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Tacoma, WA 98405
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253-944-8100 (from Pierce County)
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St. Anthony Hospital
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Gig Harbor, WA 98332
253-530-2000

Gig Harbor Surgery Center
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6401 Kimball Drive
Gig Harbor, WA 98335
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16251 Sylvester Road SW
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A Patient's Guide to Surgery



Glossary of Medical Terms (continued)

Staples

Small metal clips that hold edges of the surgical incision together while the incision heals.

Steri-strips

Small adhesive strips often used to hold the wound edges together after sutures or staples are removed.

Sutures

Thread-like material (stitches) that the surgeon uses to hold the edges of your incision together. Incisions are usually sutured in several layers; inner sutures gradually dissolve as the incision heals, but outer sutures are removed several days following surgery.

Vital Signs

Temperature, pulse rate, respiration (breathing), blood pressure and other basic indicators of general well-being.

Wound

Surgical incision.

If at any time you have questions about medical terms, please don't hesitate to ask. We want to help you be informed about your care.



We Look Forward to Caring for You

Thank you for entrusting us with your care. We welcome the opportunity to serve you and to assist you in your recovery. Our team is highly trained to care for you before, during and after surgery. We use advanced technology and state-of-the-art procedures within an environment of compassion that emphasizes the healing of mind, body and spirit.

The more you know about your condition, surgery and the recovery process, the more quickly you are able to return to your regular activities and lifestyle.

Your doctors, nurses and other medical professionals will spend a lot of time explaining what you can expect before, during and after surgery. They will also answer your questions and demonstrate exercises to help your recovery.

The information included in this booklet is intended to supplement the instructions of your doctor, nurses and other health care professionals involved in your care.

If you have questions, please talk with your doctor, nurse or caregiver to find out what is right for you personally. We want you to be well informed and as comfortable as possible.

We welcome the opportunity to serve you and assist you in your recovery.



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Drain

A small, flexible tube placed near your incision during surgery to help remove fluid from the area. This reduces swelling and pain.

Dressing

The gauze and bandages applied to keep your incision site clean and dry. Dressings are changed as needed and removed as your incision heals.

Incentive Spirometer

By inhaling through this small device, you help your lungs return to normal following anesthesia. This helps to prevent complications.

Incision

This is the place where the surgeon cuts through your skin and other tissues to reach the area that needs surgical repair. An incision is also called a wound.

Informed Consent

Making a decision to have surgery or other medical treatment after the doctor fully explains the expected results and possible complications. This term usually refers to the form you sign that authorizes surgery, anesthesia or other procedures.

IV

This is the abbreviation for intravenous, which means “into a vein.” A needle is inserted into a vein, usually in your arm or on the back of your hand, through which you can receive fluids and medications. Most surgery patients have IVs in place until they are able to eat and drink without nausea.

Nausea

The feeling of being sick to your stomach as if you are going to vomit. Anesthetic agents and other medications may cause you to feel nauseated. As these agents wear off, you’ll begin to feel better. If you feel uncomfortable or vomit, the caregiver can give you a medication to help reduce nausea.

NPO

Abbreviation for the Latin words that mean “nothing by mouth.” Patients designated as NPO should not eat nor drink anything until their caregiver gives permission to do so.

Pain Scale

Following surgery, your nurse will ask you to judge the level of pain you feel on a scale of zero (no pain) to 10 (worst pain). It is important to keep your pain at a level that can be managed with a medication.

PCA Machine

Patient-Controlled Analgesia (PCA) machine. It allows you to administer your own pain medication following surgery if you have an IV.

We Do Not Discriminate

CHI Franciscan is committed to excellence every day as part of our healing ministry. We do not discriminate against any person on the basis of race, color, national origin, disability or age in admission, treatment or participation in our programs, services and activities.



Glossary of Medical Terms

During your hospital stay and throughout recovery, you're likely to hear the specialized language of health care. You may find it helpful and reassuring to understand some of the more common terms. If someone uses words or descriptions that you don't understand, please ask for an explanation.

AE Stockings

Anti-embolism (AE) stockings are elastic support stockings that help prevent circulation problems.

Allograft

Transplant tissue from donors.

Ambulate

To move around, usually by walking. It is important to begin moving soon after surgery if your condition permits because this encourages good circulation and retains muscle strength. You may need assistance with ambulating during your recovery.

Analgesic

Any medication that decreases pain.

If we use medical terms that are unclear to you, please speak up and ask us to explain or clarify.

Anesthetic Agents

These are drugs that cause loss of sensation and/or consciousness. Anesthetic agents may be topical (applied to the skin), local (injected into a small area to create numbness), regional (injected close to major nerves to numb a larger area); or general (injected or inhaled to produce loss of consciousness). The effects of anesthetic agents are carefully monitored by an anesthesiologist, who is a physician specially trained in the administration of anesthetics.

Autograft

A graft transferred from one part of the patient's body to another.

Autologous

Your own donated blood, bone or tissue.

Blood Transfusion

Replacement of blood, if necessary, that you've lost during surgery or because of an injury.

Catheter

A small tube placed into the bladder to drain urine until you are able to urinate on your own.

Cough and Deep Breathe

Regular deep breathing and coughing exercises that help clear mucous and fluids from the lungs following anesthesia.

The Healing Process

Your journey begins with preparation for surgery and continues through post-surgical care until you return to your regular activities.

You can help your recovery progress smoothly and quickly by following the advice of the doctor, nurses and other medical professionals involved in your care.

Recovery from surgery happens more quickly if you follow the advice of your doctor and nurse.

Preadmission Clinic

At the time your surgery was scheduled, your doctor made an appointment for you with the preadmission clinic, to take place prior to your scheduled surgery. This appointment may have been scheduled to take place in-person at one of the preadmission clinics, or by telephone.

Your participation in the preadmission clinic appointment allows us the opportunity to complete paperwork, any tests necessary for your procedure, and helps us be more fully prepared to serve you on the day of your surgery.

Hospital preregistration staff may contact you prior to your surgery date to help expedite the registration process and answer any questions you may have.



Preparations at Home before Surgery

On the day before your surgery:

- Rest and relax
- Eat healthy foods
- Try to have a bowel movement
- Notify your doctor if you have experienced any health changes (a cold, persistent cough, fever, etc.) since your last visit to schedule this surgery.
- Arrange for transportation to and from the surgery center. For your safety, if you have general anesthesia or sedation, you will not be allowed to drive or leave alone after surgery. It is imperative that a responsible adult is present to receive discharge instructions, accompany you home, and be with you for 24 hours following surgery.
- Do not smoke for at least 24 hours before your surgery.
- Eat normally and take your routinely prescribed medications the day and evening before surgery, unless otherwise instructed by your doctor.
- Do not eat anything, and do not chew gum or breath mints, after midnight the night before your surgery. You may have water, apple juice or Sprite until two hours before your arrival at the hospital. Remember to take your routine daily medications with a sip of water unless instructed not to do so.
- Shower the evening before your surgery using the skin cleansing soap or cloths you were provided, if instructed to do so.

Please follow all instructions provided by your doctor or the preadmission clinic nurse.

On the morning of your surgery:

- Shower the morning of your surgery with the skin cleansing soap or cloths you were provided, if you were instructed to do so. Do not apply lotions, deodorant, cosmetics, colognes, nail polish or other personal products to your skin.
- Do not shave any part of your body, or use hair removal products, for 24 hours prior to your arrival time. Facial shaving is fine if you are not having facial surgery.
- Dress in casual, loose-fitting clothing.
- Leave all valuables at home. Remove all jewelry, including piercings, prior to arriving at the hospital or Surgery Center.
- Plan to arrive two (2) hours prior to your scheduled surgery time to allow time for surgery preparation and a visit from the anesthesiologist. **You may be contacted by the hospital or Surgery Center one business day before your surgery day to confirm your arrival time.**

What is a Surgical Site Infection?

A surgical site infection (SSI) 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 of every 100 patients who have surgery.

Common symptoms include:

- Redness and pain around the surgical site
- Drainage of cloudy fluid from your wound
- Fever

Can SSIs be treated?

Most surgical site infections can be treated with antibiotics. Sometimes patients with SSIs also need another surgery to treat the infection.

What are hospitals doing to prevent SSIs?

Doctors, nurses and other health care providers:

- Clean their hands and arms up to their elbows with an antiseptic agent 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.
- Wear special hair covers, masks, gowns and gloves during surgery.
- Give you antibiotics before your surgery starts. In most cases, you should get antibiotics within 60 minutes before the surgery starts.
- Clean the skin near your surgery site 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 issues such as allergies, diabetes and obesity could affect your surgery and treatment.
- Quit smoking. Patients who smoke get more infections.
- 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 surgery:

- Speak up if someone tries to shave you with a razor before surgery.
- Ask if you will get antibiotics before surgery.

After surgery:

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

What do I need to do when I go home?

- Before you go home, your doctor or nurse should explain everything you need to know about taking care of your wound.
- 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, call your doctor immediately.

Note: This information provided by The Joint Commission, American Hospital Association, the Centers for Disease Control and other organizations.

Participate in your Health Care & Safety

We encourage you to communicate completely and openly with your care provider.

- If a doctor, nurse or other health care professional tells you something you don't understand, please ask for clarification.
- We are committed to patient safety and prevention of wrong-site surgery. Your surgery site may be marked by the surgeon prior to surgery. The Operating Room team will take a timeout to complete a safety checklist before beginning your surgery.
- Before you receive medications or treatment, our staff should check your wristband to confirm that we are treating the correct patient.
- If you don't recognize a medication, please ask for an explanation.
- Expect our staff to introduce themselves. Look for their identification badges.
- Hand washing with soap and antibacterial gel or foam is the most important way to stop the spread of germs. If your health care providers do not wash their hands, please ask them to do so.

- It is your responsibility to provide us with an accurate history of your health, including allergies, prescription medications, supplements and over-the-counter medications that you are using.
- Patient safety is one of our primary goals. We strive to ensure that those who entrust us with their care receive the care they need in the safest environment possible. Please call our Patient Safety Hotline at 253-426-6289 if you have concerns about safety. We encourage you to report any employee that you believe is practicing in an unsafe manner.

MRSA at a Glance

MRSA, or methicillin-resistant Staphylococcus aureus, is a type of "staph" infection that has become resistant to some antibiotics. It is spread by skin-to-skin contact, through openings in the skin such as cuts and abrasions, crowded living conditions and poor hygiene.

Help to prevent the spread of MRSA:

- Wash your hands frequently with soap and water; use a hand sanitizer when your hands are not visibly dirty.
- Do not share personal items such as razors, towels or clothing.
- Keep all wounds covered with a clean, dry bandage taped on all four sides.
- Do not take antibiotics when they are not needed.

Bring to the Hospital

Bring the following items with you to your preadmission appointment and to the Surgery Center on the day of your surgery:

- Insurance card(s)
- Co-payment (cash, check and/or major credit cards accepted)
- Driver's license or photo identification
- List of medications you take, including vitamins and/or herbal supplements, with dosages of each
- Any paperwork from your doctor's office.

If you will be spending the night at the hospital following surgery, there are a few personal items that you may need to bring with you:

- Gown or pajamas
- Robe and slippers
- Personal toiletries (hair brush or comb, tooth brush, toothpaste, deodorant, items for denture care and/or contact lens care).

Do Not Bring to the Hospital

- Do not bring jewelry (wedding ring, watch, etc.) and other personal items. The hospital is not responsible for lost or missing items.

Please know our hospitals and properties are smoke-free and tobacco-free. If you would like nicotine-replacement therapy during your stay, please discuss this in advance with your doctor or preadmission clinic nurse.





At the Hospital

When You Arrive

- We will review your records to make sure all the necessary consent and insurance forms are completed and signed. If you have completed a preadmission visit, all your records should be ready when you check in.
- We will escort you to the proper location, ask you to undress and to put on a hospital gown that we will provide. Your own clothing will be returned to you after surgery.
- In most situations, you may have one person stay with you until it is time to go to the Operating Room.

- During surgery, your friends and family may wait in the comfortable Surgery Waiting Area.
 - Our hospitals feature convenient dining areas where food and beverages can be purchased.
 - Smoking and the use of all tobacco products are prohibited in the hospital and on all hospital property.
 - If you smoke, please ask your doctor or preadmission clinic nurse about nicotine-replacement therapy.

Preparing for Anesthesia

Our anesthesia provider will talk with you to review your medical history and to explain the type of anesthesia that is best for you.

In most situations, you may have one person stay with you until it is time to go to the Operating Room.

Dressing Changes and Wound Care

If your surgical incision still has a dressing, keep it clean and dry, and change it only as directed.

If your incision is stapled or sutured closed, these will be removed by our staff at your follow-up appointment.

Follow-up Care

Your doctor will tell you when to return to his/her office for a follow-up visit. Please call your doctor's office directly to schedule your appointments.

Your doctor may also want you to continue exercises, physical therapy or other treatment on an outpatient basis.

Showering and Bathing

Your doctor will tell you when you can begin showering or bathing. You may want someone nearby when you take your first bath or shower in case you need assistance.

Regular Activities

You will resume your regular activities as you feel ready to do so. However, check first with your doctor before resuming activities such as sexual intercourse, driving a vehicle and lifting.

Call Your Doctor if You:

- Develop a fever of 100.4 degrees Fahrenheit (orally) or higher that lasts longer than 24 hours
- Develop any unusual sensations such as numbness or tingling
- Experience pain in your lower legs
- Develop new or foul-smelling drainage from your incision
- Notice new redness or increased swelling on or around your incision
- Feel pain that is not relieved by pain medications

Continuing Your Care after You Go Home

You are the most valuable member of your health care team. By following the instructions provided by your doctor, your nurse and other medical professionals, you give yourself the very best opportunity for a speedy recovery.



Going Home

As you prepare to leave the hospital and go home, hospital staff will review the doctor's instructions for you to follow and discuss other important information about your care and recovery.

If you will be spending the night at the hospital, you will likely be discharged to go home early the next morning. At that time a nurse or another caregiver will review the doctor's instructions for you to follow.

Whether you will be going home the same day as your surgery or the next day, please make arrangements for your ride home. For safety, you should not drive yourself.

Prescription Medications

Take your medications as directed. Pain medications should not be taken with drinks containing alcohol.

Pain medications can cause constipation, which you can help prevent by eating fresh fruit, foods high in fiber (unless your doctor advises otherwise), and drinking plenty of fluids.

Ask your doctor when you should resume taking any medications that you were taking before surgery.

Purchasing Prescription Medications

If you stay overnight, you may ask your nurse to have your discharge prescriptions delivered to your room before you leave. You may conveniently purchase your prescription medications at a Franciscan Pharmacy (if one is available) or at the pharmacy of your choice. There are several Franciscan outpatient pharmacies to choose from:

Federal Way

Franciscan Pharmacy St. Francis
34503 9th Ave South, Ste. 110
Phone: 253-944-4040

Gig Harbor

Franciscan Pharmacy St. Anthony
(Mail Order Pharmacy)
Milgard Medical Pavilion
1511 Canterwood Blvd. NW
Phone: 253-530-2066

Lakewood

Franciscan Pharmacy St. Clare
11315 Bridgeport Way SW, Ste. A1087
Phone: 253-985-6290

Tacoma

Franciscan Pharmacy Tacoma
Franciscan Medical Building at St. Joseph
1608 South J Street
Phone: 253-274-7650

Are There Different Kinds of Anesthesia?

Yes. There are three main categories of anesthesia: general, regional and local. Each has many forms and uses.*

- In GENERAL ANESTHESIA, you are unconscious and have no awareness or other sensations. There are a number of general anesthetic drugs. Some are gases or vapors inhaled through a breathing mask or tube and others are medications introduced through a vein. During anesthesia, you are carefully monitored, controlled and treated by your anesthesia provider who uses sophisticated equipment to track all your major bodily functions. A breathing tube may be inserted through your mouth, and frequently into the windpipe, to maintain proper breathing during this period. The length and level of anesthesia are calculated and constantly adjusted with great precision. At the conclusion of surgery, your anesthesia provider will reverse the process and you will regain awareness in the Recovery Room.

- In REGIONAL ANESTHESIA, your anesthesia provider makes an injection near a cluster of nerves to numb the area of your body that requires surgery. You may remain awake or you may be given a sedative. You do not see or feel the actual surgery take place. There are several kinds of regional anesthesia. Two of the most frequently used types are spinal anesthesia and epidural anesthesia, which are produced by injections made with great exactness in the appropriate areas of the back. These are frequently preferred for childbirth and prostate surgery.
- In LOCAL ANESTHESIA, the anesthetic drug is usually injected into the tissue to numb just the specific location of your body requiring minor surgery (for example, on the hand or foot).

*Source: American Society of Anesthesiologists

During anesthesia, you are carefully monitored.



May I Request the Type of Anesthesia I Will Receive?

Yes, in certain situations. Some operations can be performed using different anesthetic procedures. Your anesthesia provider, after reviewing your individual situation, will discuss any available options with you. If there is more than one type of anesthetic procedure available, your preference should be discussed with your anesthesiologist in order for the most appropriate anesthetic plan to be made.

The anesthesia provider will discuss the benefits, risks and potential complications of anesthesia. Be sure to tell the anesthesia provider if you've ever had a negative reaction or experience with anesthesia in the past.

While anesthesia is generally considered safe, each patient may respond somewhat differently. Please discuss any concerns you have with the anesthesia provider.

Other Preparations

An IV may be started to provide a secure route for giving you medications during surgery. If necessary, hospital staff will also complete any final preparations for surgery, such as removing your dentures, glasses or contact lenses. These will be returned to you following surgery.

The anesthesia provider will discuss the benefits, risks and potential complications associated with anesthesia.

Drains and Dressings

Your doctor may place a drain in your incision during surgery to remove excess fluid and reduce pain. Most drains are removed within 48 hours. Many patients never feel the drain being removed; others say they feel only a brief stinging sensation.

The dressing placed over your surgical incision keeps the wound clean and dry. Hospital staff will change the dressing as needed. If you feel the dressing needs to be changed, please tell your nurse.

Hygiene

Because it is important to keep the surgical incision site clean and dry, you may not be able to bathe or shower for the first few days following surgery.

If you will be staying at the hospital overnight or longer, we can assist you in taking sponge baths if necessary. You will also be encouraged to do as much for yourself as possible.

Activity

Activity is an important part of recovery. It helps advance the healing process and prevent health-related complications.

Early and frequent activity helps your bowels and bladder return to normal function. We will encourage and assist you to get out of bed for a while on the same day following your surgery, unless your doctor instructs otherwise.

As your recovery progresses, we will show you how to increase your level of activity safely for your condition. For example, we will demonstrate exercises that improve flexibility, mobility and strength.

Depending on your surgery, we may start you on a program of physical and/or occupational therapy to help improve your stamina and independence.

As your recovery progresses, we will show you how to safely increase your level of activity.





IV Therapy

IV Therapy provides your body with fluids and nourishment immediately following surgery. You may also receive pain medications through the IV (intravenous) tube.

The IV tube is usually removed when you are drinking fluids and eating your normal foods. Tell your nurse about any discomfort you experience, or about any questions or concerns you have.

Diet

You will gradually resume your regular diet as your recovery progresses. Also, your hunger will increase as your recovery continues. Try to drink plenty of fluids, too.

Elimination

It is natural for your bowels to slow down after surgery. This is a normal effect of anesthesia and medications.

We will help you return to regular bowel activity by encouraging you to drink plenty of fluids and to increase your physical activity. Sometimes, medications are necessary to stimulate a bowel movement.

You may also have difficulty emptying your bladder during the first few hours after surgery. This is normal. We will assist you as needed with activity, medications, or a temporary catheter.

Tell your nurse about any discomfort you experience, or about any questions or concerns you have.

When It's Time for Surgery

We'll accompany you to the Operating Room by walking with you, pushing your wheelchair, or guiding your wheeled stretcher.

Your family and friends will not be permitted to go to the Operating Room. They may wait in the nearby Surgery Waiting Room. Status boards are available in the Surgery Waiting Rooms that will inform your family and friends when your surgery is complete.

Your doctor may be available to speak with your family and friends in the Surgery Waiting Area following your procedure.

In the Operating Room

The temperature in the Operating Room is generally cool, so you may feel chilly. Once you've been transferred to the operating table, the surgery nurse can get a blanket to keep you warm until everything is ready.

There will likely be quite a bit of activity when you arrive in the Operating Room as the care team completes preparations for your surgery. The sounds you hear, while they may be unfamiliar to you, are normal in a state-of-the-art Operating Room.

The anesthesia provider may begin your anesthesia at this time. If you receive a local or regional anesthetic, you may be awake during the surgery. The anesthesia provider may also give you a sedative for comfort, if you want. If you receive a general anesthetic, you will be completely asleep during the surgery.



In the Recovery Room

Following surgery, you will go to the Recovery Unit (also called the Post Anesthesia Care Unit) where a nurse will monitor your heart rate, blood pressure and surgical incision to be sure that all is well.

You may feel quite drowsy and you may experience some minor side effects from your anesthesia. Feel free to tell your nurse how and what you are feeling.

If you are feeling chilled, please tell your nurse who will be happy to provide you a warm blanket.

Your length of stay in the Recovery Unit will depend on the kind of surgery and anesthesia you have.

Depending on the type of surgery, you will eventually be released from the hospital to go home or taken to a hospital room where you will spend the night. This decision will be made by the doctor.

If You are Admitted to the Hospital

If you are assigned a room in the hospital for an overnight stay, hospital staff will notify your family and friends so they will know where your room is located.

Your length of stay in the Recovery Unit will depend on your surgery and anesthesia.

Assessments

If you spend the night at our hospital, hospital staff will regularly and carefully monitor your condition to make sure you are recovering as expected. This may require us to wake you for brief periods.

You can expect hospital staff to check your blood pressure, pulse rate, breathing, temperature and surgical incision.

The hospital staff may also have you begin deep breathing exercises to help clear your lungs and prevent complications.

Hospital staff will regularly and carefully monitor your condition.

Pain and Pain Medication

It is normal to have some pain and discomfort after surgery. Our goal is to keep your pain at a tolerable, or acceptable, level. While you may initially receive pain medications through your IV, you will transition to pain pills as soon as possible.

If you require continued IV pain medicine, you may be assigned a patient-controlled analgesia (PCA) machine that allows you to give yourself small doses of pain medication as you need it. Hospital staff will explain how to use a PCA.

As your recovery progresses, your nurse will offer you pain pills instead of shots. She/he will ask you to rate your level of pain on a scale of 0 to 10, with 10 being the most pain. This will help your nurse assess how effectively your pain medication is working.

Pain medication is given only at specific intervals as you need it. For this reason, it is very important that you communicate with your nurse about the level of pain you are experiencing.

Keeping your pain under control is one of the best ways to help speed your recovery process.