

7. What to expect if you are Going Home on the Day of Surgery

Discharge is at the discretion of your surgeon, in conjunction with the anesthesia provider. Before leaving, you will receive verbal and written instructions. Included in this information will be general instructions regarding diet, medications, bathing and activity restrictions, as well as instructions specific to your procedure.

Please have someone available to drive you home and provide the driver's name and contact number to the nurse prior to surgery. You should also arrange to have someone stay with you for 24 hours after surgery, as you should not be alone. Your surgery may be cancelled if no one is available.

You will be given your surgeon's office phone number to arrange a follow-up visit. A member of the nursing staff will telephone you on the next business day after your surgery to review progress and to answer any questions you may have. Please provide the phone number where you can be reached.

If you experience an urgent problem and cannot reach your physician or a nurse, please report to the Emergency Department.

Home readiness is the goal of ambulatory surgery. This means that you are ready for discharge to home for further recuperation. You should not resume normal recreational or professional activities immediately. Follow your physician's instructions.



8. Admission to Hospital

If your visit with us requires an overnight stay, after a period of observation you'll be taken to your room. Your family/friend can wait in a designated waiting area where the surgeon will usually meet with them at the end of the procedure. Your family/friend may join you once you are in your room. Personal belongings will accompany you to your room.

When you arrive in the room you will meet your new nurse and be shown how to contact that nurse for help. Use of electronic equipment will be reviewed with you. Appropriate diet and activity levels, available medications for you (for pain, nausea, sleeping), and any prescribed medications should be explained to you.

As always, you remain a partner in your care and recovery. By asking questions when you have them, and giving feedback, you will aid in your recovery and discharge.

Thank you for making Waterbury Hospital your facility of choice. Waterbury Hospital is fully accredited by the Joint Commission on Accreditation of Healthcare Organizations.

SURGERY DEPARTMENT
Monday through Friday
6:00 a.m. - 6:00 p.m.
(203) 573-7272

MAIN NUMBER
(203) 573-6000

PATIENT ADVOCATE
(203) 573-7386



WATERBURY HOSPITAL

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WATERBURY HOSPITAL

A Guide to
Surgery
at Waterbury Hospital



Patient Surgery Information

About your Surgery at Waterbury Hospital

1. Pre-Surgery

Once your surgery has been scheduled, you will receive a telephone call from a registered nurse at Waterbury Hospital's Pre-operative Department (One Day Surgery). The nurse will need approximately 15-30 minutes of your time to do a pre-surgery interview, and to provide you with the necessary pre- and post-op teaching. A medical history will be taken including allergies to food, medications or latex. The day before your surgery a nurse will call you between 12 noon and 3pm to tell you your expected time of arrival to the hospital on the day of surgery. If you do not hear from a nurse during that time, please call (203) 573-7272 between 3pm and 5pm to find out your time of arrival to the hospital on the day of surgery.

Testing may have already been performed by a laboratory of your choice. Depending on your age, physical condition or doctor's request, it may be necessary for additional blood work to be done the day of surgery. You should have a list of all medications with current dosages you are taking. This list should include prescription and non-prescription medications, as well as herbal or vitamin supplements.

Please be honest about use of alcohol and street drugs, which can react dangerously with some anesthesia drugs. You should refrain from smoking for 24 hours prior to surgery. If it is determined by your surgeon that you have a history of heart or lung problems, you may be required to see a cardiologist or internist. The goal is for your health to be at its best before you are given anesthesia.

The nurse will advise you to leave all valuables home, and for your safety, to remove all body piercings and jewelry before coming to the hospital. Wear loose fitting comfortable clothing. You will also be advised of what medications to take the morning of surgery. Please be prepared the day of surgery by bringing valid photo identification, co-payment (if not already collected) and your insurance card. After you check in, all valuables **should be given** to your family, or the person accompanying you.



2. What to Expect on the Day of Surgery

It's understandable to be a little anxious the day of surgery. It is important to report any unusual feeling or illness you are experiencing. Remind us of any special needs, such as bladder or bowel control issues, or the use of any assistive devices, such as hearing aids, dentures, or any language barriers that may require interpretation. If employees forget to introduce themselves, ask them to please do so. You have the right to know who's involved in your care. Please make every attempt to arrive on time, as instructed for your scheduled surgery.

You must not eat or drink, per your preoperative instructions. That includes no gum or mints. If you have been instructed to take medications the day of surgery, they may be taken with a small sip of water. You may brush your teeth and spit out any rinse water.

To lessen your chance of infection after surgery, please shower or bathe the night before or the morning of surgery. Unless you receive specific instructions from your surgeon, please use antibacterial soap. Do not shave the body area where your operation will be performed on at home. Using a razor to shave the skin has been proven to increase the chance of an infection after surgery. Any necessary skin preparation will be done the day of surgery, unless otherwise advised by your surgeon.

Bring any inhaler you use to help with breathing. If you have a CPAP machine, please bring this with you. If you are unable to bring your CPAP, knowledge of your settings is helpful.

3. Pre-Operative Holding Area

There will be a nurse responsible for your care at all times. You'll be escorted to a changing area and be asked to remove your clothing. A hospital gown will be given to you. You may sit in a recliner or wait on a stretcher.

If a registered nurse was unable to contact you prior to the day of surgery, you will be interviewed upon admission and have the opportunity to have your questions answered. A member of the anesthesia team will review your plan of care with you. An OR nurse will review your procedure with you and a member of your surgical team will escort you into the surgical suite.

During your stay with us, safety measures will be taken by hospital staff. All caregivers should clean their hands with soap and water, or an alcohol based hand cleaner, before treating you. So before they treat you, ask if they have washed their hands.

You may be asked some of the same questions by various staff members to ensure your safety. You and your surgeon will confirm your surgery site. Your surgeon will initial the surgery site. You may be given antibiotics preoperatively to prevent postoperative infections.

Please keep in mind that surgical procedures sometimes run longer than expected. There also are times when another patient may need emergency attention. Should your procedure be delayed, we appreciate your understanding.

4. Pain Management

The management of after-surgery pain will begin while you are preparing for surgery. Various factors must be considered, such as anxiety, fear of the surgery experience and anticipation of pain. A thorough history, which includes your current medications, a pain assessment, and education on the use of a "pain scale", will provide a basis for your plan for pain management. (A pain scale is a measurement tool that the staff will use to assess your comfort level.) The more detailed your information, the more adequate pain relief you can expect. Depending on whether you are going home the same day or staying overnight, there are various options available to you for pain management. These methods take into account the extent of your surgery, type of anesthesia, and past medical history. A pain management plan will be designed specific to your needs.

5. What to Expect in the Operating Room

Once you arrive in the Operating Room (OR), you may be overwhelmed with the activity taking place. Please do not be alarmed, this is normal OR activity. You may notice bright lights, instruments, equipment and an environment that is so clean we call it sterile. You will notice the OR team members putting on facemasks as they enter the operating room to maintain a germ-free environment. By now you will have met your anesthesia provider and your OR nurse.

The same questions asked of you throughout your preparation will be asked once more. As you are wheeled on a stretcher or wheelchair into the OR, your nurse will answer any questions you may have and offer reassurance. As you move from the stretcher to the OR bed, warm blankets will be provided to offset the cooler temperature of the OR.

The anesthesia provider will monitor your vital signs throughout your surgery. Your physician will perform the surgery with the assistance of a scrub nurse or technician. A circulating nurse oversees the entire procedure to ensure overall safety.

Once your surgery is complete, the surgeon will go to speak to your family. The anesthesia provider will see that you awaken safely, and then take you on a stretcher to the recovery area.

6. What to Expect in the Post-Anesthesia Care Unit

When your surgery is over you will be observed for a period of time in a recovery area. Your anesthesia provider will bring you there on a stretcher and give a report to the nurse who will take care of you while you are recovering from anesthesia. The type of anesthesia you have received will determine your length of stay and overall post-operative course.

During your stay in recovery, the nursing staff will monitor your vital signs closely. The nurse will assess your needs so that you have only minimal discomfort. Once you achieve a set criteria specific to your type of surgery and anesthesia, you will be evaluated for discharge from this area to an inpatient bed or home.