

## FREQUENTLY ASKED QUESTIONS (continued)

### **Why can't I wear contact lenses, eye makeup, and artificial eyelashes?**

They can cause eye injury during anesthesia; also, contacts and eyelashes can be lost or damaged.

### **Why can't I wear my jewelry and hairpiece?**

They may become pressure point areas while you are under anesthesia and can cause damage to your body. Rings should be removed as fingers may swell during surgery. These items can be lost or damaged. Leave your valuables at home.

### **Can I wear my dentures?**

If you are to receive a general anesthetic, the dentures will have to be taken out before you go to sleep, at the latest—though in this situation it may be better to take them out at home or on the ward to reduce the risk of loss or damage. If you are to receive a local or regional anesthetic with sedation, the dentures are often left in place during the surgery.

### **How soon will I be able to leave the hospital?**

As soon as your doctors consider it safe. This varies with different surgeries and anesthetics. With outpatient surgery, the average time from arriving to leaving the hospital is between 6 and 8 hours. The person driving you home can be called when you are ready to leave if they don't wish to wait at the facility. You cannot drive yourself home or take a taxi by yourself.

## Questions:

Antioch Medical Center: (925) 813-7578

Walnut Creek Medical Center: (925) 295-4439

### **Will I feel nauseated after the surgery?**

Postoperative nausea or vomiting may be related not only to anesthesia, but to the type of surgical procedure and/or pain medications. Because of improved anesthetic agents and techniques today, the majority of patients do not become nauseated. Nevertheless, medications to minimize symptoms will be given in the recovery room if necessary.

### **After outpatient surgery, is there any chance I won't be able to go home the same day?**

Yes. If any circumstances develop which require extended care, you will be admitted to the hospital. The potential complications of surgery and anesthesia will be explained in advance by your doctors. For now, it is important for you and your family to understand that it is possible, though unlikely, that you would need to remain in the hospital overnight or longer.

### **What can I expect after I go home?**

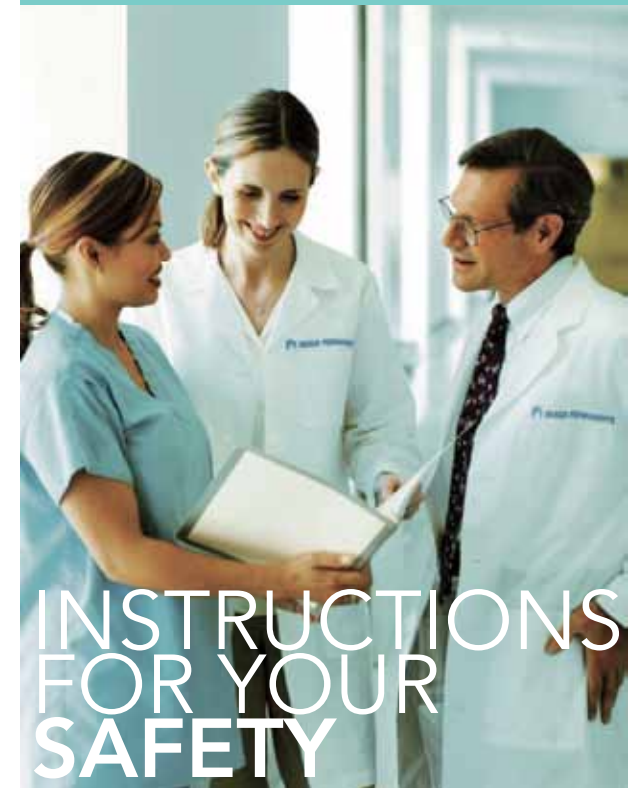
Although the majority of the anesthesia effects will have worn off by the time you leave the facility, it takes your body about 24 hours to eliminate the drugs used. Until then, they interfere with normal judgment and response times. Do not operate a vehicle or attempt to make responsible decisions for 24 hours. It is quite normal to feel tired and lacking in energy for up to 48 hours even after minor surgery.

## **FINAL COMMENTS**

Please notify your surgeon or the Anesthesia Department if your health changes prior to surgery, for example you develop cold symptoms or your medications change.

**We look forward to seeing you and plan to provide you with the outstanding care that you need and deserve. Thank you for choosing Kaiser Permanente.**

# ANESTHESIA DEPARTMENT



# INSTRUCTIONS FOR YOUR SAFETY

## Anesthesia Pre-op Evaluation

One week prior to the day of surgery your chart will be reviewed in detail by an anesthesiologist. If additional information or clarification is required, you will receive a telephone call. If you do not receive a call, please be assured that the Anesthesia Department will be prepared for you on the day of your surgery and will review your medical history and the anesthetic option with you then.

If you do not receive a call and you wish to speak with an anesthesiologist prior to your surgery day, please call (925) 295-4739.

## Final Pre-op Instructions/Information

A few days prior to your surgery you will receive a call from a Perioperative Nurse Educator, who will give you day of surgery medication instructions, fasting instructions, and inform you of any preoperative tests that may still need to be completed. Any other questions you have may be answered at that time. This is an important phone call in preparing you for the day of surgery. If you cannot be reached, the nurse will leave a message for you to return the call at (925) 813-7578.

On the day prior to your surgery you will receive a call from the Operating Room staff to inform you of when you will be expected to arrive.

## Types of Anesthesia

### Local Anesthesia / Monitored Anesthesia Care

Local anesthesia is when the anesthetic is injected directly into the surgical site and numbs only that area. Medications are often given intravenously to make you comfortable and drowsy.

### Regional Anesthesia

Regional anesthesia is for more extensive surgery and blocks a major system of nerves so that feeling is lost in a major part, but not all, of the body. Medications are often given intravenously to make you comfortable and drowsy.

### General Anesthesia

General anesthesia affects the brain and entire body. Sometimes the medications are given intravenously or inhaled with oxygen.

### Before Anesthesia

*Please follow these instructions carefully so that your procedure is not cancelled or delayed.*

### Eating and Drinking

**After midnight:** no food, alcohol, or tobacco. Clear liquids are okay until 3 hours before your arrival for surgery (unless an anesthesiologist or surgeon instructed you otherwise).

The last 3 hours prior to arrival for surgery, nothing at all (including gum and mints) except:

- 1) medications with sips of water;
- 2) brushing your teeth is okay (don't swallow the water or toothpaste)

### Medications

**Non-steroidal anti-inflammatory drugs** like Motrin (ibuprofen) should be stopped 2 days before surgery. Exceptions:

*Naproxen, Nabumetone, Meloxicam*—stop 4 days prior;  
*Feldene, Daypro*—stop 14 days prior

**Tylenol or Vicodin:** okay to continue because they do not interfere with bleeding.

**Aspirin:** Continue aspirin unless otherwise instructed by your surgeon.

*If you have a coronary stent(s) or are taking aspirin for stroke prevention or poor circulation, notify your surgeon and do not stop your aspirin, Plavix, or Ticlid without discussing this with your cardiologist, neurologist, or vascular surgeon.*

**Day of Surgery Medications:** Instructions will be given to you prior to the day of surgery by an anesthesiologist or preoperative nurse.

## Clothing/Accessories

Wear casual clothing which is easy to remove and replace. Remove eye makeup, artificial eyelashes, contact lenses, all jewelry, hairpieces, hairpins, and barrettes. Please bring your Kaiser Permanente card.

## After Outpatient Surgery

**(including surgery using local anesthesia):**

You must have a responsible adult:

- Drive you home (or ride in a taxi cab with you).
- Help you for 8 hours after leaving the hospital.

## FREQUENTLY ASKED QUESTIONS

### What if I get a cold before surgery?

There is a small but definite risk of significant respiratory complications if anesthesia is given within 2 weeks of an upper respiratory infection ("cold"). If you develop cold symptoms within 2 weeks of your surgery, please inform your surgeon or the anesthesia department.

### Why can't I eat or drink?

Protective reflexes may be decreased or lost during anesthesia with sedation. If stomach contents enter the lungs, serious, possibly lethal, complications will result. Therefore, an empty stomach is essential.

### What are clear liquids?

Clear liquids have no residue (solid particles and fat) and digest quickly. They include water, tea, black coffee, Kool-Aid, clear Jell-O, fat-free clear broth or bouillon, and juices you can see through. Sugar may be added to your beverage as it dissolves with no residue. Do not add milk, milk products, or non-dairy creamers to your beverages.