





# Preparing Helps With Your Healing

You are scheduled or will soon be scheduled for surgery or a procedure. This material includes information that is helpful to know and use ahead of time. It also includes information you can use as you recover. Preparing for your surgery or procedure and following your care instructions afterward helps with your healing.

Before your surgery or procedure:

- Read this material. Use the information to help you plan and prepare. Refer to it during your recovery.
- Read and follow any other preparation instructions you are given.
- Talk with your health care team about any questions or concerns you have about your surgery or procedure as well as your recovery and any follow-up care.
- Talk with your health care provider about your use of caffeine, alcohol, tobacco, or other drugs. Your use of any of these products before or after your procedure may affect your healing and recovery.
- Make a plan for after you leave the hospital. Think about how you will care for yourself in the days and weeks that follow. Will you go to your home, the home of a family member or friend, or a nursing care facility? Will you need help from family members, friends or others?
- Plan what to bring with you to the hospital or outpatient procedure area.

## What is inside

Preparation .....	2
The Day of Your Surgery or Procedure .....	6
Care After Your Surgery or Procedure .....	9
Dismissal From the Hospital or Outpatient Procedure Area .....	13
Recovery .....	14

# Preparation

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## **Mental and physical preparation**

As you prepare for your surgery or procedure, do what you can in the weeks and days before to prepare mentally and physically.

- Eat a healthy, well-balanced diet and drink enough fluids to stay well-hydrated. Follow any additional diet instructions from your health care provider.
- Stay active and exercise regularly.
- Get an adequate amount of sleep.
- Practice stress-relieving techniques. Make time to relax every day.
- Create a social network of people who can support you during and after your surgery.

Complementary and integrative therapies can help manage or relieve stress. They also may help with any symptoms you have during your recovery such as pain and nausea.

Some examples include:

- Listening to music.
- Practicing guided meditations or guided imagery.
- Using massage therapy.
- Using aromatic plant oils (aromatherapy).
- Applying pressure to key points on your body (acupressure).
- Performing deep breathing exercises.

For additional resources or information about complementary and integrative therapies, talk with your health care provider.

## Surgery or procedure preparation

The type of surgery or procedure and your health care needs determine how long you will need to stay in the hospital or outpatient area. Ask your health care provider how long you can expect to stay. Specific criteria help your health care team decide when you are ready to leave.

### What you need to do before your surgery or procedure

Tell your health care provider if you:

- Take any medications, vitamins, or herbal or dietary supplements. This includes blood-thinning and anti-inflammatory medications.
- Have any medical conditions. Examples include diabetes, heart disease, and sleep apnea.
- Are allergic to latex, rubber or other substances.
- Are pregnant or think you may be pregnant.
- Have been told you are positive for MRSA, VRE or a resistant bacteria.
- Smoke. Smoking increases your risk for infection after surgery.

Contact your medical insurance company as soon as you can. Find out what you need to do to have coverage for your surgery or procedure. Ask what costs your policy does and does not pay for.

You receive preparation instructions when you set up your surgery or procedure. This may include changes to your medicines and to what you can eat and drink before your surgery or procedure. If you do not get these instructions, call your health care team.

It is very important to follow the instructions. If you do not, your surgery or procedure may be delayed or set up for another time. If you have questions about what you are told, ask a member of your care team.

You will be asked to sign a consent form before your surgery or procedure. If you are under 18 years of age, a parent or legal guardian must sign for you. The form states that you know the risks and benefits of your surgery or procedure. Signing the form gives your care team permission to do the surgery or procedure. **Do not sign it unless you understand what will happen during and after the surgery or procedure.** If you have questions about your surgery or procedure, ask to speak with your surgeon before you sign the form. If you don't understand the answers, ask again.

## **Preventing infection**

The possibility of infection is a risk with any surgery or procedure. You can take steps to reduce your risk of infection and complications. Know the signs and symptoms of infection and what you can do to help prevent it.

Talk with your health care provider about your specific risks of infection. Some of these risks may be related to the type of surgical procedure you need to have. Other factors, such as obesity, smoking, poor diabetes control and poor dental health, increase your risk and are factors you can change before surgery.

Begin as soon as possible to make changes to reduce your risk of infection.

- If you are overweight, talk with your health care provider about a nutrition and exercise program that works for you.
- If you smoke, stop smoking. Ask your health care provider about resources available to help you quit.
- If you have diabetes, work with your health care provider to help you gain the best control of your blood sugar.
- Practice dental hygiene and visit your dentist to evaluate dental infection risks.
- Discuss with your health care provider any health conditions or history of previous infections that may require attention before surgery.

## **Sedation or general anesthesia**

During your surgery or procedure, you may have intravenous (IV) sedation, a nerve block, or general or regional anesthesia. The medicine you receive depends on your medical history, physical condition, and the type of surgery or procedure.

After you have been sedated, it is common to have lapses of memory, slowed reaction time and impaired judgment. If you leave the hospital within 24 hours of your surgery or procedure, have someone drive you home or to your place of lodging. And for the rest of the day:

- Rest.
- Do not drive or operate motorized vehicles or equipment.
- Do not return to work or school.
- Do not take on responsibility for children or anyone who depends on your care.
- Do not use exercise equipment or take part in rough play or sports.
- Do not drink alcoholic beverages.

## What to bring to the hospital or outpatient area

- A list of all medications you take or medications in their original bottles. Include prescription, over-the-counter, herbal and dietary supplements, vitamins, etc., with dosages and how often you take them. If you use inhalers or eye drops, bring them with you.
- A list of medications and other materials (for example, latex, iodine or tape) that you are allergic to or that have caused adverse reactions.
- All current insurance cards, pharmacy and drug benefit cards, medical device identification cards, and driver's license or other photo identification card.
- A copy of your advance directive or living will if you have one.
- Information about your pacemaker/internal defibrillator if you have one.
- Any special equipment that you use. Mark each piece with your name. Examples of equipment include:
  - Assistive devices such as a cane, walker or crutches.
  - Personal devices such as a prosthesis.
  - CPAP (continuous positive airway pressure) machine or BiPAP (bilevel positive airway pressure) machine and mask for sleep apnea.
  - Diabetes supplies such as insulin sensor equipment, infusion sets and reservoirs for insulin pump, insulin pump tubing and extra glucose sensor.
  - The remote that can control an internal device.
- Items to help pass the time while you wait and to comfort you such as books, music, magazines or a hobby item.
- Comfortable, loose-fitting clothing and walking shoes or nonskid slippers to wear during your hospital stay if you are staying overnight. Bring comfortable clothing to wear home.
- Any needed personal care items or supplies such as ostomy supplies.

Leave jewelry and other valuables at home. **Remove all jewelry and body piercing jewelry before arriving on the day of surgery.** If needed, see your jeweler or piercing specialist who can help you remove your rings or body piercing jewelry. Jewelry that is not able to be removed may be cut off in the operating or procedure room.

**Do not bring children or family members who require supervision.** For safety reasons, they may not be left unattended during your surgery or procedure.

If you plan to bring your service animal, arrange to have someone who knows your animal supervise the animal while you have your surgery or procedure.

# The Day of Your Surgery or Procedure

Come to the location you have been told at your report time. During check-in, staff members process your paperwork and make preparations for your surgery or procedure.

Staff members can tell you about hospital or clinical area visiting hours and visitor restrictions. For example, to prevent the spread of infection, anyone who has symptoms of a cold or flu may not be allowed to visit.

You are taken from the admissions area to an admitting area where a member of your care team gathers information from you. This may include your health history and questions about your health care needs.

Preparations for your surgery **may** include:

- Recording your height, weight and vital signs (blood pressure, heart rate, pulse, temperature and breathing rate).
- An enema prep.
- A blood sugar test.
- Urinating (emptying your bladder) or inserting a urinary catheter (tube) to drain urine during and after your surgery or procedure.
- An intravenous (IV) line — a thin needle placed into a vein in your arm or hand that is connected to tubing and bag of fluid near you. The IV supplies your body with fluids, medications or blood as needed before, during and after surgery. In some cases, the bag of fluid is not hooked up to the IV line until you are in the operating room.

Your surgical team does its best to determine your report time to help avoid long wait times, but understand that your report time is not your surgery start time. Delays or changes in the schedule of the procedure or operating room can affect your surgical time. The time you are away for your procedure or surgery includes time spent in the preoperative waiting area, operating room and recovery room.

## **If you stay in the hospital overnight**

The hospital has a limited number of private rooms. If you request a private room but one is not available, you may be placed in a semiprivate room. Tell your nurse if you want a private room. When one is available, you are notified. Please note that there is an additional fee for a private room if there is no medical reason for needing one.



## **Preoperative waiting area**

You will be taken to the preoperative waiting area. Family members or friends may not go with you to this area. Rather, care team members can explain where they may wait during your surgery or procedure. Check with the hospital or clinical area for visitor restrictions.

Before your surgery or procedure, members of your health care team:

- Verify your name and confirm surgery or procedure information.
- Ask you to sign a consent form if you haven't already.
- Mark the surgical site or place a band on your wrist that verifies the location and type of procedure.
- Review your health history.
- Talk with you about what to expect regarding sedation or anesthesia.
- Make sure all surgical preparations are complete.

You stay in the preoperative waiting area until the operating or procedure room is available.

## **Operating or procedure room**

The operating room (OR) or procedure room provides a safe, sterile environment for your surgery or procedure. The room may seem very busy and crowded with members of the surgical team, machines, equipment and a surgical bed. Once you are lying down, anesthesia is started and your surgery begins. You are monitored closely during surgery.

A member of the health care team keeps your family members informed of your progress. If family members leave the waiting area, they should leave contact information at the desk. Care team members can tell family members about nearby places to eat, shop or relax.

## **After your surgery or procedure**

After your surgery or procedure, you may be taken to the Post Anesthesia Care Unit (PACU), also called the recovery room. Your family is told when you are there.

Health care team members monitor your vital signs, alertness, pain or discomfort, and the need for medications. How long you stay in the PACU is determined by the:

- Time it takes for you to awaken.
- Anesthetic you received.
- Type and amount of medications you received.
- Amount of discomfort you are having.
- Room assignment if you are staying overnight in the hospital.

The average stay in the PACU is one to two hours but it could be longer. If there is a delay, your family members can check with the nursing staff or unit coordinator.

When your care team determines you are ready to leave the PACU, you are taken to a room where your family members or friends may join you after your care team gets you settled in the room. A member of your surgical team may visit you and your family to discuss your surgery and answer your questions.

**Please note:** If you are not taken to the PACU after your procedure, you are taken to the outpatient unit to recover.

After your surgery or procedure, you may have:

- **A dry, sore throat.** This may be caused by the tubes used to help you breathe during your surgery or because you have had nothing to eat or drink for several hours.
- **Sleepiness or forgetfulness.** You may be sleepy and have trouble remembering the events on the day of surgery. This is normal after general anesthesia or IV sedation.
- **Nausea or vomiting.** These conditions can be caused by pain or may be a side effect of some medications. Tell your nurse if you are nauseated. Anti-nausea medications and other therapies such as essential oils or acupressure are available if the symptoms persist.
- **Pain or discomfort.** While in the hospital, you may be asked to rate your pain on a scale from 0 to 10, where 0 means no pain and 10 means significant pain. Rating your pain helps you and your health care team manage your pain more effectively. Medication may not relieve all of your pain, but it can help you feel more comfortable. Taking pain medication decreases pain which, in turn, eases tension, helps you increase movement and physical activity, improves sleep, and may help you recover more quickly. Talk with your care team about any other therapies that may be useful to ease pain.

# Care After Your Surgery or Procedure

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## Exercises

Doing certain exercises after your surgery or procedure – while in the hospital and after you leave the hospital – is important to your recovery. The exercises can promote blood flow and speed your recovery as well as help prevent complications such as pneumonia or blood clots. If possible, learn and practice these exercises before surgery.

### Deep breathing

To deep breathe correctly:

1. Use your abdominal muscles, not just your chest muscles, to breathe in through your nose as slowly and deeply as possible.
2. Hold your breath for five to 10 counts.
3. Let your breath out through your mouth, slowly, evenly and completely.
4. Relax.
5. Do these steps nine more times.

Your health care team may teach you how to use a device that helps you breathe deeply.

### Coughing

After some surgeries and procedures, coughing is not advised. Talk with your health care provider about any coughing restrictions.

To cough correctly:

1. Use a pillow or small blanket to support your abdomen, especially if you had abdominal surgery.
2. Take a slow, deep breath in through your nose. Concentrate on fully expanding your chest. Slowly breathe out through your mouth. Concentrate on feeling your chest sink downward and inward.
3. Take a second breath like you did in step 2.
4. Take a third deep breath, but this time hold your breath for a moment. Then cough vigorously. As you cough, concentrate on forcing all of the air out of your chest.
5. Do these steps two more times.

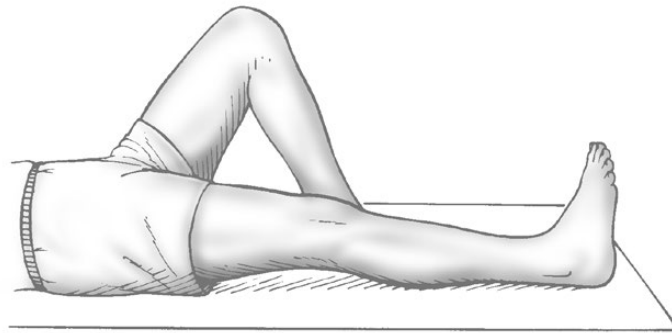
## Leg exercises

After some surgeries and procedures, doing leg exercises is not advised. Talk with your health care provider about any leg exercise restrictions.

To do leg exercises correctly:

1. While lying on your back with your legs stretched out flat on the bed, slowly slide your feet toward your buttocks to bring your knees up as far as possible.
2. Then slowly return your legs to the starting position.
3. Relax.
4. Do these steps five times an hour or as instructed by your health care provider.

You also may bend one knee at a time, alternating bending and stretching. See Figure 1.

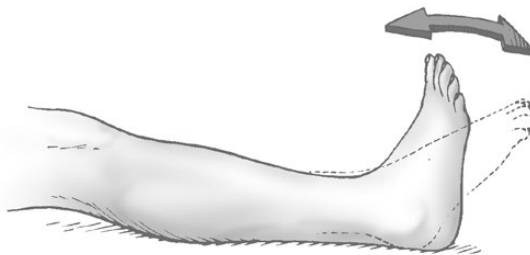


**Figure 1.** Leg exercises

## Foot exercises

To do foot flexes correctly:

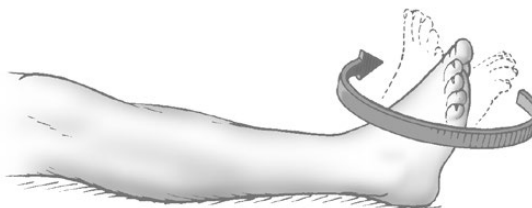
1. While lying on your back with your legs stretched out flat on the bed, push your toes toward the end of the bed. See Figure 2.
2. Then pull your toes toward the head of the bed.
3. Relax.
4. Do these steps nine more times.



**Figure 2.** Foot flexes

To do foot circles correctly:

1. While lying on your back with your legs stretched out flat on the bed, circle one foot one way. Then circle it the other way. See Figure 3.
2. Do step 1 with your other foot.
3. Circle each foot a total of 10 times.



**Figure 3.** Foot circles

## Walking

You may be encouraged to walk the same day as your surgery or procedure. Walking promotes circulation, speeds recovery and helps relieve gas pain. Slowly increase the time and distance you walk.

For your safety and to prevent a fall, ask your nurse to help you. You may not be as strong or steady as you think. Your care team members may use safety equipment to help you get in and out of bed and with walking. Continue to ask for help until your care team tells you it is safe for you to move without help.

Continue walking after you leave the hospital unless you are told otherwise by your health care team. Have someone help you or use a walker, if needed.

## Diet and fluids

Your surgery or procedure, medications, anesthetics, and other factors may affect your digestive system. It may take a few days for your digestion to return to normal.

If you are in the hospital, you may not be able to have fluids or food by mouth for a few days. During this time, you may have one or more IV lines that provide fluids and medications. When you are allowed to eat, your diet gradually progresses from liquids to solids. Ask a dietitian or other care team member about how to make healthy food choices.

## Bowel movements

Three or four days may pass before you have a bowel movement. Walking helps your bowels return to their normal function. Your care team also may recommend using medication or other strategies to help.

If you are in the hospital, tell your nurse when you begin to pass gas or have a bowel movement.

## Preventing infection

To help prevent infection, keep all incisions clean and dry. Follow the instructions you are given about when you may bathe or shower.

Good hand hygiene, which involves cleaning and sanitizing your hands, is one of the most important ways to reduce the spread of infection. It is especially important to clean your hands:

- Before and after touching any surgical wound or body fluids.
- Before eating.
- After using the bathroom.
- After blowing your nose, sneezing or coughing.
- After touching any pets.

Everyone who has contact with or cares for you in the hospital or at home should wash their hands before and after being in your room.

Check daily for signs and symptoms of infection that may include:

- Temperature of 100.4 degrees Fahrenheit (38 degrees Celsius) or greater.
- Chills.
- Increased swelling, tenderness or redness at the surgical site.
- Increased pain or pain not relieved by pain medications.
- Cloudy drainage or oozing, or bad-smelling odor coming from the surgical site.

If you have any of these symptoms, call your health care provider immediately.

# Dismissal From the Hospital or Outpatient Procedure Area

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How long you stay after your surgery or procedure depends on several factors, including whether:

- You can drink liquids without feeling nauseated.
- You can walk or safely move about.
- You can pass urine (exceptions happen depending on the procedure).
- Your discomfort is adequately controlled.
- You can care for yourself, have someone to help care for you, or have arranged for assisted care. If you need help, ask your health care provider about home health nursing or recovery care arrangements.

A member of your health care team reviews your dismissal instructions with you before you leave. Be sure to take the dismissal instructions with you. The instructions may include:

- Activity restrictions.
- Medication and medical supply instructions.
- Dietary changes or restrictions.
- Special equipment information.
- Incision care.
- Return appointment or follow-up information.
- Home health nursing information or other recovery care arrangements, if needed.
- Contact information for questions or concerns.

# Recovery

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Follow the instructions that you were given before you left the hospital or outpatient procedure area.

Recovery is a gradual process. Allow yourself time to recover after your surgery or procedure. To help with your recovery and speed healing:

- Eat a healthy, well-balanced diet. Drink enough fluids to stay well-hydrated.
- Get an adequate amount of sleep.
- Make time to relax every day.
- Be as active as you can while following your care team's recovery instructions, especially any activity restrictions. Slowly increase your activities to gain strength.

Let family and friends help you if you need it.

If you have any questions or concerns, contact your health care provider.

**Your health care provider's phone number** \_\_\_\_\_

**Other contact numbers you may use** \_\_\_\_\_



# Notes

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# Notes

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Mrs. Lips, a resident of San Antonio, Texas, was a loyal Mayo Clinic patient of more than 40 years and a self-made business leader who significantly expanded her family's activities in oil, gas and ranching. Upon her death in 1995, Mrs. Lips paid the ultimate compliment by leaving her entire estate to Mayo Clinic. By naming the Barbara Woodward Lips Patient Education Center, Mayo honors her generosity, her love of learning, her belief in patient empowerment and her dedication to high-quality care.

*This material is for your education and information only. This content does not replace medical advice, diagnosis or treatment. New medical research may change this information. If you have questions about a medical condition, always talk with your health care provider.*

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