

Kaiser Permanente Medical Center
Santa Rosa

Preoperative Instructions Information for Surgery

*Please bring this booklet to your
pre-surgical appointments.*



IMPORTANT
INFORMATION, FORMS, AND APPOINTMENTS
ARE LOCATED IN THIS BOOKLET



KAISER PERMANENTE®

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This booklet consists of both information and two tear-out forms as follows:

1. Pre-Admission Registration Form

Please bring this completed form to the admitting office before your day of surgery or fax it to (707) 571-4460.

2. Medications List

Please complete this form and bring it to your appointment with the pre-op nurse. If you do not have a pre-op nurse appointment, bring the form to the hospital on your day of surgery.

KAISER SURGICAL PATIENT APPOINTMENT INFORMATION REMINDER

Name: _____

Regular Physician: _____ Suite: _____ Date: _____ Time: _____

Surgeon: _____ Suite: _____ Date: _____ Time: _____

Anesthesiologist: _____ Suite: _____ Date: _____ Time: _____

Perioperative Nurse: _____ Suite: _____ Date: _____ Time: _____

Physical Therapy Appointment: _____ Suite: _____ Date: _____ Time: _____

Post-op Appointment: _____ Suite: _____ Date: _____ Time: _____

YOUR SURGERY DATE IS: _____

Please call 571-4670 between the hours of 12 and 3 p.m. one working day before your operation to receive the time of your operation. If surgery is scheduled on Monday, please call on Friday.

If you have any questions regarding the above appointments call the Surgery Schedulers at:

Orthopedic Patients 571-3002

Ophthalmology Patients 566-5338

All Other Patients Call 571-4672



**PERIOPERATIVE SERVICES FLOWSHEET
PATIENT ASSESSMENT**

Patient: Please list medications taken at home including prescriptions, over-the-counter drugs, vitamins, and herbs. Bring this list to your preoperative visit.

Name of Drug & Dose Includes vitamins, herbs, and all over the counter medications.	Time you take Medication/ Vitamins/Herbs	Reason for Taking	<i>For Admitting RN Use Only</i> Date: _____ Last time taken

CONTINUED ON REVERSE SIDE

Your pre-op day appointments will include visits with SOME, BUT NOT NECESSARILY, ALL OF THE PEOPLE and departments listed below. Please note that your visits may not occur exactly in the order described below.

Your Surgeon

As a final check before your operation, your pre-op day will typically begin with an appointment with your surgeon. When you leave your surgeon's office, you may be given an order form for tests. Please carry this with you to each of your appointments, as the people you see may need to include additional tests if needed.

Pre-op Nurse Educator

If you do not have a visit scheduled with a registered nurse, you will receive a telephone call. It may appear as a TAV on your appointments. The nurse will ask you questions regarding your present state of health, as well as past health problems. A nursing plan of care will be individually designed for you based upon your answers to those questions. The nurse will also provide information and answer your questions specific to your operation, including any specialized education for your specific surgery and postoperative care.

Anesthesiologist Consultation

The preoperative consultation is a key part of the anesthetic and surgical process. Depending on your age and medical status, your preoperative consultation with an anesthesiologist will either be scheduled one or more days in advance of your surgery, or it may be performed on the day of the surgery in the preoperative area. The anesthesiologist will review your medical and surgical history and perform any necessary physical examination. Indicated diagnostic tests are ordered and reviewed by the anesthesiologist. The type of anesthetic that is judged best for you will be discussed, including benefits, risks, and alternative techniques when appropriate. The anesthesiologist will answer your questions and address your concerns about undergoing anesthesia. Appropriate preoperative medication will be prescribed for nurses to administer prior to anesthesia.

Please note: If you are under 50 years of age and healthy, you will most likely not be scheduled for an advance appointment. However, if for any reason you wish to meet with the anesthesiologist in advance of the day of surgery, you are welcome to do so. Please let your surgeon know your desire and he or she will schedule you an appointment. The anesthesiologists are always delighted to see any patient who feels they would benefit from advance discussions and evaluation.

Health Education Department

You will have an opportunity to visit our Health Education Department to view a video presentation designed to familiarize you and your family with common procedures related to surgery and hospitalization. A departmental staff member will be available to answer your questions and direct you to other resources that are designed to help you relax and to anticipate a successful surgery.

Diagnostic Tests

The surgeon or anesthesiologist may order specific laboratory tests, X-rays, an electrocardiogram, or other preoperative diagnostic tests. They will give you the appropriate forms.

The Day Before Your Operation

On the day prior to your operation, it is very important that **you do not eat or drink anything after midnight, including water**, unless otherwise directed. If you have been specifically instructed to take certain medications that morning, please do so with one or two small sips of water. If your child is going to have an operation, you will receive instructions from the anesthesiologist as to when the child must stop eating and drinking. These instructions are designed to prevent any problems related to regurgitation or reflux of stomach contents during the surgical period.

Please note: Do not take diabetes medications (including pills or insulin) or any medications with blood-thinning effects (such as aspirin, coumadin, or nonsteroidal anti-inflammatory drugs such as ibuprofen) on your day of surgery unless specifically ordered by surgeon or anesthesiologist.

Please bathe or shower in the morning or evening before surgery using ordinary bath soap.

If you should develop a cold, a fever, or any other illness before your operation, or if you must cancel your operation, please use the telephone numbers in this packet to notify us.

Due to the complexities with surgery schedules, the time of your surgery may not be finalized until the day before your operation. Please call 571-4670 between the hours of 1 and 3 p.m., one working day before your operation to receive the time of your operation. If your surgery is scheduled on a Monday, please call the Friday before.

The Day of Surgery

Arrival Time and Place

Plan on arriving at the Admitting Department to register one to two hours prior to the time of your operation, unless we have specifically directed you otherwise. The Admitting Department is located on the first floor of the hospital.

Patient Responsibilities

Following the guidelines below will help to assure your operation proceeds smoothly and on schedule. Please read them carefully. It is essential that you have someone over 18 to drive you home. You may receive medications during your operation that may make you drowsy and make it unsafe for you to drive. **Please note that your operation may be cancelled if you do not have someone to drive you home. See the page titled "Have you made plans for transportation?"**

Please Bring:

- The pre-admission registration form unless already submitted to admitting.
- The list of medications you are currently taking (if you have not already given it to your pre-op nurse); but please leave your actual medications at home unless specifically instructed to do otherwise.
- Your Kaiser Permanente Health Card and a photo ID.
- Medicare, Medi-Cal cards, or any other insurance cards/numbers.
- **Enough cash, or a check or credit card, to cover three prescriptions and your co-payment, if you have not previously paid for these during the pre-admit process.**
- Playthings, a favorite blanket, or stuffed toy for pediatric patients.

- Comfortable, loose-fitting clothing so that it will be easier for you to dress after your operation.
- The following additional items if you will be hospitalized:
 - Robe and slip-on shoes
 - Personal grooming items (toothbrush, hairbrush, etc.)
 - Eyeglasses and case
 - Hearing aids and case
 - C-Pap machine for sleep apnea patients
 - The name and phone number of the person picking you up on discharge day

Please Do Not:

- Bring your valuables, medications, or electrical appliances. The hospital cannot be responsible for any loss or damage to personal items.
- Wear makeup, as it may interfere with our ability to check your skin color during and after surgery.
- Wear jewelry – including body piercing. Jewelry used in piercings can create safety problems related to the use of electrical equipment during surgery. Piercings can also increase the chance of infection from micro-organisms or become lost during surgery. Guidelines for piercings as follows:
 - Piercings located in the surgical area are to be removed.
 - Piercings not located in the surgical area can be removed and replaced by a monofilament line, plastic/ceramic material, or any other material that does not conduct electricity.
If the piercing is in the mouth it should be removed or replaced with a monofilament line.
 - Piercings requiring special tools to be removed should be removed by your local piercing establishment. Some establishments offer this service free of charge.

Surgery

Upon arrival in the Ambulatory Surgery Unit (ASU) your medical history and the results of preoperative tests will be reviewed. A staff member will check your blood pressure, temperature, pulse, and breathing. Nurses in this unit are also available for any questions. You will be asked to put on a hospital gown and remove any personal items such as contact lenses, glasses, dentures, or other prosthetics. An intravenous line, or IV, will be started in your hand or arm to give necessary fluids and medications. You may also be given medication to help you relax.

BEFORE, DURING, AND AFTER your operation, you will receive comprehensive anesthetic care to assure your utmost safety and comfort throughout the surgical experience. The Department of Anesthesiology utilizes an Anesthesia Care Team approach, which includes anesthesiologists and Certified Registered Nurse Anesthetists working closely in a collaborative fashion under the medical direction of the anesthesiologist. State-of-the-art medical technology will be used to minimize pain and anxiety, and maintain all of your vital functions in a smooth and stable fashion. The specific anesthetic technique selected is individualized to your needs and is based upon many factors, which include your medical history, your physical condition, the nature and extent of your surgery and, whenever possible, your personal preferences.

Different Types of Anesthetics

There are three major classes of anesthetics and each (or a combination) may be appropriate for different situations.

General Anesthesia:

Drugs are administered intravenously or by inhalation to render you unconscious and cause your entire body to be numb to pain during surgery. Common after-effects include grogginess, nausea, and slight soreness in the throat.

Regional Anesthesia:

This approach numbs a major portion of your body using local anesthetic agents. Examples include spinal anesthesia and epidural anesthesia, which cause numbness in the lower portions of the body. Other examples include axillary block or intravenous regional techniques, which produce numbness of the arm and hand.

Local Anesthesia:

Injections of local anesthetic drugs directly into the surgical area may suffice for minor procedures. While the surgeon will usually inject the surgical area with local anesthetic, the anesthesiologist or nurse anesthetist will provide any necessary sedation or other additional medications to assure that you are as comfortable and as stable as possible.

Please note that intravenous sedative drugs are commonly used in conjunction with regional anesthesia and local anesthesia in order to help you relax or to promote a light sleep during surgery.

After Your Surgery

After your surgery you will be taken to the Post Anesthesia Care Unit (PACU) or Recovery Room. An expert staff of registered nurses who are specifically educated to monitor and care for you as you “wake up” from your anesthetic provide nursing care in this unit. An anesthesiologist and your surgeon will direct your care in this unit. Patients going home on the same day of surgery must meet established criteria before being discharged. The nature, extent, and duration of your surgery, as well as the type of anesthesia that you have had will affect the length of recovery from anesthesia. Because very small concentrations of anesthetic and sedative agents may persist in your body for up to 24 hours it is important not to drive, operate dangerous machinery, or make major decisions for approximately 24 hours after your surgery.

**Should you have any questions about your
anesthetic care after you have left the hospital,
please call the hospital operator at (707) 571-4000
24 hours a day / 7 days a week,
ASK FOR THE ANESTHESIOLOGIST ON BEEPER 101**

Visitors for Outpatient Surgeries

During your operation, the adult visitor/parents will be requested to wait in the surgery waiting room located across the corridor from the Ambulatory Surgery Unit on the second floor of the hospital. Prior to your operation and following recovery, you may have one adult visitor at a time. Children under 14 are not

generally permitted in the Ambulatory Surgery Unit (ASU). If this presents a problem for you, please speak with the nurse. If the patient is a child, both parents, or one parent and another adult will be permitted to visit at the same time.

Visitors for Inpatient Surgeries

If you are transferred to a bed on one of the nursing units after your surgery, you will be able to see your visitors after the transfer. As a rule, the surgeons make every effort to go to the waiting room after surgery to talk with you and answer your questions. A volunteer is usually in the waiting room to keep your family and friends informed of your progress. For your privacy and safety, we do not allow visitors in the post-anesthesia recovery area.

Leaving the Hospital

At the time of discharge, you and the person driving you home will receive instructions for your ongoing care at home. A telephone number will be on the discharge instruction form to call if you have any questions. Please do not hesitate to call us if you have any questions.

Have You Made Plans for Transportation?

Most patients can travel by car after hospitalization. If you need a taxi, wheelchair van, or gurney van at discharge, please be aware that you will need to pay for these forms of transportation, as discharge transportation almost never meets the medical necessity guidelines for Kaiser Permanente to cover payment for an ambulance.

Kaiser Permanente will pay for **MEDICALLY NECESSARY** ambulance transportation; such as in a life-threatening emergency or when a Kaiser Permanente physician determines that ambulance transportation is medically necessary.

In most other situations, it is your responsibility to provide and pay for transportation such as wheelchair vans, taxis, and other forms of non-ambulance transportation. You are responsible to pay for transportation when it is not medically necessary.

Examples

- Member needs life-sustaining treatment on the way to destination – *covered*
- Member requires restraints to protect his or her safety or that of others – *covered*
- Member needs help in/out of vehicle – *not covered*
- Member is confined to wheelchair and needs help walking up/down stairs – *not covered*

The hospital Discharge Planner can assist you in examining your options when an ambulance is not necessary, **but to avoid unnecessary delays, please make arrangements before coming to the hospital.** If you are considering a taxi for discharge after surgery, please make arrangements for an adult (18 years or older) to accompany you in the taxi. If your physician has scheduled a return appointment while you are in the nursing facility, it is your responsibility to provide transportation.

ALTERNATE TRANSPORTATION

SANTA ROSA

AMR (American Medical Response) <ul style="list-style-type: none"> • Oxygen OK • Pay at time of service ONLY 	(707) 544-4911 Areas Served <ul style="list-style-type: none"> • Santa Rosa • San Rafael 	Gurney Van
AM Care <ul style="list-style-type: none"> • Oxygen OK • Pay at time of service 	(707) 578-1144	Gurney Van Wheelchair Van
PRO TRANSPORT <ul style="list-style-type: none"> • Oxygen OK • No payment required at time of service; will send bill • Credit cards accepted 	1-800-650-4003 Areas Served <ul style="list-style-type: none"> • Santa Rosa • San Rafael • San Francisco 	Gurney Van Wheelchair Van
RELS (Redwood Empire Life Support) <ul style="list-style-type: none"> • Oxygen OK • Pay at time of service 	(707) 542-6771 Areas Served <ul style="list-style-type: none"> • Santa Rosa • San Rafael 	Gurney Van
Vera Health <ul style="list-style-type: none"> • Oxygen OK • Pay at time of service or extra fee for billing 	1-800-344-9955	Gurney Van
Wheel Care Express <ul style="list-style-type: none"> • Oxygen OK, but does <u>NOT</u> provide oxygen • You need to <u>supply your own wheelchair</u> or prearrange a ‘loaner’ wheelchair • Pay at time of service or extra fee for billing 	(707) 573-3055	Wheelchair only
Taxi Services <ul style="list-style-type: none"> • Transportation by taxi may (or may not) be appropriate. Note: If you are considering this option, please discuss at your pre-operative visit before surgery, or the hospital discharge planner. 		

Herbal Supplements and Surgery

Herbal Supplements and over-the-counter (OTC) medications can interact with anesthesia or cause prolonged bleeding times. Be sure to tell your anesthesiologist and surgeon about any drugs, including herbal supplements and OTC drugs that you are taking. Be sure to include the frequency and dose.

The following herbs can affect heart rate and blood pressure:

- Ginseng
- Golden Seal
- Ephedra (ma-huang)
- Licorice

The following herbs may increase your risk of bleeding:

- Garlic
- Ginger
- Ginkgo
- Feverfew
- Danshen
- Dong quai

It is recommended that you **STOP** taking herbal supplements at least one week before your surgery to allow them to exit your body.

Patients' Blood Transfusion Guide

IF YOU NEED BLOOD...

You have several options. These options may be limited by time and by health factors. You may need to check with your insurance company regarding its reimbursement policy related to blood transfusion. Some surgeries do not require blood transfusion. Although you have the right to refuse a blood transfusion, this decision may hold life-threatening consequences.

If you have questions about your options relating to blood transfusion, please ask your physician.

USING YOUR OWN BLOOD — AUTOLOGOUS DONATION

Using your own blood can minimize the need for transfusion with donor blood. Using your own blood will reduce, but not eliminate, the risk of transfusion-related infections and allergic reactions. Autologous blood donations are not an option for all patients. You may want to ask your doctor if it is safe for you to donate. Autologous blood collections may not be available at the hospital in which your surgery will be performed. Ask your doctor about the availability of these procedures and if Autologous donation is appropriate for you.

DONATING BEFORE SURGERY

Blood banks can draw your blood and store it for your use. This process usually is performed for a planned surgery. Blood can be stored for only a limited period of time, so coordinating the donations with the date of surgery is important.

DONATING DURING SURGERY

Immediately before surgery, your doctor may be able to remove some of your blood and replace it with other fluids. After surgery, the blood that was removed may be returned to you.

In addition, the surgeon may be able to recycle your blood during surgery. Blood that normally is lost and discarded during surgery may be collected, processed, and returned to you. A large volume of your blood can be recycled this way.

Either of these methods may minimize or eliminate the need to be transfused with someone else's blood.

DONATING AFTER SURGERY

Blood that is lost after surgery may be collected, filtered, and returned to you. This process may minimize or eliminate the need to be transfused with someone else's blood.

USING SOMEONE ELSE'S BLOOD

If you choose not to donate your own blood, or if more blood is required than expected, you will receive blood from community or designated donors, if necessary.

COMMUNITY DONORS

Hospitals maintain a supply of community donor blood to meet transfusion needs. Volunteer (unpaid) community blood donors are screened by a thorough medical history, and then tested with the most accurate technology available. Although blood and blood products never can be 100% safe, the risk is very small. As of 2003, infection with HIV (the virus that causes AIDS) occurs less than once per 1,400,000 units of blood transfused. Hepatitis C infection occurs about once per 1,200,000 units, and Hepatitis B occurs about once every 150,000 units.

DESIGNATED DONORS

Although the blood supply today is very safe, some patients prefer to receive blood from people they know — “designated” donors. In some cases, it may be less safe because donors known to the patients may not reveal embarrassing information about their personal history, assuming the blood tests will detect any infection. Since tests do not always detect viruses, blood donated by someone whose recent behavior put them at risk of HIV or other viruses could pass the screening measures, and transmit disease to a patient. Designated donors must meet the same requirements as community donors. Advance notice is required to accommodate a request for designated donors, as additional processing may be required. If you have additional questions about your options relating to blood transfusion, please refer these questions to your physicians, local community blood center, or hospital blood bank. Doctors and other healthcare professionals who work in blood centers are experts in blood transfusion therapy and may be helpful in answering your questions.

Educational Resources

For Surgical Patients

The Health Education Department at Kaiser Permanente Santa Rosa has developed a range of materials to help patients prepare for surgery here. These materials are available in the Health Education Center on the first floor of the West Medical Office Building. We hope that you will find what you need to inform you about your upcoming operation as well as strategies for relaxation and stress management.

Videos

You may choose from a selection of videos to view in the Health Education Center. These videos range from general information about preparing for and recovering from an operation, to specific presentations about different operations. Included are videos for children.

Audio Cassettes / CDs

For those who wish, the Health Education Center has copies of Dr. Emmett Miller’s tape “Successful Surgery and Recovery” and Belleruth Naparestek’s “Preparing for Successful Surgery.” These tapes use soothing music and gentle narration to help pre-surgical patients reduce stress and anxiety, minimize post-operative pain and complications. These recordings come highly recommended by many of our patients. You may obtain these tapes/CDs in the Health Education Center.

Perioperative Services Photograph Album

Sometimes, just knowing where you are going and how it will look can reduce the amount of stress and anxiety associated with an unfamiliar and much anticipated event. For that reason, a photo album showing the “inside” of the perioperative services center is available in the waiting room for the preoperative nurse. We hope that a glimpse of the people, the beds, the rooms, and the equipment will be reassuring and help you anticipate a successful journey through surgery and recovery.

A Comfortable Place To Spend Some Time

Feel free to make yourself comfortable in the Health Education Center on the first floor of the West Building. Read some of our materials or your own selection. Sit at a table and write a letter. Or simply sit back and listen to an audiotape or watch a video.

Phone Numbers and Locations

Santa Rosa Medical Center

Hospital	(707) 571-4000
Admitting.....	(707) 571-4666
Business Office (Disability Forms).....	(707) 571-4690
Discharge Planning	(707) 571-3151
Social Service.....	(707) 571-3151
Emergency Care	(707) 571-4800

Richard Stein Building

Pediatrics	(707) 571-4033
Ophthalmology	(707) 566-5222

Medical Office Building West

Gynecology	(707) 571-4081
Family Medicine	(707) 571-4044
Health Education	(707) 571-4167
Orthopedics	(707) 571-4080
Podiatry.....	(707) 571-4064
Surgery	(707) 571-4090

Medical Office Building East

Anesthesia Consultation	(707) 571-4000 page beeper 101
ENT (Head and Neck Surgery)	(707) 571-4064
Member Services	1-800-464-4000
Patient Assistance	(707) 571-4210
Physical Therapy	(707) 571-4201
Preop Nurse (Patient Educator)	(707) 571-4539
Urology	(707) 571-4064

TTY Information

TTY Emergency.....	(707) 523-1734
TTY- Advice/Appointments	(707) 544-2149

**To cancel your operation,
call the Surgery Cancellation Line at
(707) 571-4890.**

Listen to the recorded message and provide the information requested.

1. Stein Building

Ophthalmology
Pediatrics

2. MOB East

Anesthesia Pre-op Clinic
Pre-op Nurse Patient educator
ENT
Urology
Patient Assistance
Health Plan
ECG/EKG

3. MOB West

FMS
Orthopedics
Surgery Clinic
Ob/Gyn
Pharmacy

4. Hospital

Admitting
Business Office
Laboratory
Medical Imaging
Mammogram
Nuclear Med
Perioperative Surgery Unit (ASU)
Recovery Room (PACU)
Critical Care Department (CCD)

5. Cosmetics

