



Beebe Healthcare SURGERY GUIDE: WHAT TO EXPECT

**Thank you for choosing
Beebe for your care!**

Your surgery date:

Your surgery will be in ...

- Lewes at our main campus
Complimentary Valet Parking Mon.-Fri. 6:30 a.m.–5:30 p.m.
- Rehoboth at our Outpatient Surgery Center



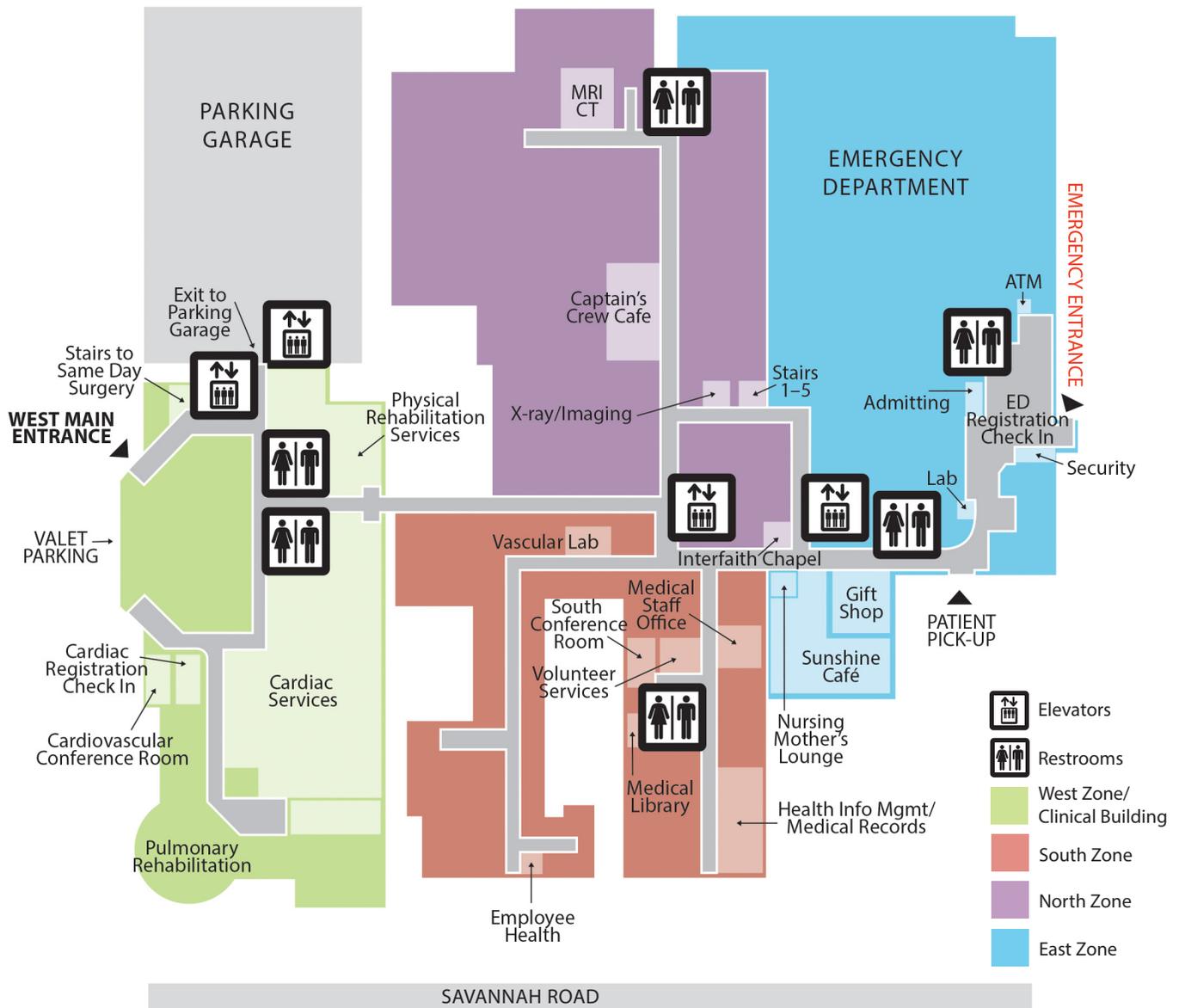
CREATING THE NEXT
**GENERATION
OF CARE**

424 Savannah Road • Lewes, Delaware
BeebeHealthcare.org • (302) 645-3300

Beebe Healthcare is a tobacco free facility.

Beebe Healthcare–Lewes, Medical Center

First Floor Map



Beebe Outpatient Surgery Center (BOSC)

18941 John J. Williams Hwy. (Rt. 24)
 Rehoboth Beach, DE 19971
 (302) 644-6992



Beebe Healthcare - Main Entrance

424 Savannah Rd
 Lewes, DE 19958
 (302) 645-3300

Inpatient and Outpatient Surgery Guide

FOR THE PAST 100 YEARS, THE STAFF AT BEEBE HEALTHCARE HAS BEEN SETTING NEW STANDARDS OF EXCELLENCE AS WE BRING YOU THE BEST IN QUALITY HEALTHCARE.

The information contained here is designed to help answer the many questions you may have after you are scheduled for surgery.

PREPARING FOR SURGERY

• 4 weeks prior to surgery:

- >If you develop a cold, sore throat, fever, diarrhea or other illness contact your surgeon's office.
- >Plan to have artificial nails removed prior to surgery, this includes gel nails. Studies have shown there are more germs under artificial nails and they may interfere with monitoring equipment.
- >You will be expected to remove toenail and fingernail polish before arriving to the hospital.
- >Joint replacement and Inpatient spine surgery patients are strongly encouraged to attend the preop education classes. Please contact the Orthopaedic Service Line Nurse at (302) 645-3104 to schedule a class.

• 2 weeks prior to surgery:

- >If you are taking blood thinners be sure to check with your surgeon and/or your heart doctor to discuss.
- >Contact your surgeon's office to determine if you should stop taking weight loss medications.
- >Stop all vitamins, herbal/mineral supplements and weight loss medications two weeks prior to surgery. Do **NOT** stop any prescription medications unless instructed to do so.

• 3–7 days prior to surgery:

- >Registration staff will call to verify personal and insurance information and discuss your insurance responsibility.

• 4 days prior to surgery:

- >Start following the bathing instructions. (See page 5 of this booklet.)

• 1 day prior to surgery:

- >You will receive a phone call after 1 p.m. with the time you should arrive for surgery.
- >Please note: You will be notified by phone if the time of your surgery needs to be changed to accommodate emergent cases.

- **Write down all questions prior to surgery.** Space is provided on page 5 of this booklet.

PRE-SURGICAL INTERVIEW

You will receive a telephone call from our Pre-Admission Testing (PAT) department nurses at least a day before your surgery is scheduled. You will be asked about your exercise tolerance, health history, surgical/procedural history, and your medications. It may make it easier if you prepare a list. You will also be asked the names and telephone numbers of all specialists you currently see.



- Allow 15–30 minutes for this call to review:
 - >Current medications/supplements
 - >Medical surgical history
 - >Anesthesia history
 - >Confirm procedure, side/site
 - >Orders for labs/EKG/chest X-ray
 - >Bathing instructions, (**see page 5**)
 - >Medications to take day of surgery
 - >When to stop eating/drinking
- If you have any questions or concerns, speak up!

NIGHT BEFORE SURGERY

- Shower or bathe
- Follow any special bathing instructions that your doctor provided
- Brush your teeth
- Follow any special medication instructions
- Get a good night's rest

DAY OF SURGERY

BEFORE YOU COME TO THE HOSPITAL:

- Shower or bathe
- Brush your teeth
- Wear clean, loose and comfortable clothing
- Remove all jewelry/piercings & leave at home
- Do not wear makeup or lotion
- Wear glasses—do not wear contacts
- Be prepared to tell the nurse the dose and time you took the last dose of each medication.



LOOK FOR THIS ICON AT BEEBEHEALTHCARE.ORG FOR MORE INFORMATION.

WHAT TO BRING WITH YOU:

- List of medications (name, amount/dose, frequency)
- Any paperwork from your surgeon or lab
- Photo ID and insurance card (family members must have a picture ID)
- Copy of Living Will or Medical POA
- Brace, sling, or crutches (if applicable)
- Co-payment/deductible (if applicable)
- If you use a CPAP, please bring it and leave it in the car until after surgery. If you are being admitted to the hospital after surgery, your family member can bring it to your room after you are settled.
- You will not be able to take any personal belongings with you to surgery.

EATING AND DRINKING:

ADULT PATIENTS:

- Clear liquids:
 - > May have the following clear liquids up to 2 hours prior to your surgical arrival time: Water, clear juice (such as apple or cranberry juice), soda, plain tea/ coffee (no cream/milk), popsicles, kool-aid, plain jello
 - > No alcoholic drinks after midnight
- Solids:
 - > Must stop all food by midnight the day prior to surgery

PEDIATRIC PATIENTS:

- Clear liquids:
 - > May have the following clear liquids up to 2 hours prior to your surgical arrival time: Water, clear juice such as apple or cranberry juice), soda, plain tea/ coffee (no cream/milk), popsicles, kool-aid, plain jello
- Breast milk:
 - > May have up to 4 hours prior to surgical arrival time
- Infant formula:
 - > May have up to 6 hours prior to surgical arrival time
- Solid food:
 - > Must stop all food by midnight the day prior to surgery

•OTHER

- Oral medications may be taken with sips of water prior to surgery (Sip of water= less than ¼ cup)
- Patients may brush their teeth and rinse with water on the day of surgery
- You may chew gum up to 2 hours prior to surgery arrival time

ARRIVING FOR SURGERY

Options for parking at the Medical Center in Lewes

- Free Valet Parking is available Monday–Friday from 6:30 a.m.–5:00 p.m. at the Main entrance of the hospital.

- Patient parking: Enter the parking garage using the Main entrance.
 - > Park on the 2nd level and go to the doors marked Same Day Surgery
 - > Go up 5 steps and turn to the right for the registration area. If you cannot climb the 5 steps: Park on the 1st level of the garage, enter the hospital from the 1st floor—Main entrance
 - > There is an elevator across from the information desk that can take you to the registration area on the second floor.
- Please have your photo ID, insurance cards, and lab envelope ready to present.
- After completing your registration you will be directed to the Surgical Services Waiting Room adjacent to registration.
- When you register, you will be given a card with a number for your family to identify you on the Tracking Board.

PRE-OPERATION AREA (PRE-OP)

- Each person caring for you should ask you to state your name and date of birth, what surgery you are having, and on which side of your body. Expect to be asked your name and date of birth often.
- Vital signs, labs (if indicated), blood glucose (if diabetic), urine pregnancy test (if female of child bearing age) and possible drug screen will/may be performed.
- To reduce germs, before surgery you may be asked to use special wipes to clean you skin and to swab your nostrils with betadine.
- You will be asked to change into a hospital gown, remove any personal clothing, review your medications including last dose and time of each and your medical/surgical history and review or sign the surgical consent.
- An IV will be started and if ordered medications will be given. Small children usually do not receive an IV before surgery.
- Your surgeon will visit to answer any last minute questions and have your operative site marked.
- Your anesthesia provider will visit to discuss anesthesia, answer questions and sign consent.
- The nurse caring for you in the operating room will visit with you to verify patient ID, procedures, allergies, etc.
- If needed, hair in the area of your surgery will be removed with clippers. A razor will not be used.

Pre-operative Bathing Instructions

You play a key role in your own health. Before surgery, it is important to reduce the number of germs on your skin. The instructions below are provided to help you carefully wash your skin before your surgery.



Use soap and a special soap called chlorhexidine gluconate (CHG). A common name for this soap is Hibiclens®, but any brand CHG is okay to use. Do the pre-operative bath/shower, one time a day, for **4 days** before surgery and then take your

last bath/shower the day of your surgery, before coming to the hospital. If you have any questions, please call your doctor.

BEFORE YOU BATHE OR SHOWER:

- Read the directions and warnings on the CHG product label.
- Do not use the product if you are allergic to CHG or other ingredients listed. Please tell your doctor.
- Make sure you clean your belly button and under skin folds.

WHEN YOU BATHE OR SHOWER:

1. Wash your hair as usual with your regular shampoo. Rinse hair and body thoroughly to remove any shampoo residue.
2. Wash your entire body with soap. Apply the soap directly to your skin and wash gently using a clean wash cloth. Allow the soap to remain on your skin for 1 minute before rinsing your body. **Use a clean wash cloth and towel each time you bathe/shower.*

3. Wash your entire body from the neck down with CHG soap. Apply just enough CHG to cover the skin and wash gently using the clean wash cloth. Allow the CHG to remain on your skin for 1 minute before rinsing your body. **Warning: Do not apply CHG to the face, mouth, ears, genitals, or open wounds.**



4. Rinse your body thoroughly with warm water.
5. Pat yourself dry with a clean, soft towel. Do not apply lotions, powders, or perfumes.
6. Put on clean clothes.

OTHER INFORMATION:

- CHG soap may be provided by your doctor. You can purchase 4% CHG soap at local pharmacies.
- Check the boxes to help you remember. Start on this day

Day 1 _____

Day 2

Day 3 (Do not shave area where surgery will take place until after your surgery. Follow your surgeons instructions.)

Day 4

Day of surgery _____

Questions for Your Surgery Team

Pre-operative Instructions for Patients with Diabetes

General Instructions:

- If you have a blood glucose meter at home, test your blood sugar (glucose) when you wake up on the morning of surgery and every 4 hours until you arrive at the hospital.
- If you have a low blood glucose during the time you are fasting, drink 4 ounces (1/2 cup) of a clear sugar-containing beverage such as apple juice or ginger ale (not the diet type). It is very important to inform the surgical staff about this when you arrive.
- If you take insulin, bring your insulin vial or insulin pen to the hospital.

Instructions for adjusting your diabetes medications for surgery: (If you have received different instructions from your Diabetes Care Provider, please discuss them with the nurse providing your pre-operative instructions)

One day before surgery:

- While still eating a normal diet, take all your usual diabetes medications including insulin up to and including doses taken with supper
- If you take Lantus/Toujeo/Levemir/Tresiba/ NPH once a day at bedtime: take 1/2 your usual bedtime dose
- If you take Lantus/Toujeo/Levemir/Tresiba/ NPH insulin **two times** daily, take the full bedtime dose

On the morning of surgery:

- Do not take any oral diabetes medications (pills); do not take Byetta/Victoza/Bydureon/Trulicity or Symlin injections; Do not take rapid acting insulin (Humalog/Novolog/Apidra) or Regular insulin (Humulin R/Novolin R)
- If you take Lantus/Toujeo/Levemir / Tresiba insulin in the morning-take 1/2 your usual morning dose. Do not take any other type of morning doses of insulin
- If you take pre-mixed insulin (for example: HumaLIN 70/30; HumaLOG 75/25; or NovoLOG 70/30), do not take it at home, but bring the insulin vial or insulin pen with you. You will receive a portion of your insulin after you arrive at the hospital.

If you are on an insulin pump:

- Change your insertion site and reservoir **the day before surgery** and bring extra supplies with you (insertion set, reservoir, extra batteries)
- For surgery involving your abdominal area, place the pump catheter in a site other than your abdomen (such as arm, hip or thigh).
- Continue your usual basal rates or adjust them according to your Diabetes Care Provider's instructions
- Remind the surgical staff that you are wearing an insulin pump when you arrive

Medication List

MEDICATION	DOSE	HOW OFTEN IS MEDICATION TAKEN?
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Allergy List

MEDICATION AND FOOD

AFTER SURGERY

- Your surgeon may speak with your family in the waiting room or call them on the phone.
- You will be taken to the Post Anesthesia Care Unit (PACU) after your surgery, where you will awaken from anesthesia and be checked on frequently. From here you will be transferred to the same day surgery area to prepare to go home, or you will be transferred to a room if you are being admitted. The length of PACU times varies per individual.
- If you are being discharged to go home after surgery, your family will be able to see you in Same Day Surgery after the procedure.
- Parents of children having surgery will be able to be in the recovery room.
- The nurse will evaluate you, give you any medications needed and discharge you to go home or to your room.
- You should expect some pain after surgery, but we will make every effort to safely minimize your pain and keep you comfortable. (See page 10 for more information on pain management.)
- When you are discharged, you will be given written instructions that are specific for your procedure as well as a list of your medications that you should continue to take.



We want the best outcomes for our patients, so please make sure you clearly understand all instructions and ask questions before leaving.

If you experience ANY surgery related problems after your discharge, contact your physician immediately for advice.

- **An adult (over age 18) must drive you home.**
- **Parents must remain in the building at all times during your child's surgery. It's best to have two adults with child for drive home.**
- We recommend that a responsible adult be with you at home for the first 24 hours after outpatient surgery.
- We may call you 24-48 hours after your surgery to see how you are doing.
- When you are asked to take a medication, ask what it is, why you're taking it, and possible side effects.

INPATIENT SURGERY PATIENTS:

All of the above apply, plus:

- Bring to the hospital the following items with you:
 - >bathrobe
 - >basic toiletries
 - >reading material
 - >Joint replacement patients bring a change of clothes that are comfortable and loose fitting.
 - >Non-skid shoes or slippers with closed backs.
- Please leave all valuables at home with the exception of items listed under **"What to Bring With You Day of Surgery"** found on page 4.
- For your safety and well-being, please allow us to assist you when getting out of bed. (See page 9 for more information on Safety Guidelines for preventing falls.)
- Your family members will receive instructions to come to your room after the nurse settles you in.

VISITORS

We welcome and encourage visitors.

- For the privacy of all of our patients, we may limit the number of visitors at one time.
- Small children cannot be left unattended in the SDS waiting area, and cannot be a visitor in the PACU.
- Cell phone charging station and free WIFI are available.

How to Prevent Infections

WHAT IS A SURGICAL SITE INFECTION (SSI)? A surgical site infection is an infection that occurs after surgery in the part of the body where the surgery took place. Most patients who have surgery do not develop an infection. However, the Centers for Disease Control and Prevention (CDC) reports that infections develop in about 1 to 3 out of every 100 patients who have surgery. Some of the common symptoms of an infection are:

- Redness and pain around the area where you had your surgery
- Drainage of cloudy fluid from your surgical wound
- Fever

WHAT ARE SOME OF THE THINGS THAT BEEBE HEALTHCARE IS DOING TO PREVENT SURGICAL SITE INFECTIONS?

- All healthcare providers are cleaning their hands with soap and water or an alcohol-based hand rub before and after caring for each patient.

- If needed, hair in the area of your surgery will be removed with clippers. A razor will not be used.
- Antibiotics may be given to you before your surgery and, if given, will be stopped within 24 hours after your surgery.



What can you do to prevent surgical site infections?

BEFORE YOUR SURGERY

- Health problems such as allergies, diabetes, and obesity could affect your surgery and your treatment. Tell your doctor about all medical problems you may have.
- **Quit smoking.** According to CDC, patients who smoke are at greater risk for infections. Delaware offers free programs through the Delaware Quitline. Call (866) 409-1858 for information.
- Do **not** shave near area where you will have surgery. Shaving with a razor can make small openings in your skin and make it easier to develop an infection.
- Follow the bathing instructions provided by your surgeon. See page 5 for details.
- Make sure you have clean sheets on your bed when you return home.



IN THE HOSPITAL

- Make sure that your healthcare providers clean their hands before examining you. If you do not see your providers clean their hands, **PLEASE ASK THEM TO DO SO!**
- Visitors should also wash their hands before and after visiting you. If you do not see them clean their hands, **ask them to do so.**
- Family and friends who visit should not touch the surgical wound or dressings.

AT HOME/AFTER SURGERY

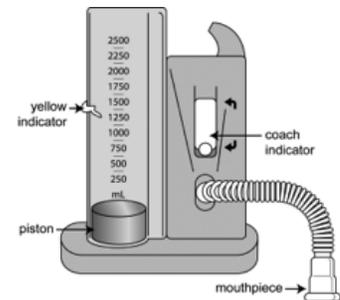
- Make sure you understand how to care for your wound, including dressing changes before you leave the hospital. If instructed, follow your physician's directions for changing dressings.
- Before you go home, make sure you know who to contact if you have questions or problems after you get home.
- Always clean your hands before and after caring for your wound.
- **DO NOT** let your pet near your incision. **DO NOT** allow your pet to sleep with you until your doctor determines it is safe to do so.
- If you have symptoms of an infection, call your doctor immediately!

Your Doctor May Order You to Use an Incentive Spirometer

The Incentive Spirometer helps you get back to breathing your best, and avoid complications such as pneumonia or a collapsed lung. The Incentive Spirometer (IS) will show you how well you are breathing.

1. Sit upright, or as far upright as you can.
2. Breathe normally a few times.
3. After you exhale normally, close your lips around the mouthpiece.
4. Breathe in slowly & steadily through your mouth until your lungs are full. The volume indicator will rise to show how much air you have breathed in.

5. Hold your breath until the volume indicator goes back down to the bottom.
6. Breathe out slowly.
7. Take a few normal breaths
8. Repeat steps 3–6 approximately ten times per hour & cough to help clear the mucus out of your lungs.



Beebe Healthcare participates in the **American College of Surgeons National Surgical Quality Improvement Program (ACS NSQIP)** to help identify areas where we can improve our surgical care and patient safety. One piece of this program is to monitor patients for 30 days after their surgery.

If you are selected, from a random sampling, you may receive a brief phone call from our NSQIP nurse. She will ask you a few questions, such as if you had any problems

after your surgery or if you had an unplanned return to your doctor's office.



Your participation is greatly appreciated and will directly impact the success of our results and quality efforts.

Beebe's Falls Prevention Program

Everyone having surgery is at risk to fall due to the surgery, the medications, and an unfamiliar environment. You will have a yellow armband on to signify that you are at risk for fall until you are no longer at risk for falling.

Safety Guidelines for Preventing Falls

- When you need assistance, use your call light and wait for staff to arrive to help you.
- Remain lying or seated while waiting for assistance. Please, be patient. Someone will answer your call as promptly as possible.
- Walk slowly and carefully when out of bed. Do not lean or support yourself on rolling objects such as I.V. poles or your bedside table.
- If needed, be sure to use your walker or cane.
- Staff should be checking on you hourly and encouraging you to use the toilet. Take advantage of this time to avoid having to go urgently to the restroom without assistance.
- It is our policy to take you to the bathroom and stay with the you and monitor you while in the bathroom. Studies show that over half of all falls happen when patients are trying to, or using the bathroom. Falling in the bathroom can result in serious injuries, even death, due to hard surfaces.
- Always wear non-skid shoes, non-skid slippers, or non-skid socks.
- Never attempt to get off a stretcher or out of a wheelchair unaided.
- Staff, family members and visitors should make sure that phone, call bell, water, and personal items are within your reach before leaving the room.
- Keep your nurse and doctor informed on how you are feeling. If you feel weak, dizzy, or unsteady, let them know and do NOT get out of bed.

Post-operative Pain Management

We care about your comfort and are committed to managing your pain after surgery.

In order to be successful with managing your pain, it is important that you communicate with your health care team. You are the only person who knows what your pain is, and if the medication that your surgeon has ordered is doing the job!

The Pain Scale is used to gauge the intensity of your pain/discomfort before and after you receive pain medication. Please take a minute and become familiar with YOUR acceptable level of pain. Your pain will be assessed frequently throughout your hospitalization.

- **0: no pain**
- **1–3: Mild pain**—you can feel it. Able to focus on reading, TV.
- **4–6: Moderate pain**—Losing focus. Thinking about pain.
- **7–9: Severe**—Unable to focus on anything other than pain
- **10: worst possible pain**



Your surgeon will order pain medicine to be given after your surgery. You will progress to oral medications within a day or two after surgery. Please tell your nurse if:

- The pain medicine doesn't decrease your pain. Although we can't guarantee that you will be 'pain-free', we want your pain to be under control so you can participate in your therapy.
- If the pain medicine makes you feel nauseated, we can give you medication to control those symptoms, or we can call the surgeon to obtain a different medicine.
- If you feel constipated, you will be encouraged to eat a fiber rich diet and drink plenty of fluids, but sometimes you need a little help. Your surgeon can order certain medications to help.



Pain Management

Opioid Use:

- Slows down your recovery
- Causes dizziness
- Causes accidental overdoses
- Is addictive
- Makes it hard or painful to have a bowel movement
- Opioids can make people feel nauseated

By using other types of pain medication the negative effects of opioids can be avoided.

- Studies have shown that over 70% of prescribed opioids go unused.
- Studies also show that 6-10% of surgical patients become new addicted opioid users.

Watch the YouTube video, **"The Slippery Slope of Opioid Use"** for more information

Tylenol, Motrin, Advil and Aleve pain medications are recommended and safe when taken as directed. These types of pain medications may be all you need to control your pain. Do not take if you are allergic to or been told not to take these medications.

If you are concerned about any of the medications, or are still experiencing pain, talk with your surgeon.

Unused medications should always be secured and discarded properly. Delaware offers many options for disposal of these medications, including a number of medication take-back sites. Please visit DelawareHealthyHomes.org for a list of take-back locations

Pain Control Without Medicine

Distraction can help you cope with mild pain and anxiety. Listen to your favorite music, play games, or other engaging activities to help take your mind off of your pain.

Guided imagery can help you direct and control your emotions. Close your eyes, gently inhale and exhale. Picture yourself in the center of somewhere beautiful. Feel the beauty surrounding you.

Before Your Surgery

Please :

- Put clean sheets on your bed.
- Bring picture ID, insurance cards, lab envelope
- If you have **dentures**, please bring a container to store them in during your surgery.
- If you use **hearing aids**, please wear them and bring a container to store them in during your surgery.
- If your doctor has given you Bactroban (Mupiricin), apply the ointment to your nostrils twice a day, starting _____.**
- Remove jewelry, makeup, artificial nails, or nail polish.
- Remove **contacts**. If needed, please bring glasses and a protective case.
- Stop** all foods by midnight the day prior to surgery.
- May have **CLEAR** liquids up to 2 hours prior to your surgical arrival time (see page 4 for details)

Medications

TAKE these the morning of your surgery:

STOP these medications on this date: _____

Patient Tracking Number

You can follow your family member/friend's progress through the surgical process with the aid of the "Tracking Board"—the color monitor in the waiting room. You will be given a number that identifies the patient and protects their privacy. The status will change as they move from one area to the next. The areas are as follows:

Pt in Waiting Room—This lets the pre op nurses know that you have arrived. The patient will be brought to the PreOp area when it is time to prepare them for surgery.

Pt in PreOp—The patient is being prepared for his/her procedure. The surgical team will interview the patient before surgery. Two family members will be permitted to join the patient after the PreOp process is complete.

Procedure in Progress—The patient is in the operating room for his/her procedure during this phase. The operating room nurse may call out to the receptionist or volunteer to keep you informed if the surgery is lengthy.

Pt in PACU I—Once the procedure is completed the patient will be moved to the recovery area or PACU. Patients that will be staying overnight will be moved to their room from this area. Patients that will be going home will be moved from this area to PostOp once they are fully awake and stable.

Pt in PostOp—The patient will be discharged from this area once he/she meets discharge criteria. You will be able to be with them in this area as soon as the PostOp nurse alerts you.

Bring this booklet with you to the hospital or ambulatory surgery center.

OUR VISION Our vision is for Sussex County to be one of the healthiest counties in the nation.

OUR MISSION Beebe Healthcare's charitable mission is to encourage healthy living, prevent illness, and restore optimal health with the people residing, working, or visiting the communities we serve.

Contact Us

Beebe Healthcare

424 Savannah Road
Lewes, DE 19958
(302) 645-3300
BeebeHealthcare.org

Beebe Outpatient Surgery Center

18941 John J. Williams Hwy. (Rt. 24)
Rehoboth Beach, DE 19971
(302) 644-6992

Surgical Pre-Admission Testing Nurses

(302) 645-3366 • (302) 645-3131 • (302) 645-3689
Monday–Friday, 8 a.m.–5:30 p.m.

Pre-Arrival Registration

(302) 645-3502 • (302) 645-3308
Monday–Friday, 5:30 a.m.–5 p.m.

Patient Financial Services

(302) 645-3546
Monday–Friday, 8 a.m.–4:30 p.m.

We would like to thank you for choosing us for your care. Our friendly and professional surgical staff are here to ALWAYS provide you caring, compassionate, and safe care.

For Beebe Surgery information, go to www.beebehealthcare.org/patient-surgery-information.



Complimentary Valet Parking at Lewes Campus
Monday-Friday 6:30 a.m.–5:30 p.m.

Beebe Healthcare is a Tobacco Free Facility

REVISED May 2019