your medicines you can take the morning of surgery (also see page 4).

### **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 1 or more of these types of anesthesia:

### **Helpful Contacts**

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.

**Admitting**.....206.598.4310

#### **Bills**

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*.....800.833.6384

**Lost and Found**..... 206.598.4909

**Operating Room**..... 206.598.4270

**Patient Relations**..... 206.598.8382

**Pavilion Surgery Center** .....206.598.4214

**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.**

## Risk of Falling

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

- You are not in a familiar 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 bathroom urgency.
- 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.

- **General** – you are unconscious and have no awareness of the surgery.
- **Regional** – a numbing medicine is injected into a cluster of nerves, so you do not have sensation (feeling) in a large area of your body. You may also be given medicine to relax you or help you sleep.
- **Local** – a numbing medicine is injected into the skin and tissues near the surgery area. This numbs only the area of surgery, like a local anesthetic that is given for dental work. You may also be given medicine to relax you or help you sleep.

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

## 24 Hours Before Surgery

### Your Arrival-Time Phone Call

A staff member from the Pre-Anesthesia Clinic will call you the afternoon before your surgery day. We will:

- Confirm your arrival location and time
- Review your pre-surgery instructions.

If your surgery is on a Monday, this call will be on the Friday before.

Please make sure we have the correct phone number where you can receive this pre-surgery phone call. If you do not receive this call by 5 p.m., call the Pre-Anesthesia Clinic at 206.598.6334.

### Fasting Guidelines

Unless you have instructions from your doctor about bowel cleansing, eat normally and take your usual medicines the day and evening before surgery. But,

starting at midnight, you will need to follow special *fasting guidelines*.

**It is very important to follow these guidelines about not eating or drinking before surgery.**

These guidelines reduce your chance of vomiting and inhaling stomach contents into your lungs during surgery. For your safety, if you do not follow these fasting guidelines, your surgery may need to be rescheduled for another day.

Some patients may drink liquids after midnight the night before surgery. Other patients will not be able to eat or drink anything after midnight the night before surgery. This is based on your medical condition and type of surgery. The Pre-Anesthesia nurse will explain the guidelines that you need to follow.

*For ALL patients:*

- Do **NOT** eat after midnight, unless you were told otherwise.
- Do **NOT** drink alcohol after midnight.
- Do **NOT** drink liquids after midnight that are not clear, unless you were told otherwise. This includes coffee or tea with cream or milk, lattes, milk, or orange juice.

*For patients who are told NOT to drink liquids after midnight:*

- Do **NOT** drink ANY liquids after midnight.
- The Pre-Anesthesia nurse will tell you if you may have up to 2 ounces (4 tablespoons) of water for taking the medicines you are allowed to take.

*For patients who are told they MAY drink liquids after midnight:*

## **If You Are Staying Overnight in the Hospital After Your 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.
- 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 are walking
  - A staff member to stay nearby when you use the bathroom 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.
- You may have wraps that squeeze your lower legs while you are in bed. These wraps help prevent blood clots.



## If You Are Going Home After Surgery

If you go home the day of surgery, the person who takes you home must be able to get you into your home and help you settle in. This is 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 your safety, we strongly advise that you have a responsible adult stay with you for at least 24 hours after surgery.

For 24 hours after having anesthesia, **DO NOT**:

- Drive
- Drink alcohol
- Travel alone
- Use machinery
- Sign any legal papers
- Be responsible for taking care of another person, such as a child

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.

Before you leave the hospital, you will receive information about how to care for yourself at home.

You will also be given a phone number to call to set up your follow-up visit, if this appointment is not scheduled already.

- From midnight until 2 hours before you arrive for your surgery, you may drink as much **CLEAR** liquid as you want. This means you may have liquids such as water, clear juices (no pulp), carbonated drinks, Gatorade, and clear tea.
- Starting 2 hours before you arrive for your surgery, do **not** drink anything.

## Shower Instructions

Use a special soap called **Chlorhexidine gluconate** (CHG) to shower or bathe, **both the night before and the morning of surgery**.

You can buy CHG at most large drugstores. It comes as a 2% and a 4% solution. Either one is OK. A common brand is *Hibiclens*, but you may use any brand. Follow the instructions it comes with for using it.

1. Use the CHG soap **FROM THE NECK DOWN**. Wash well, especially around the area of your surgery.
2. **DO NOT** use CHG to wash your face or hair. (Use your regular soap and shampoo to wash your face and hair.)
3. Rinse well and wash again the same way.
4. Pat dry with a clean towel. Put on clean clothes.
5. After your morning shower or bath, **DO NOT** put on makeup, deodorant, lotions, hair products, or fragrances.

## 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 page 20 for a map 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](http://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, take a taxi, or ride a bus by yourself. You must have a responsible adult 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 driver is not present when you check in, we will ask for their name and phone number. **If you do not have a driver, your surgery may be cancelled.**
- Your driver must pick you up at the hospital within 30 minutes of your discharge.

## Coming to the Hospital

When you come for surgery:

- Do not use any makeup, deodorant, lotions, hair products, or fragrances.
- Wear loose clothing that will be easy to take off and comfortable to wear home.

pain on a scale of 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 relief by:

- Medicine given through a small tube in your back (*epidural*).
- *Patient-controlled analgesia* (PCA). This machine puts a dose of pain medicine into your IV tube when **you** push a button. Your doctors will prescribe the correct amount of medicine for you. With PCA, you do not have to wait for a nurse. You are in control of your pain relief. You will **not become addicted** to these medicines if you use the machine as prescribed.



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

**WARNING:** Only you should push the button on your PCA. Do **NOT** let your visitors push the PCA button.

If your site needs to be marked, your surgeon will mark the site with his or her 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, you will be asked to confirm what surgery or procedure you are having.

## Starting Your IV

After a numbing solution is put on your skin, an IV will be placed in a vein in your arm or in the back of your hand. Medicine and fluids can be given to you quickly and easily through the IV. It will be in place for a while after surgery. Sometimes, you will be given medicine through this IV to help you relax, or even sleep, before going into the operating room.

## In the Recovery Room

The recovery room is sometimes called the PACU, which stands for Post-Anesthesia Care Unit. Most patients are in the recovery room for 1 to 2 hours after their surgery.

Most times, your loved ones will be able to visit you in the PACU, if you wish. This will be after you have received the care you need to ensure your safety as you wake up from anesthesia and have your pain treated, if needed. There is limited space in the PACU area, so you may have only 1 adult visitor at a time.

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.

Be sure to ask your nurse for pain medicine before your pain gets too bad. Your nurse will ask you to rate your

- Please do not bring valuables with you.
- Remove all jewelry and body piercings.

Bring with you:

- A list of your medicines and the doses of each one. Do not bring the actual medicines unless the Pre-Anesthesia Clinic nurse tells you to.
- A photo ID, your health and pharmacy insurance cards, and co-payment for discharge medicine.
- 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.

## 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 1½ hours before your surgery. This gives us time to prepare you for your surgery. During this time, you will:

- Sign admission forms.
- Be checked for any changes in your health.
- Meet your anesthesiology team.
- Have your *intravenous line* (IV) started. An IV is a small needle and thin tube that is used to give you medicines and fluids during surgery.

Bring a book or a project to help pass the time. We will tell you about any changes that might affect your surgery start time.

*Note:* Female patients 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

The surgery “prep” area has many patients who are being prepared for 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 and 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

An adult support person is welcome to be with you during your “prep” time. They may be asked to step out of the prep space, if needed.

Your support person may wait in the waiting room when you are taken to surgery. They may want to bring something to read while they wait, or a laptop computer or other electronic device to use. Wireless internet access is available in most areas of the hospital.

We cannot provide child care. If you must bring a child age 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.

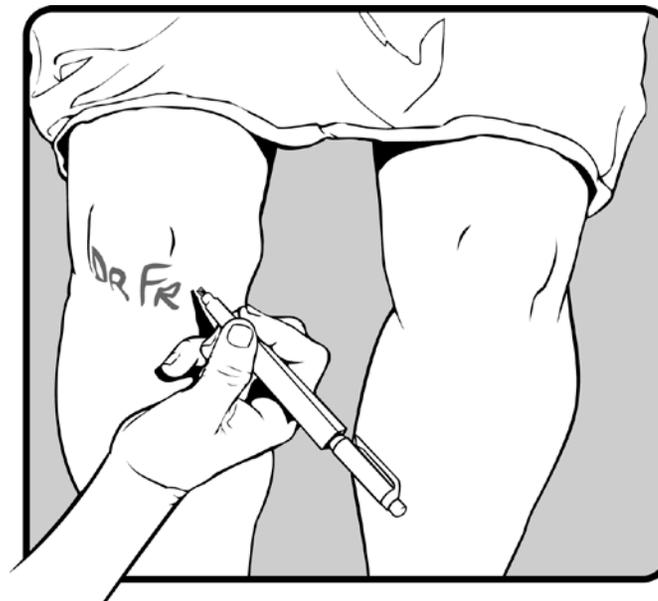
## Surgical Site Marking

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.



*A surgeon writing their initials on a patient's surgery site.*