



Patient Handbook

Surgery

Handbook for: _____

Surgery Date: _____ Surgery Time: _____

Please arrive at: _____ (normally 2 hours prior to surgery time)

Follow-Up Appointments after Your Surgery:

**Please contact the Pre-Surgical Care Clinic at (503) 216-1993
to schedule your appointment as soon as possible.**

Pre-Surgical Care Clinic appointment: _____

This handbook will help you understand and prepare for your surgery.
Please review this information with the nurse and your family.

****Please bring this handbook with you to your Pre-Surgery Care Clinic
(PSCC) appointment and on the day of your surgery. ****

Please complete the medication list on page 14 and bring it to your PSCC appointment.

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Dear Patients and Visitors,

I would like to personally welcome you to Providence St. Vincent Medical Center. We strive to make your visit as pleasant, safe, and healing as possible while exhibiting our core values of dignity, compassion, justice, excellence and integrity. Our goal as nurse leaders is to provide quality patient care and service in a safe environment.

The staff will address any issues and concerns prior to discharge with you and your family. The discharge process usually begins the day of admission to ensure we are working towards the same goals. After your physician writes the order for discharge, the nurse will begin the discharge process which may take several hours to prepare all the necessary documents and complete the communication process with your care team. Your nurse will provide you with detailed discharge instructions, including written medication instructions on the day of discharge. Your physician will give you prescriptions for any needed medications. The discharge folder is provided for your convenience to keep your written instructions and materials together.

We believe excellent health care comes down to your personal relationship with the health care team. This relationship is best served through open communication between you, your family, and your care team. We encourage you to contact us at any time with questions or concerns you may have during your stay here at Providence Saint Vincent Medical Center.

Sincerely,

Karin Muilman, MBA, BSN, RN, NE-BC
Director of Surgical Services
Direct Line (503) 216-1273

Melissa Coyle, MSN, RN
Clinical Operations Manager – SSU & PSCC
Direct Line (503) 216-5121

Jen Keeling, BSN, RN
Clinical Operations Manager – Main OR
Direct Line (503) 216-2731

Contact Information

Department	Hours of Operation	Phone Number
Providence St. Vincent Medical Center	24 hours a day. 7 days a week.	503-216-1234
Pre Surgical Care Clinic	Monday – Friday* 8 a.m. to 5 p.m.*	503-216-1993
St. Vincent Medical Center Anesthesia	Monday – Friday 8 a.m. to 5 p.m.	503-216-2716
Oregon Anesthesiology Group (OAG) – insurance verification	Monday – Friday 8 a.m. to 5 p.m.	503-299-9906

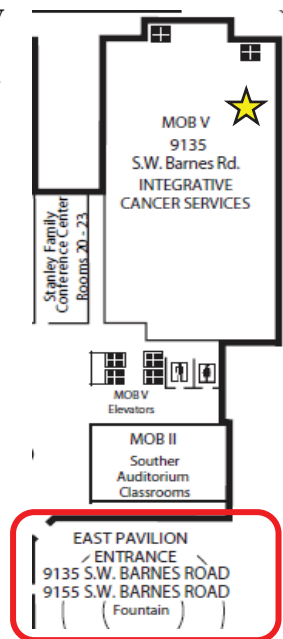
The Pre Surgical Care Clinic is located in Suite 861 in the Medical Office Building (MOB V) on the Providence St. Vincent campus.

The Pre-Surgical Clinic will help you prepare for your surgery ahead of your surgery date. Our goal here is to help ensure a satisfying surgical experience for you and your loved ones. Our staff will meet with you to gather all of the needed pre-surgery tests and other information.

During your time with staff at the Pre-Surgical Clinic, you will learn what to expect before, during and after your surgery. We will cover what you will need to do in preparation for your surgery, discuss your test results, your health history and care needs after your surgery. This appointment can either be done on the telephone or at the clinic.

To make sure you are ready for surgery, please bring a complete list of the medications you are taking. You can do this by taking pictures of all your medications, vitamins and supplements on your smart phone if you have one and showing them to the nurse at your visit or by completing the Medication List on page 18. Please do not bring your pain medication to the clinic or the hospital.

Your Pre-Surgical Care Clinic Appointment Date and Time:



Please plan to arrive 15 minutes prior to your scheduled appointment to allow time for parking and to find our clinic.

To make sure we are able to provide full attention and care to all of our patients, we must ask you to reschedule if you are more than 10 minutes late for your appointment. Thank you!

You'll meet your anesthesiologist before your surgery in pre-op holding area or you could receive a phone call a night before.

Section 1: Preparing for Your Surgery

Information about Anesthesia

What is anesthesia?

Anesthesiology is the practice of medicine in which special drugs are used to cause your entire body – or part of your body – to be insensitive to pain. Anesthesia will enable you to tolerate a surgical or invasive medical procedure comfortably. Today’s anesthesia practices allow a greater degree of safety and comfort than ever before, enabling a smooth start to your healing and recuperation.

Who provides anesthesia?

Anesthesia care at Providence is provided by specialty trained and board certified physician anesthesiologists. They are trained to provide all types of anesthesia and in the delivery of intensive care medicine. They are highly trained to anticipate and treat side effects of anesthesia and co-existing medical conditions.

Consulting with your anesthesiologist

On surgery day, you will meet your anesthesiologist, who will review your medical record, clarify any questions about your medical history and perform, a physical evaluation. You will then have an opportunity to express your preferences, the plan of your care, and have any questions answered. Your anesthesiologist will review the advantages, disadvantages, and possible risks of your anesthetic. Please inform us if you have cultural, religious or personal reservations against receiving a blood transfusion. For additional information about anesthesia visit www.oagpc.com

Eating/Drinking Instructions for Surgery

No solid food or dairy containing drinks (including gum, candy or mints) starting at 12:00am the night before surgery. In some cases your surgeon may require you to have a clear liquid diet on the day before surgery (i.e. bariatric surgery or having a bowel prep, please follow those instructions for clear liquids diet on day before surgery).

You may have clear liquids up until 2 hours before arrival at the hospital. Clear liquids are defined as water, pulp-free juice, clear soda, black coffee or tea or other protein-free clear drinks such as Gatorade, G2, Clear Fast, Ensure Pre-Surgery Clear Nutrition Drink (note that this is the only Ensure drink that is ok on surgery day, do not drink Ensure Clear or Ensure protein shakes on day of surgery). No broth or other protein containing clear on surgery day. If you are first surgery of the morning (5:30am arrival) you may have your last clear liquid at 5:00am unless you receive additional instructions from the anesthesiologist.

If you have a medical condition that causes delayed stomach emptying OR you are having surgery for ACHALASIA or GASTROPARESIS, you may not have anything to eat or drink on day of surgery.

Spiritual Support

Please be sure to let your nurse know if we can assist you with our religious or spiritual needs.

Traveling

If you live a long distance (over 60 miles) from Providence St. Vincent Medical Center, please make arrangements to stay in Portland for 24 to 48 hours after you leave the hospital. After 24 to 48 hours, if you are driving a long distance to home, be sure to stop and get out of the car to walk every hour or two. Walking for a few minutes will help move your blood through your body. This will help prevent blood clots and may keep your muscles from cramping.

Quitting Smoking before Surgery

Stop smoking. This is the most important thing you can do, and you don't need to do it alone. Even quitting for one week before surgery will help speed your recovery.

For help quitting, call Providence Resource Line at 503-574-6595 or Quit for Life at 1-866-QUIT-4-LIFE, 1866-784-8454.

You can also go to Providence www.providence.org/stopsmoking.

Smoking Increases Your Risk of Heart and Breathing Problems

Smoking increases the mucus in the airways and decreases your ability to fight infection. It also increases the risk of pneumonia and other breathing problems. Airway function improves if you quit 8 weeks before your procedure.

The nicotine from cigarettes can increase your blood pressure, heart rate, and risk of arrhythmias (irregular heart beat). The carbon monoxide in cigarettes decreases the amount of oxygen in your blood. Quitting at least 1 day before your operation can reduce your blood pressure and irregular heartbeats.

Smokers have an increased risk of blood clots and almost twice the risk of heart attack as nonsmoker.

You can also go to Strong for Surgery <https://www.facs.org/quality-programs/strong-for-surgery>

One Week before Surgery

- Herbs/Vitamins/Supplements: Discontinue all herbal and non-vitamin supplements seven days prior to surgery.
- If you are taking Aspirin, Coumadin, or any other blood thinning medications please contact your surgeon or PSCC to discuss a plan if you did not already receive this information.

To prevent infection, it is very important that you do not shave around the surgery site for 72 hours (3 days) before your surgery!

We have created some videos to help prepare you for surgery. Please visit: www.providence.org/surgery and watch:



- *“Preparing for Surgery: What to expect before, during and after”*
- *“Preparing for surgery at Providence St. Vincent Medical Center”*

In Surgical Services we are committed to providing you with the best surgery experience and recovery. Our goal is to help you recover quickly so you can return to your normal routine. We focus on making sure you are an active partner in your recovery. Together we will plan and prepare for your surgery to ensure safety and limit the physical stress on your body.

**It is important for you to participate in your recovery.
By working together, we will make sure your stay in the
hospital will not last longer than necessary.**

Please be aware that we do our best to accurately estimate when you'll go to surgery. However, surgery times are always subject to change due to patient care needs. Bring something to help pass the time before surgery. We will keep you informed throughout your stay about the updated time frame for your surgery.

Weight matters before surgery and treatment

Going through a serious illness, major medical treatment or surgery raises your risk of malnutrition – even if you are overweight. Losing weight in the weeks after surgery or major medical treatment can slow healing and weaken the immune system. Tell your doctor if you lose 5 or more pounds after your surgery or treatment.

If you are currently at the right weight

- Try to keep your weight the same before and after your surgery or treatment by eating a healthy, balanced diet.

Ride Home

We strongly encourage you have a family member or a friend take you home and stay with you after surgery. If you cannot get a ride home with a friend or family member, we strongly recommend that you use a medical transportation service, such as Metro West or Life Flight Network. This is to ensure your safety!

Metro West: 503-648-6656

Life Flight Network: 866-983-5433

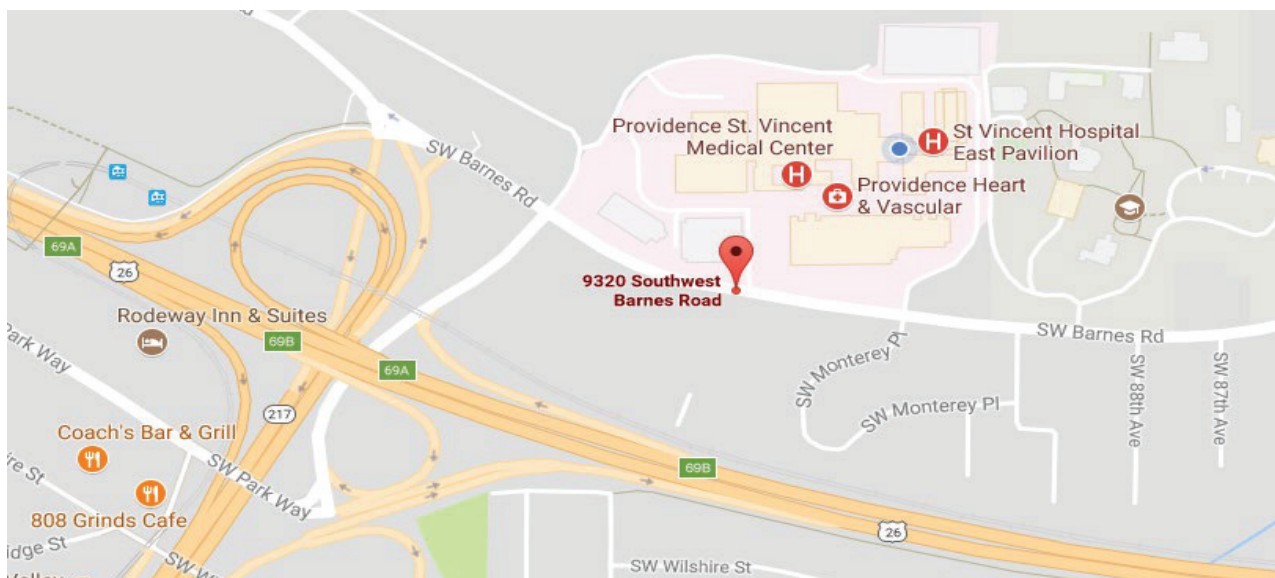
Travel

- Make hotel arrangements, as needed, for family members or friends who will be supporting you during your hospital stay.
- Providence St. Vincent Medical Center Guest Housing Center is available during your stay.



Guest Housing Center Office

Travis and Beverly Cross
 9320 SW Barnes Road
 Portland, OR 97225
 Toll-free: 888-550-1575
 Phone: 503-216-1575
 Fax: 503-216-6283



IMPORTANT INSTRUCTIONS FOR BATHING BEFORE YOUR SURGERY

Only use the soap if instructed by your surgeon.

The Pre-Surgical Care Clinic staff may instruct you to use Hibiclens soap. Using Hibiclens soap will reduce the amount of normal bacteria on your skin and decrease the chance of getting an infection at your surgical site.

Follow these instructions carefully:

1. Buy a 4-ounce bottle of Hibiclens. You can find it at Fred Meyers, Rite Aid, Walgreens, Walmart or at any drug store.
2. Shower the night before your surgery **AND** the morning of surgery. Use 1/2 of the bottle for each shower.
3. Please remove all body piercing jewelry before you shower and leave it out until after your surgery.
4. You may wash your hair with regular shampoo. Please be sure to rinse your hair thoroughly before you wash with Hibiclens.
5. Use a clean washcloth to apply Hibiclens for each shower. Clean in all the skin folds. Have someone help wash your back and any areas that you are not able to reach yourself.
6. Wash your body from the neck down to your toes with Hibiclens. **DO NOT** get Hibiclens into your **EYES** or **EARS**. If you do, rinse with water immediately.
7. Hibiclens does not make suds, however, it is an excellent cleaner.
8. Rinse thoroughly with running water. **DO NOT** use any other soap or body rinse on your skin after showering with Hibiclens.
9. Use a clean washcloth and towel for each shower. Wear clean, freshly laundered clothing after each shower.
10. Make sure you sleep in a bed that has clean sheets the night before surgery.
11. Don't let your pets sleep in the bed.
12. Do not use lotion, powder, deodorant, perfume or aftershave of any kind on the skin after bathing with Hibiclens.



What to Expect While You Are In the Hospital

Outpatient Surgery

When you check in at the hospital, you will be taken to a room in the Short Stay Unit. Here, the nurses will prepare you for surgery by making sure your health history is correct. They will start your IV and give you any medications required before surgery. They will use special wipes to clean your skin to reduce the risk of infection. The surgeon will mark the surgical site, and your anesthesiologist will meet with you as well.

You will have a special warming gown to keep you warm during this time. **It is important to stay warm before you go to the operating room, as this also helps to reduce the risk of infection after surgery.**

You will likely go to the Post-Anesthesia Care Unit (PACU) after your surgery. In the PACU we do not allow visitors while you are recovering. Some patients may return directly to the Short Stay Unit after surgery, depending on the type of procedure.

Your family member will be notified by phone or provided pager once you return to Short Stay. You will stay in the Short Stay Unit until it is safe for you to go home or you may spend the night. If you have a prescription this is a good time for your family member to fill it at the pharmacy. The pharmacy is located in the East Pavilion. See the map on page 25 of this handbook.

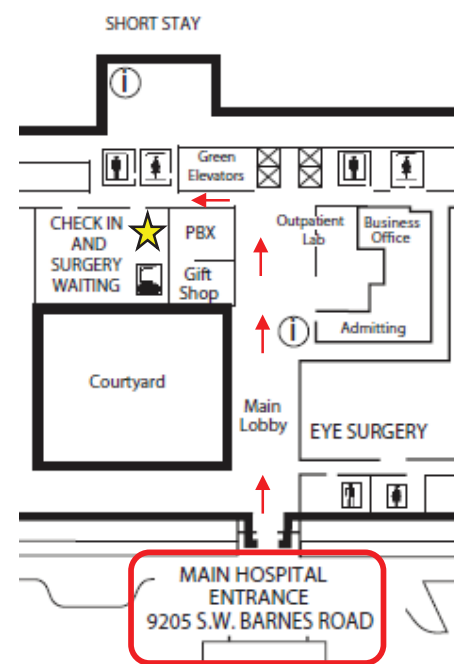
You are strongly encouraged to have a ride home when you leave the hospital. Make sure you understand your care instructions before you leave the hospital. Be sure to ask questions if you are unsure about the instructions and that you understand the answers given to you. Make sure you know when to follow-up with your surgeon after your surgery. It is important that you have an adult who can stay with you for the first few days after surgery to help you if you need it.

- You will need to arrive at the hospital 2 hours before your scheduled surgery time.
- When you arrive, please check in at Admitting Desk in the Surgery Waiting Area.
- Nursing staff will begin preparing you for surgery.
- Your anesthesiologist will meet with you before surgery.

Your full attention and participation is necessary for you to have a safe surgery experience. **Please do not use your electronic devices while our team is discussing or providing your care.**

Inpatient Surgical Unit

If you are staying overnight and visitors are allowed, your family members will be contacted to join you once you are settled in your room. Your vital signs, incision and dressings will be checked. A member of your surgical team may visit you to discuss your surgery and answer your questions.



THE MORNING OF YOUR SURGERY

Please see eating and drinking instructions on page 5.

Tobacco:

- Stop use of all tobacco products after midnight on the day of surgery including chewing tobacco.

Please:

- Wear loose fitting clothes.** No turtlenecks or other snug clothing.
- Remove all of your jewelry and piercings and leave them at home.**
- Remove dark nail polish from your fingernails and toenails.** This allows us to use our monitoring equipment during your surgery.
- Do not wear any make-up, fake eyelashes, perfume or other scented products.** This is for your safety.
- Please make sure you have a ride available in order to go home the day of surgery.** If visitation is not allowed, we will contact your ride when it is time to discharge.

On the morning of your surgery:

- Bring these items with you when you check in. These are the only items we can take responsibility for and keep during your surgery.**
 - Insurance card and driver's license
 - Eye glasses
 - Dentures
 - Hearing aids
 - Cane or walker
 - CPAP or BiPAP, if you use one at home.
- If you are staying overnight, have a family member or friend bring extra clothes for you** after you are settled in your room after surgery.
- If you use oxygen, make sure you have enough oxygen in the tank for the ride home.
- If you did not fill your prescriptions before your surgery, you can do so at the pharmacy here at the hospital.** Please ask a friend or family member to keep a small amount of cash or a debit/credit card to pay for any prescription co-pays when they arrive to pick you up.

Section 3: Going Home Safely

Pain Control after Your Surgery

We will work with you to manage any pain you have after surgery. It is normal to experience some pain after surgery. Our goal is to keep your pain at a manageable level that allows you to participate in the activities needed for a good recovery.

A few important reminders about pain:

- Keep your care team informed about your level of pain. Preventing and treating pain early is easier than trying to treat pain after it becomes severe.
- Rating your pain helps you and your care team manage pain more effectively. Staff will ask to you rate your pain on a scale from 0-10.
- Non-opioid medications, such as Tylenol or Ibuprofen, may be offered around the clock to keep your pain at a tolerable level. Your surgeon may ask you continue these medications post-op.

Pain

Take your pain medications as needed and directed. Other methods that can help with pain relief are guided imagery, music therapy, breathing and relaxation exercises. If you have questions about your pain management, please call your surgeon's office. Do not wait until your pain is uncontrolled to seek help.

Instructions for Post-Surgery Care at Home

Plan to Have Help after Your Hospital Stay

- Before you have surgery, ask a friend or family member to drive you home after you get out of the hospital.
- If you live alone, you may need a family member or friend to stay with you. They may attend your pre-surgery appointments, support you during your recovery and return home. They will help you monitor your healing, nutrition, and physical activity.
- If you don't have anyone to help after your surgery an **Optimal Aging by CareLinx** from Providence can connect you with trustworthy service providers who can lighten your load. This program is for everyone regardless of age or health care provider. Optimal Aging can help find assistance whether you live in a house, apartment or retirement community. For more information please visit <https://optimalaging.carelinx.com/> or call 1-800-377-1307.



Your Checklist for Going Home:

Before leaving the hospital, be sure you understand any special instructions from your care team, which may include:

- Special activity restrictions.
- Medication and medical supply instructions.

- Changes or restrictions on what you can eat or drink.
- Wound care or dressing changes.
- Return or follow-up appointment information.
- Contact information for questions or concerns.
- Prescriptions for medications.

We will also:

- Ask you how you will get home from the hospital and who will be staying with you.
- Ask you to make sure you collect any belongings that have been stored with us.

Going home will depend on several factors such as:

- Your ability to eat solid food.
- You are off all IV fluids and are drinking liquids to stay hydrated.
- You are able to urinate.
- You do not have a fever.
- Your pain level is under control.
- You are able to move on your own.

Driving

Do not drive for 24 hours after your procedure, while taking pain medications, and until approved by your surgeon.

Work

Your surgeon will tell you when you can expect to return to work. If you need a “Return to Work” form for your employer, please contact your surgeon’s office.

When to Call Your Surgeon’s Office

- If you have a fever of 100.5 degrees Fahrenheit or higher.
- If you have any oozing or redness at your wound site.
- Your pain is getting worse instead of better.
- Cannot pass gas or have not had a bowel movement for 3 days.
- Have upset stomach or vomiting that does not get better and you cannot keep liquids down.
- Have diarrhea that does not get better.
- If you have an ileostomy and have a lot of watery stool output that does not get better.

If you have very serious symptoms such as shortness of breath, calf pain, chest pain or any other emergency, call 911 or go to the closest emergency room.

Wound Infection

- Some clear, light yellow or blood-tinged drainage from the incision is to be expected.
- If you have a drain in place, it is normal to have drainage in the drain and even around the drain site (where it comes out of your skin). The amount and color of drainage can change with time.
- Some bruising and swelling around the incision is to be expected.
- Follow your surgeon’s instructions regarding dressing changes. Remember to always wash your hands before and after touching your surgical wound.
- Call your surgeon right away if you develop any sign of infection, including:
 - Fever (101.5 or greater)
 - Redness, tenderness or increased warmth around incision
 - Pus-like or foul-smelling drainage from incision

Dealing with Urinary Difficulty

- Before surgery, talk with your surgeon if you are having any symptoms with urinating – such as frequency, urgency, straining or incomplete emptying of your bladder.
- Excess narcotic use will increase your risk of not being able to urinate. Explore over-the-counter medications to help manage your pain.
- If experiencing difficulty urinating, you may find it helpful to have the faucet running when you try. For men, it may help to stand.
- Call your surgeon if unable to urinate in six hours, or if your bladder feels full but is unable to empty.

Activity after the Surgery

You likely will feel tired and weak when you get home. It is important to increase your activity level slowly as you gain strength and independence. **It is important to walk 4 to 6 times a day.**

Preventing Nausea and Constipation

- Eat smaller portions more often, rather than three large meals.
- If experiencing nausea or constipation, use narcotic pain medications only when necessary.
- Do not take your pain medications on an empty stomach.
- Drink plenty of fluids (about 8 glasses daily).
- Eat plenty of fruits, vegetables and other sources of fiber (such as bran cereal).
- Stay physically active.

MEDICATION LIST

NAME

MEDICATION	DOSE	HOW OFTEN	PRESCRIBING DOCTOR









ALLERGIES AND REACTIONS

PHARMACY NAME

PHARMACY PHONE #





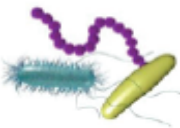



Medication Side Effects

This sheet provides side effect information about medications you may receive during your stay. If you have any questions or concerns then please ask your nurse or pharmacist.

WHAT IS MY MEDICATION? Generic (brand name)	WHY AM I TAKING IT?	WHAT ARE THE POSSIBLE SIDE EFFECTS?
<input type="checkbox"/> Oxycodone <input type="checkbox"/> Hydromorphone (Dilaudid) <input type="checkbox"/> Oxycodone-Acetaminophen (Percocet) <input type="checkbox"/> Hydrocodone-Acetaminophen (Norco) <input type="checkbox"/> Tramadol (Ultram) <input type="checkbox"/> _____	OPIOID PAIN RELIEVER 	<div style="background-color: #007bff; color: white; padding: 5px; display: inline-block;">  MAY CAUSE Dizziness or Drowsiness </div> <ul style="list-style-type: none"> Itching Constipation Nausea/Stomach upset Headache
<input type="checkbox"/> Acetaminophen (Tylenol) for pain/fever <i>For inflammation or pain:</i> <input type="checkbox"/> Ibuprofen (Advil, Motrin) NSAID <input type="checkbox"/> Ketorolac (Toradol) NSAID <input type="checkbox"/> Celecoxib (Celebrex) NSAID <input type="checkbox"/> _____	DECREASE INFLAMMATION/PAIN 	<div style="background-color: #6c757d; color: white; padding: 5px; display: inline-block;">  MAY CAUSE GI Upset </div> <ul style="list-style-type: none"> Itching or rash Risk for bleeding (Ibuprofen, Ketorolac & Celecoxib)
<input type="checkbox"/> Docusate sodium (Colace) <input type="checkbox"/> Senna (Sennakot) <input type="checkbox"/> Polyethylene glycol (Miralax) <input type="checkbox"/> _____	PREVENT or TREAT CONSTIPATION 	<div style="background-color: #6c757d; color: white; padding: 5px; display: inline-block;">  MAY CAUSE GI Upset </div> <ul style="list-style-type: none"> Diarrhea Stomach pain
<input type="checkbox"/> Ondansetron (Zofran) <input type="checkbox"/> Prochlorperazine (Compazine) <input type="checkbox"/> Metoclopramide (Reglan) <input type="checkbox"/> Aprepitant (Emend) <input type="checkbox"/> Promethazine (Phenergan) <input type="checkbox"/> Scopolamine (Transderm-Scop) *remove on _____ <input type="checkbox"/> _____	NAUSEA or VOMITING 	<div style="background-color: #ffc107; color: white; padding: 5px; display: inline-block;">  MAY CAUSE Headache </div> <ul style="list-style-type: none"> Dizziness Drowsiness Restlessness (Reglan) Hormonal birth control disruption (Emend) Pupil dilation. Confusion in elderly. (Scopolamine)
Last Updated: January 2019		

Medication Side Effects

This sheet provides side effect information about medications you may receive during your stay. If you have any questions or concerns then please ask your nurse or pharmacist.

WHAT IS MY MEDICATION? Generic (brand name)	WHY AM I TAKING IT?	WHAT ARE THE POSSIBLE SIDE EFFECTS?
<input type="checkbox"/> Gabapentin (Neurontin) <input type="checkbox"/> Carbamazepine (Tegretol) <input type="checkbox"/> Pregabalin (Lyrica) <input type="checkbox"/> _____	NERVE PAIN 	<div style="background-color: #00a0e3; color: white; padding: 5px; display: inline-block;">  MAY CAUSE Dizziness or Drowsiness </div> <ul style="list-style-type: none"> Poor coordination Visual disturbances Nausea (carbamazepine)
<input type="checkbox"/> Cyclobenzaprine (Flexeril) <input type="checkbox"/> Methocarbamol (Robaxin) <input type="checkbox"/> Tizanidine (Zanaflex) <input type="checkbox"/> Baclofen (Lioresal) <input type="checkbox"/> _____	MUSCLE RELAXER 	<div style="background-color: #00a0e3; color: white; padding: 5px; display: inline-block;">  MAY CAUSE Dizziness or Drowsiness </div> <ul style="list-style-type: none"> Fatigue Dry Mouth Weakness Confusion in elderly
<input type="checkbox"/> Amoxicillin (Amoxil) <input type="checkbox"/> Cefazolin (Ancef) <input type="checkbox"/> Ciprofloxacin (Cipro) <input type="checkbox"/> Nitrofurantoin (Macrobid) <input type="checkbox"/> Cephalexin (Keflex) <input type="checkbox"/> _____	TREAT BACTERIAL INFECTIONS 	<div style="background-color: #76923c; color: white; padding: 5px; display: inline-block;">  MAY CAUSE GI Upset </div> <ul style="list-style-type: none"> Rash Itching Diarrhea Headache
<input type="checkbox"/> Oxybutynin (Ditropan) - bladder spasms <input type="checkbox"/> Phenazopyridine (Pyridium) - burning <input type="checkbox"/> Tamsulosin (Flomax) - urination <input type="checkbox"/> Bethanechol (Urecholine) - urination <input type="checkbox"/> _____	BLADDER/URINARY ISSUES 	<ul style="list-style-type: none"> Nausea Flushing Dizziness Dry mouth Orange urine (Pyridium)
<input type="checkbox"/> Aspirin <input type="checkbox"/> Enoxaparin (Lovenox) <input type="checkbox"/> Warfarin (Coumadin) <input type="checkbox"/> _____	PREVENT or TREAT BLOOD CLOTS 	<div style="background-color: #c00000; color: white; padding: 5px; display: inline-block; border-radius: 10px;"> Risk of Bleeding </div> <ul style="list-style-type: none"> Bruising Nausea or stomach upset (warfarin) Fever (enoxaparin)

Last Updated: January 2019

FAQs

(frequently asked questions)

about "Surgical Site 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, infections develop in about 1 to 3 out of every 100 patients who have surgery.

Some of the common symptoms of a surgical site infection are:

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

Can SSIs be treated?

Yes. Most surgical site infections can be treated with antibiotics. The antibiotic given to you depends on the bacteria (germs) causing the infection. Sometimes patients with SSIs also need another surgery to treat the infection.

What are some of the things that hospitals are doing to prevent SSIs?

To prevent SSIs, doctors, nurses, and other healthcare providers:

- Clean their hands and arms up to their elbows with an antiseptic agent just before the surgery.
- Clean their hands with soap and water or an alcohol-based hand rub before and after caring for each patient.
- May remove some of your hair immediately before your surgery using electric clippers if the hair is in the same area where the procedure will occur. They should not shave you with a razor.
- Wear special hair covers, masks, gowns, and gloves during surgery to keep the surgery area clean.
- Give you antibiotics before your surgery starts. In most cases, you should get antibiotics within 60 minutes before the surgery starts and the antibiotics should be stopped within 24 hours after surgery.
- Clean the skin at the site of your surgery with a special soap that kills germs.

What can I do to help prevent SSIs?

Before your surgery:

- Tell your doctor about other medical problems you may have. Health problems such as allergies, diabetes, and obesity could affect your surgery and your treatment.

- Quit smoking. Patients who smoke get more infections. Talk to your doctor about how you can quit before your surgery.
- Do not shave near where you will have surgery. Shaving with a razor can irritate your skin and make it easier to develop an infection.

At the time of your surgery:

- Speak up if someone tries to shave you with a razor before surgery. Ask why you need to be shaved and talk with your surgeon if you have any concerns.
- Ask if you will get antibiotics before surgery.

After your surgery:

- Make sure that your healthcare providers clean their hands before examining you, either with soap and water or an alcohol-based hand rub.

If you do not see your providers clean their hands, please ask them to do so.

- Family and friends who visit you should not touch the surgical wound or dressings.
- Family and friends should clean their hands with soap and water or an alcohol-based hand rub before and after visiting you. If you do not see them clean their hands, ask them to clean their hands.

What do I need to do when I go home from the hospital?

- Before you go home, your doctor or nurse should explain everything you need to know about taking care of your wound. Make sure you understand how to care for your wound before you leave the hospital.
- Always clean your hands before and after caring for your wound.
- Before you go home, make sure you know who to contact if you have questions or problems after you get home.
- If you have any symptoms of an infection, such as redness and pain at the surgery site, drainage, or fever, call your doctor immediately.






If you have additional questions, please ask your doctor or nurse.

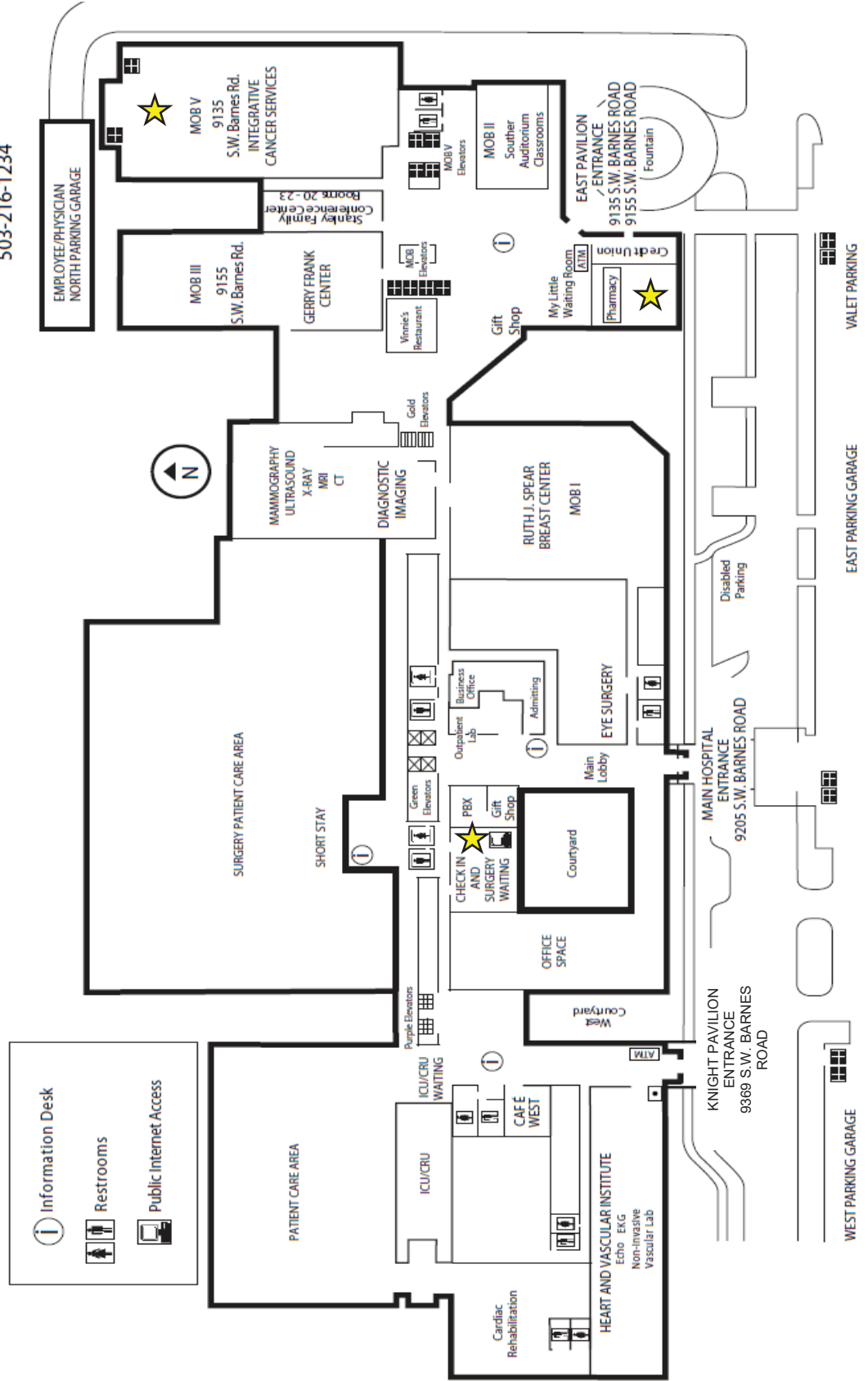
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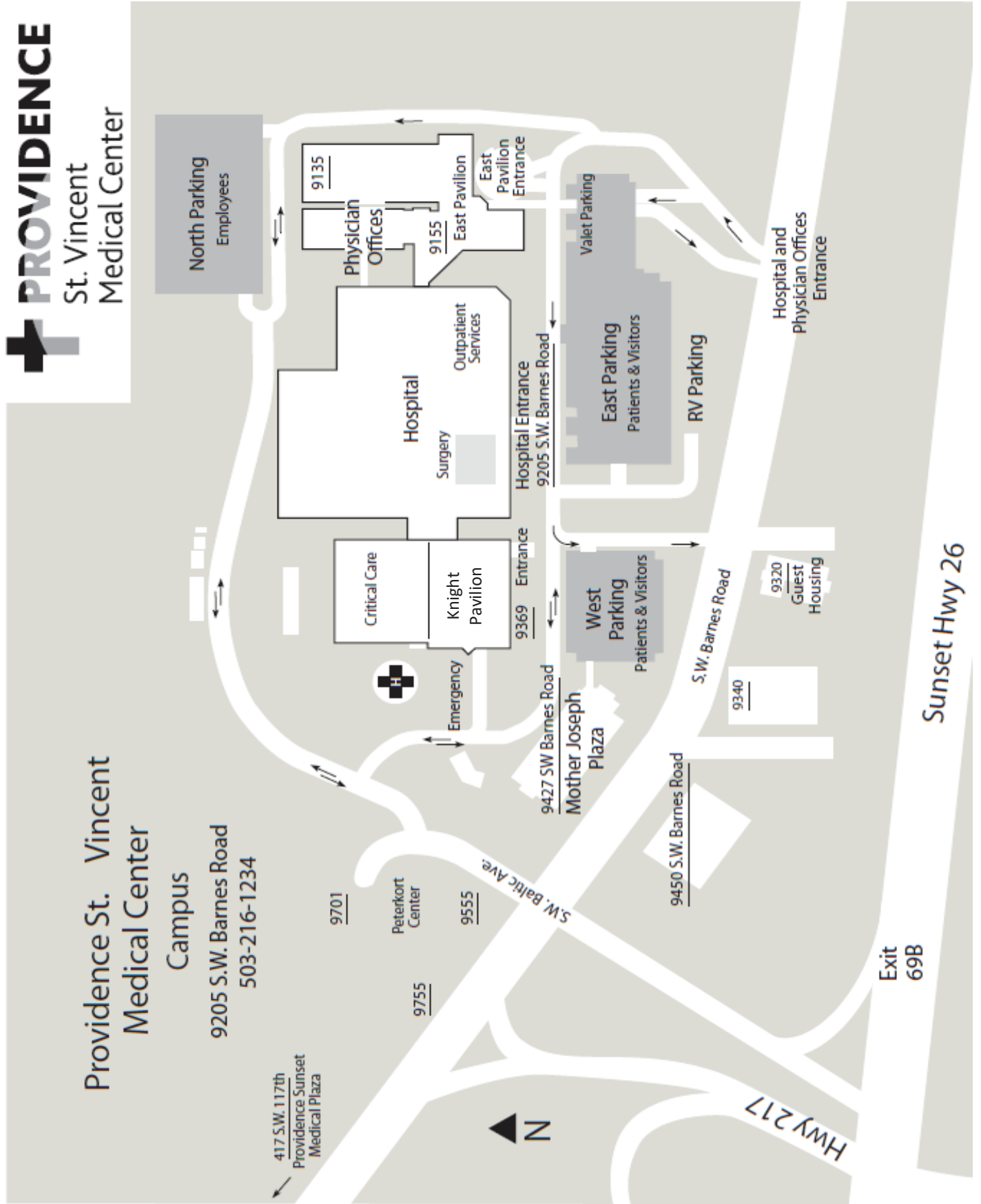


Notes

First Floor
503-216-1234

-  **Blue Elevators**
Lower Level(LL)
Emergency (LL)
-  **Purple Elevators**
Coronary Care Unit (CCU) (2nd floor)
IRU (2nd floor)
Maternity (3rd floor)
Emergency (LL)
Human Resources (LL)
-  **Green Elevators**
Cafeteria (2nd floor)
Chapel (2nd floor)
Medical Foundation (2nd floor)
Conference Room 1-6 (2nd floor)
Conference Room 8-12 (LL)
Board Room (2nd floor)
Administration (2nd floor)
Patient Rooms (4th - 9th floor)
-  **Gold Elevators**
Nuclear Medicine (LL)
Radiation Oncology (LL)
Faculty Practice (2nd floor)
Medical Procedure (LL)
-  **MOB Elevators**
Physical Therapy/Rehab (3rd floor)
Brain Institute (3rd floor)





Our Promise to you:

Together, we answer the call of everyone we serve:

Know Me, Care For Me, Ease My Way



**Learn more about compassion at Providence by watching our YouTube video:
“Compassion at Providence”**

