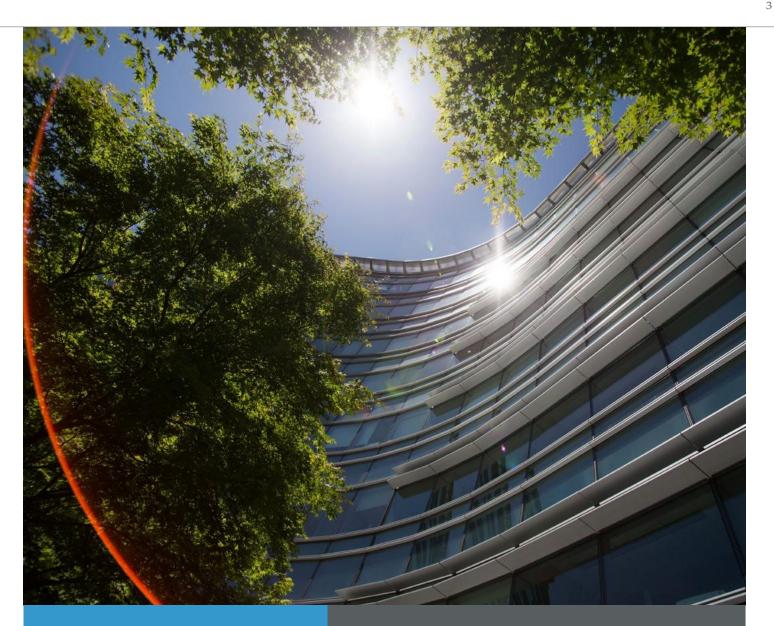
Preparing for your surgery



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Use pages 21 and 22 to add notes about your surgery.



Thank you for choosing OHSU for your surgery.

Welcome to OHSU. Your team wants your surgery to go as well as possible. Preparing before you arrive is very important. This booklet tells you how to prepare and what to expect.

Your rights and responsibilities

As an OHSU patient, you have several rights, including the right to respect, privacy and dignity. As an OHSU patient, you and your visitors also have responsibilities, such as the responsibility to be considerate and respectful of others. You can find a full list of your rights and responsibilities at www.ohsu.edu/patientrights.

Checking your health before surgery

We want to make sure you are healthy enough for surgery and anesthesia.

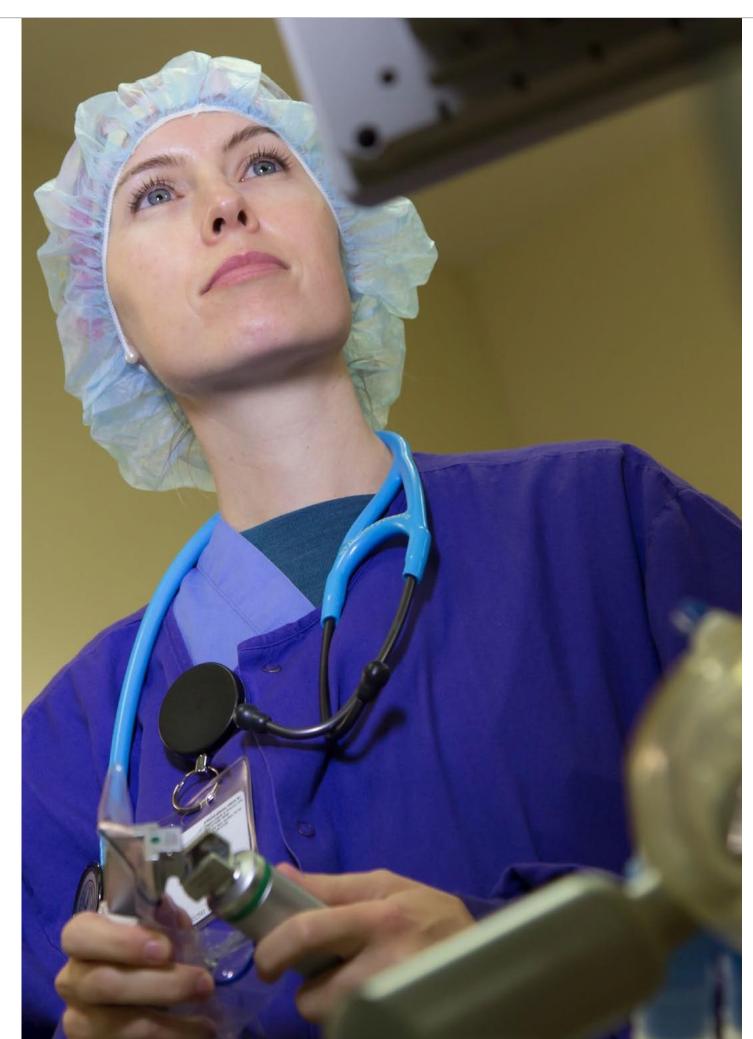
Before surgery, you will see a provider from the OHSU Preoperative Medicine Clinic. You might do this in person or in a video or phone visit. Please bring your medications or a list of what you take. The list should include doses and how often you take them.

Your preop provider will ask about your medical history. You'll talk about tests or steps you can take to get ready for surgery.

If you have a condition such as diabetes, asthma or heart disease, we'll let the anesthesia team know. They can treat any problems you might have during or after surgery.

Questions we may ask you

- Do you have a health condition, such as diabetes, heart disease or high blood pressure?
- Are you taking any medications? This includes non-prescription medications, such as aspirin, ibuprofen, vitamins and herbal products.
- Are you taking blood thinners?
- Do you use tobacco, marijuana (cannabis), alcohol or other drugs? OHSU does not allow smoking, but we can help you quit. <u>Learn more at ohsu.edu/knight-</u> cancer-institute/quit-smoking.
- Do you have any allergies?
- In the past year, have you had surgery, been in the hospital or been very sick? If so, please tell us what surgery and which hospital.
- Are you pregnant? Could you be pregnant?
- Do you have a fever, cold or rash?
- Do you have an advance directive? This is a legal document that lists your health care wishes if you can't speak for yourself. It can also name someone you trust to make health decisions for you.
- Do you prefer not to have blood transfusions even in life-threatening emergencies? It's best to let your surgery team know before or when you schedule surgery. OHSU offers <u>bloodless</u> <u>surgery</u> as a safe alternative. Call 503-494-5024 to learn more.



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These pages will help you get ready for surgery.

Doing these things will help your surgery and recovery go as well as possible.



■ Check your health insurance

Your surgeon's office will call your health insurance company about paying for surgery. It is a good idea to call the company yourself, too. Questions to ask include:

What is my deductible?

This is the amount you have to pay each year before the insurance pays for care.

Do I have a co-payment?

This is the amount you have to pay for a procedure before the insurance pays.

Is my surgeon in your network?

What about the hospital?

Insurance companies usually pay more of the cost for doctors and hospitals in your insurance network. A network is a group of health care providers the company has arranged to work with.

■ Do I need to meet any requirements to have this surgery?

Your insurance may pay for surgery only if you meet certain requirements. Make sure you understand any requirements before surgery.

² Get a cost estimate from OHSU.

Someone from OHSU's cost estimate team will call you to go over the estimated cost of your surgery. If you have questions, call 503-494-3508.







■ Check on your medications

Be sure your surgical team knows about all medications you take, including those for diabetes, blood pressure, heart, breathing problems, weight loss and blood thinning. These medications can include Coumadin (warfarin), aspirin, Plavix, Ozempic, Jardiance, and anti-inflammatory medications such as Advil. You might be told to change the dose before surgery.

■ Plan for going home

When it's time for you to go home (discharge), a responsible adult must meet you in the hospital. They need to learn your discharge instructions. They also need to drive or ride with you home. A Lyft, Uber or taxi driver does not count as the responsible adult.

If you're staying overnight in the Center for Health and Healing, plan to be picked up by 11 a.m. At other locations, the discharge times may vary.

We recommend having someone stay with you for 24 hours after you get home. If you can get help for longer, your recovery will be easier.

■ Stop smoking

Quit or cut down at least two weeks before surgery. Smoking slows your healing and recovery. Some people might need to stop smoking for longer.

■ Let us know if you get sick

Call your surgeon's office if you get a fever, cold or rash within 2 days before your scheduled surgery date. Your safety is our top priority.

Other things to do before surgery (add your notes)

7 days before surgery: Pre-register by calling Admitting at 503-494-8927.

Right to Decline HIV Test: If an OHSU worker is exposed to a patient's blood and/or bodily fluid that could transmit the human immunodeficiency virus (HIV) or Hepatitis B or C, OHSU may obtain and/or test the patient's blood for HIV and Hepatitis B and C. The patient may opt out of such testing by completing an opt-out form. This form can be obtained from the provider or by calling Patient Access Services at 503-494-8927. If the patient opts out of such testing, consent will be obtained from the patient or, if the patient is unable to consent, the patient's next of kin.

Talking with the surgery scheduler

1 or 2 days before surgery: You will get a text message or a phone call from a scheduler to confirm your surgery. The information will include:

- When to get to the hospital on your surgery day
- Where to park and check in

If you have MyChart, you'll get a message about how to prepare for surgery, including how to eat and drink. It's important to follow these instructions. If they're not followed, it may not be safe to do your surgery and you may be rescheduled.

Give us your contact information

Please provide the best phone number and email to reach you. This helps us give you important information about your surgery as soon as possible.

Please call us back

If we cannot reach you personally to confirm your surgery, we will leave a message. Under federal privacy law, we can't always leave a detailed message. If that's the case, we will leave a callback number. Please call back to get the information you need before surgery.

Note: The Health Insurance Portability and Accountability Act, or HIPAA, limits the information we can leave in a message for you. If you have questions about your surgery, contact your surgeon's office.

Phone:	
Questions:	

Countdown to your surgery

Your surgeon or main health care provider will give you any other instructions you need. If you have questions, please call them.



2 days before

Start drinking lots of water or other fluids. Having more fluid in your system makes it easier to put in your IV. Avoid drinking too much coffee, soda or alcohol.

People with certain conditions should talk to their doctor about drinking extra fluids. These conditions include congestive heart failure, kidney failure (renal failure) and dialysis.



The night before

- Take a shower. See the instructions on page11.
- Avoid eating for the 8 hours before your surgery. You can drink clear liquids up to 1 hour before you arrive at OHSU. Avoid milk, cream and pulp. If your doctor says it is okay, you can take certain medications with a small sip of water.

The day of surgery

Wear loose, comfortable clothing to the hospital.



Avoid:

- Makeup, nail polish and contact lenses.
 If you need help seeing, please bring glasses.
- Shaving the area where you will have surgery.
 We might ask you to use a special skin cleanser that can irritate areas that are shaved.
- Wearing a watch or jewelry. Remove any piercings or fake nails. Leave valuable items at home.

How to prepare your skin before surgery

You may need to shower with a special soap the night before and the morning of surgery. If your provider tells you to wash with a CHG soap, please follow these instructions.

Shower instructions

- 1. Wash and rinse your hair and face using your regular shampoo and soap. Do not shave or remove hair from the neck down. If you are having head or neck surgery, do not shave your face.
- 2. Completely rinse off all shampoo and soap.
- 3. Turn off the shower.
- 4. Use your hands, not a washcloth, to put the CHG soap directly on your body. Avoid your hair and face. Use the smallest amount you can. Focus on your neck, chest, belly and where the belly connects to your legs. Include any belly folds, the belly button and under the breasts.
- 5. Leave the CHG soap on your skin for 1 minute.
- 6. Rinse thoroughly with warm water.

Do not use:

- Regular soap after CHG soap
- Lotions, makeup, perfumes and powders
- Hair products
- Deodorants
- 7. Pat your skin dry with a clean towel.
- 8. Put on clean underwear, socks and clothing.
- 9. Sleep on clean beddingthe night before surgery.
- 10. Shower again in the morning, using the same instructions.
- 11. Put on clean underwear, socks and clothes.
- 12. If you are having head or neck surgery:

About CHG soap

CHG soap contains an antiseptic solution called chlorhexidine gluconate.

CHG soap kills germs that can cause infections. Using this soap helps reduce your risk of infection after surgery.

What to know about using CHG soap:

- Use it only from the chin down, even if you are having head or neck surgery.
- Keep it out of your eyes, ears, mouth and private parts.
- Stop using it immediately if you have an allergic reaction.

- Make sure your hair is fully dry before surgery.
- Keep your hair as clean as possible.
- If you wear a hair covering, make sure it is clean (freshly laundered).

What to bring to the hospital



Insurance,
prescription,
Medicare and any
other medical cards



A list of your medications (you can add this on page 21) with the name, dose and how often you take each one



Money for copayments or prescriptions, if required by your insurance provider



Inhalers, eye drops, walkers, crutches, home CPAP or BiPap devices and other personal medical items



A copy of your advance directive, if you have one. This is a legal document with your health care choices. It can also include the name of someone you trust to make health care choices for you, if needed.



If you are staying in the hospital after surgery: personal hygiene items and a reusable bag for your belongings



If you wear glasses or dentures: a case to protect them

What not to bring to the hospital

X Valuables such as jewelry

X Electronic devices such as laptops, tablets and games X Tobacco products

X Medications, unless your doctor tells you to bring them X Contact lenses

 \boldsymbol{X} Weapons of any kind

Checking in for your surgery

If you have an emotional support or service animal, please plan for it to stay on the admitting/checkin floor during your surgery. Animals are not allowed in surgery areas.

You can contact your care team for help making arrangements.



Please arrive a few minutes before the time your scheduler gave you.

If your surgery is at OHSU Hospital:

Check in at Admitting:

9th floor hospital lobby

3181 S.W. Sam Jackson Park Road, Portland, OR 97239

If your surgery is at Center for Health & Healing, Building 2:

Check in at Admitting:

1st floor lobby

3485 S.W. Bond Ave., Portland. OR 9

Driving directions

Find maps, directions and parking information at ohsu.edu/visit. Parking is free for patients and visitors.

See interactive maps at ohsu.edu/map.

What happens when you check in

How long will my surgery take?

Many things can affect how long your surgery takes. They include the type of procedure, anesthesia and medications you have.

You can expect to be at the hospital between 5 hours and a full day.



Sometimes surgery is delayed by an emergency or unexpected schedule change. If this happens, we will give you as much information as possible.

When you check in for surgery, we will ask you to:

- Let us know the best way to contact the family member or friend who will meet you after surgery.
- Show your insurance card and make a copayment if your insurance requires it.
- Sign a form that lets us bill your insurance company.

Pre-surgery area: Your preop nursing team will help you get ready for surgery. They will:

- Check your blood pressure, pulse and temperature.
- Clip any hair in the area of your surgery.
 This lowers the risk of infection.
- Confirm your health history and recent medications taken.
- Place an IV for fluids and medications.
- Introduce you to members of your anesthesia and surgery teams.
- Do a pregnancy test if you are able to have a baby. Surgery can include medications or other risks for a developing baby.
- A family member or friend may stay with you until you go to surgery. After that, they may stay in the waiting area.

The operating room, also called the OR, is a safe, clean place for surgery. A member of your surgery team will take you there on a bed or a stretcher. You will get anesthesia before surgery starts.

About the operating room

Inside the operating room

When you go into the operating room, you may notice bright lights above the operating table. These help your surgery team see as well as possible.

We try to keep the operating room at a comfortable temperature for you. If you feel cold, we can give you a blanket. Your team will make sure you stay warm enough during surgery.

Your surgery team will put a blood pressure cuff on your arm. This keeps track of your blood pressure during surgery. You will also have:

- Sticky pads on your chest to measure your heart rate
- A clip on your finger to measure the oxygen in your blood

Your surgery team

- Your surgeon. You might have a main surgeon and others who help.
- Anesthesia providers
- Surgical residents
- Nurses
- Operating room technicians
- Physician assistants and nurse practitioners

The team keeps track of how you are doing through the entire surgery. Our most important goal is keeping you safe and healthy.



About your anesthesia

What is an anesthesiologist?

An anesthesiologist is a doctor who manages pain or discomfort during and after surgery. Your anesthesia provider also keeps track of your vital signs and treats any problems.

Your provider may call you the night before your surgery. Or you may meet them in the preop area before surgery.

What your anesthesia provider does

During surgery, your anesthesia provider tracks your important body functions. These include your heart rate and rhythm, blood pressure, body temperature and breathing. Your provider uses the most advanced equipment to watch everything that happens. Your provider can adjust anesthesia and equipment to help keep you safe and comfortable. If you need and accept extra blood or fluids during surgery, your provider makes sure you get them.

What your anesthesia provider needs to know

Before your surgery, your anesthesia provider learns as much about your health as possible. This is to keep you safe. It is important to tell your provider about:

- Your medical history
- Your lifestyle

- Your medications, including nonprescription medications, vitamins and herbal supplements
- Whether you will accept blood transfusions in life- threatening emergencies

Your anesthesia provider will ask about these things:

Your reaction to anesthesia

If you have had a reaction to anesthesia, your anesthesia provider needs to know what happened. This includes the specific problems you had.

Difficulty with a breathing tube

If a health care provider has said you have a "difficult airway" or that putting in a breathing tube was difficult, please tell your anesthesia provider before surgery. Problems with a breathing tube could be life threatening.

Herbal supplements you take

Some common herbal supplements may change your heart rate and blood pressure. They may also increase bleeding. During surgery, this could be dangerous. We recommend stopping all herbal supplements at least two to three weeks before surgery. This helps your body get rid of them in time.

Any known allergies

Tell your anesthesia provider if you are allergic to foods, medications or anything else. This is important because some anesthesia drugs can cause similar reactions.

Medications you take

Tell your surgeon and anesthesia provider about all your medications. This includes:

- Prescription medications
- Non-prescription medications, or medications you buy without a prescription
- Medications you are not taking now, but took in the last six months

Knowing what medications you took recently is important because you need to stop some medications several weeks or more before surgery. The blood thinner called Coumadin is an example of this type of medication.

Knowing what medications you take now is important because you should keep taking some during and after surgery. Your health care team will tell you which medications to take and when to take them.

Blood transfusions

Tell your surgeon and anesthesia provider if you prefer not to have a blood transfusion, even in lifethreatening emergencies.

OHSU Patient Blood Management staff can record your wishes and help providers plan for alternatives if available.

Cigarettes, marijuana and alcohol use

Cigarettes, marijuana and alcohol can affect you as strongly or more strongly than medication. Tell your surgeon and anesthesia provider if you use them now or did in the past.

Your care team can help you quit smoking before surgery. This will help you recover faster.

Quitting smoking also lowers your risk of heart disease and cancer.

Street drug use

Street drugs are drugs that are not sold in stores or pharmacies. These include cocaine, methamphetamine and some pills, including prescription pills you buy on the street. Anything you tell your doctor about using these drugs is confidential. Your doctor needs this information to keep you safe during anesthesia. These drugs can affect your heart rate, breathing and other body functions.

Types of anesthesia

The type of anesthesia you have depends on your surgery, general health, medical condition and other factors.

General anesthesia

This uses medications to keep you asleep and unaware of pain during surgery. To make sure you are breathing properly, you might have a tube put in your nose or mouth after you are asleep. The tube comes out as you wake up. After surgery, you wake up slowly in the recovery area.

Regional anesthesia

This stops pain in an area of the body. The anesthesia is given through a needle placed around nerves. You may stay awake during surgery. There are several types of regional anesthesia. They include spinal, epidural and peripheral.

Spinal anesthesia

This numbs the lower body for surgery in that area. The anesthesia is given as a shot in your lower back.

Epidural anesthesia

This is often used for leg, chest or abdominal (belly) surgery. Doctors also use it for childbirth. The anesthesia is given through a thin, hollow tube called a catheter placed into your back.

Peripheral nerve blocks

These work by injecting medicine next to the nerve that sends feelings of pain from the surgery area. Sometimes a hollow tube will be left in place so more medicine can be given as needed.

Local anesthesia

This stops pain in a specific part of the body. If you have minor surgery, you might get local anesthesia as a shot.

Sedation

Some surgery is done with sedation. This is medication to help you relax and feel sleepy. It keeps you comfortable during surgery. Doctors often give sedation along with local or regional anesthesia.

After your surgery

Hospital rounds

As a patient, you may experience doctors, nurses and other team members doing rounds. Rounds are a structured time for us to discuss your health and care plan. If your surgery is in the Center for Health & Healing Building 2, we may do rounds using telemedicine. Telemedicine allows you and your doctor to see and talk to each other over a computer.

Overnight stays

Private rooms are not always available. If you stay overnight, you might need to share a space with other patients. If you're in a shared room, we may limit overnight visitors.

Going home

Before you go home (discharge), your nurses will go over your surgeon's instructions with you and your support person. You will get a copy of these instructions to take home.

Pain management

Everyone deserves pain relief, but some pain and discomfort is normal while your body heals. The goal is not to take away all of your pain but to safely make you as comfortable as possible. We will do all we can to reduce your pain safely and keep you active enough to do what you need to do to heal quickly.

Ask your surgeon what kind of pain you might expect. If you have a family doctor, share this information with them.

Talk with your surgeon and anesthesia provider about how you prefer to handle pain. If you are taking pain medicine, tell them how much you take on a regular day.

- Learn how to manage pain without opioids. These methods may work better and have fewer risks and side effects: acetaminophen (Tylenol), ibuprofen (Advil), naproxen (Aleve), heat packs/cold packs, acupuncture, cognitive behavioral therapy and psychotherapy.
- · Use opioids only for severe pain. Opioids can be an important part of treatment but can also have serious side effects and cause addiction. Over time, opioids actually make it harder to handle pain. They should be used only for pain that makes it hard to sleep or when other methods don't work.

Your surgery information

Park Road Portland, OR 97239

Date of surgery:	Do not eat or drink after:
Surgeon:	
Location:	
OHSU Hospital Admitting: 9th floor hospital lobby 3181 S.W. Sam Jackson	 Center for Health & Healing, Building 2 Admitting: 1st floor lobby 3485 S.W. Bond Ave. Portland, OR 97239

Take these medications as directed with a sip of water on the morning of surgery	Stop taking these medications

Other appointments

Doctor:	Date:	Time:
Location:		
Doctor:	Date:	Time:
Location:		
Doctor:	Date:	Time:
Notes:		
		Time:
Location:		
Notes:		
Tests and follow-up		
		V ray/
		_ X-ray:
		Occupational therapy:
MRI:		Physical therapy:

An EKG, or ECG, is a heart test called an "electrocardiogram." It is done before surgery to learn if your heart's electrical activity is normal.

An MRI is a picture of the inside of the body. You might have one to show the area that needs care.

www.ohsuhealth.com/surgery



OHSU Surgical Services 3181 S.W. Sam Jackson Park Rd. Portland, OR 97239 www.ohsuhealth.com/surgery

OHSU is an equal opportunity, affirmative action institution.

OHSU accepts most major health plans.

OHSU protects the privacy of its patients' and research participants' personal health information. If you would like a copy of the OHSU Notice of Privacy Practices, please call 503-494-8849.

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