

The Physicians Centre Hospital

In Partnership with Physician Owners

A Guide to Your Stay

We are here
to help you **heal...**

This is an outline of what you can expect each day during your hospital stay. It is a general guide and may change to meet your needs. Your doctor and nurse are happy to discuss your questions and concerns. Please feel free to ask. Taking an active role in your care is a key ingredient to a successful surgery.



TABLE OF CONTENTS

After your Surgery is Scheduled	3
Packing for the Hospital	4
Things to Know	5
Day of Surgery—Morning of Surgery	6
Day of Surgery—After Procedure	7
Post-op Day One	8
Post-op Day Two	9
Safety	10
Preventing Infection and Constipation	11
Keeping Pain Under Control	12
Will you have the HELP YOU NEED at home?	13
Questions to Ask Before You Leave the Hospital	14
Home Discharge Criteria	15
New Medications and Side Effects	16-17
Side Effects of Other Medications	18-19
Symptoms to Watch at Home	20
Your Responsibilities in Managing Your Health	20
Important Numbers, Date and Time for Arrival	21

Forgot something? Please ask. We have common items like toothpaste, toothbrushes, combs, etc.

After Your Surgery is Scheduled

Do's

- If you are currently taking blood thinners, which also include aspirin and herbal medications, please contact your prescribing physician and surgeon for instructions on when this medication should be stopped.
 - Notify your surgeon if you develop an illness before your surgery (including skin or urine infection).
 - Shower **the night before** surgery and **the morning** of surgery with an antibacterial soap such as Dial or chlorhexidine. Rinse thoroughly and avoid getting into the eyes. Do not use any other soap, lotion, or perfume. These steps help reduce the risk of surgical site infections
 - Remember nothing to eat or drink. You may brush your teeth, but do not swallow any water. **Avoid all tobacco products and do not chew gum.**
 - Take your blood pressure, heart or seizure medications as prescribed with a tiny sip of water prior to arrival.
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- Leave your jewelry, including any body piercings, watches and valuables at home.
 - If you wear contacts, glasses, hearing aids, or dentures bring a case for safe keeping.
 - Wear loose comfortable clothing and good support shoes. Bring a pair of warm socks if needed.

**Do not eat or drink anything after
midnight the day of surgery!**

Packing for the Hospital

What to bring:

- Walker or cane if you use one at home
- X-rays, MRI or CT as directed by physician
- Glasses and/or hearing aids, if needed
- Contact lens solution/case
- Any special equipment you already have (sling, knee brace, etc.)
- CPAP or BiPAP machine with mask
- Medications that the nurse asks you to bring
- Inhalers if used
- Eye drops if used
- Pillow for comfort during your stay and ride home
- Your insurance card, government issued ID
- Emergency contact information

Optional items for your comfort:

- Personal hygiene items
- Robe that opens all the way down the front
- Slippers (we provide non-skid socks)

What to leave at home:

- Jewelry
- Large amounts of money
- Other personal valuables

Did you know that you can compare hospitals? Visit <https://www.medicare.gov/hospitalcompare/search.html> and put in our zip code, 77802. We consistently score higher than other hospitals in the area!

Info for your friends and family with you

We have a kitchen that prepares meals for our patients and visitors. If you get hungry while you are waiting for your loved one you can order a plate. Call 5035 from a hospital phone, ask a nurse, or ask the concierge to get in touch with the kitchen.

Special Dietary Needs?

Do you have any special dietary needs or concerns? We have a dietitian on staff that can discuss these with you if needed. Let a nurse know and we will contact the dietitian for a consult. Let us know prior to your surgery and we will make sure we have what you need available while you are here!

Clinical Pathway Morning of Surgery

What to do	<input type="checkbox"/> No food or drink except a sip of water with blood pressure medication <input type="checkbox"/> Do not take diabetic medications <input type="checkbox"/> Please take your blood pressure medication per your normal routine
Activity	<input type="checkbox"/> Please call for assistance if you need help
Education	<input type="checkbox"/> A nurse will review this booklet (clinical pathway) with you
Tests and Procedures	<input type="checkbox"/> An intravenous (IV) line will be placed <input type="checkbox"/> Routine blood or urine tests may be needed prior to surgery <input type="checkbox"/> Routine fingerstick blood sugar checks if diabetic <input type="checkbox"/> X-rays and EKG may be done per your physician's instructions
Comfort	<input type="checkbox"/> Our goal is to keep your pain well-controlled
Other:	

Clinical Pathway Day of Surgery—After Procedure

What to do	<input type="checkbox"/> Start with clear liquids then advance <input type="checkbox"/> Use your call light before you get up, even if you do not need help
Activity	<input type="checkbox"/> You may have compression devices on your legs or feet to prevent blood clots <input type="checkbox"/> We will encourage you to walk as soon as possible to prevent pneumonia and blood clots <input type="checkbox"/> On occasion, your surgeon may order bed rest; a nurse will let you know
Education	<input type="checkbox"/> A nurse / nursing assistant will orient you to the bed controls and call light <input type="checkbox"/> If ordered, instructions will be given on how to use the incentive spirometer (IS) 10 times/hour while awake to prevent pneumonia (Tip: use at each commercial break) <input type="checkbox"/> Instructions on how to use the patient-controlled analgesia (PCA) will be reviewed if your surgeon has ordered this
Tests and Procedures	<input type="checkbox"/> A tube (catheter) may be in your bladder to drain urine <input type="checkbox"/> A drain from the surgery site may be in place to remove fluid <input type="checkbox"/> A device may be on your finger to monitor your oxygen level <input type="checkbox"/> Your surgeon may order other items such as a brace, CPM (knee machine) or special pillows <input type="checkbox"/> Routine blood tests or fingersticks
Comfort	<input type="checkbox"/> IV pain medications or injections are common, depending on your surgeon's orders <input type="checkbox"/> Cooling pad or ice packs

Clinical Pathway Post-Operative Day One

What to do	<input type="checkbox"/> Increase oral fluid intake and advance diet <input type="checkbox"/> Use IS 10 times/hour while awake <input type="checkbox"/> Use your call light before you get up <input type="checkbox"/> Sit in a chair for meals <input type="checkbox"/> Walk with Physical Therapy (PT) if ordered by your physician
Activity	<input type="checkbox"/> Sit in chair 3 times/day, 30-45 min per session <input type="checkbox"/> Walk short distances 2 times a day <input type="checkbox"/> Use compression devices when in bed
Education	<input type="checkbox"/> A nurse will review your booklet and update your information board <input type="checkbox"/> A nurse or pharmacist will review medications with you and your family <input type="checkbox"/> A nurse will discuss surgical incision care as recommended by your doctor <input type="checkbox"/> The team will begin discussing your discharge plan
Tests and Procedures	<input type="checkbox"/> The urinary catheter will be removed when you are walking <input type="checkbox"/> Your surgery drain will remain until the drainage decreases <input type="checkbox"/> Your IV fluids may be removed <input type="checkbox"/> Your IV catheter will remain until you leave <input type="checkbox"/> Routine blood tests or fingersticks
Comfort	<input type="checkbox"/> IV pain medications or injections will start being changed to oral medication <input type="checkbox"/> Cooling pad or ice packs <input type="checkbox"/> Frequent position changes help to decrease pain and muscle spasms

Clinical Pathway Post-Operative Day Two

What to do	<input type="checkbox"/> You may start to eat a regular diet <input type="checkbox"/> Use IS 10 times/hour while awake <input type="checkbox"/> Sit in a chair <input type="checkbox"/> Walk <input type="checkbox"/> Continue PT if ordered
Activity	<input type="checkbox"/> Sit in a chair 4 times a day <input type="checkbox"/> Walk in the hall 3 times a day <input type="checkbox"/> Use compression devices when not walking to prevent blood clots
Education	<input type="checkbox"/> You and your family will be educated on medications <input type="checkbox"/> A nurse will review your booklet and update your information board <input type="checkbox"/> The team will continue discussing your discharge plan with you
Tests and Procedures	<input type="checkbox"/> Your surgery drain will be removed when drainage is minimal <input type="checkbox"/> Your IV will remain in until you leave <input type="checkbox"/> Routine blood tests or fingersticks
Comfort	<input type="checkbox"/> Oral pain medication <input type="checkbox"/> Cooling pad or ice packs <input type="checkbox"/> Frequent position changes

Safety is our **TOP** priority.

We take safety seriously. Although you may feel like you are answering the same questions repeatedly, this has been shown to improve safety as the entire healthcare team has verified the same information.

CHECKING YOUR ARMBAND

As an added precaution to ensure that we are performing the right treatment, test or administering medication, we will be checking your armband and verifying your name and date of birth.

PREVENTING INFECTION

We prevent infections by washing our hands before and after each patient and by following national recommendations on antibiotic therapy.

CONFIRMING YOUR PROCEDURE

We will ask you to be involved in this by identifying your procedure and confirming the site that your surgeon marks.

PREVENTING BLOOD CLOTS

To prevent serious complications from blood clots, we will assess your history and risk factors. Please tell your healthcare team of any previous blood clots or medications

What You Can Do to Prevent Infection

- Tell your physician about your medical history; diabetes, allergies, smoking and obesity can increase your risk of infection
- Ask that healthcare providers and family wash their hands before and after visiting you
- Wash your hands with soap and water for 20 seconds before and after eating, using the restroom, or caring for your incision
- Always follow your doctor's instructions for wound care
- Keep pets away from incision sites

Preventing Constipation

Pain medications, certain types of anesthesia and decreased activity can lead to painful constipation.

Here are some prevention methods:

- Drink plenty of fluids
- Change position frequently
- Get out of bed and walking as soon as possible
- Stool softeners or laxatives may be given

Keeping Pain Under Control

We care about your pain and need your help...

ASSIST US IN RATING YOUR PAIN

A nurse will ask you to rate your pain on a scale from 0 to 10.

0	1	2	3	4	5	6	7	8	9	10
No pain	Mild pain		Moderate pain			Severe pain		Worst pain		
Nada de dolor	Poco dolor		Dolor moderado			Mucho dolor		Peor dolor		

BALANCING PAIN WITH SAFETY

Too little pain medication makes it difficult to get out of bed.

Too much could increase risk of falls or trouble breathing.

The nursing staff will do everything they can to keep your pain in balance.

SET REALISTIC EXPECTATIONS

We will help you to set a Functional Pain Goal that allows you to be functional while preventing unwelcome side effects.

Immediately after surgery, a pain goal of 0 is unrealistic. During the nursing health history, we will ask you questions to help reach a tolerable and realistic expectation.

NO HERO ZONE!

Ask for pain relief before it becomes uncomfortable. It is easier to control if we catch it early and you will find it easier to get out of bed and walk with the medications. Remember... no heroes!

Will you have the HELP YOU NEED at home?

Things to consider:

- Who will do the housekeeping?
- Who will take care of children or pets?
- How will meals be prepared?
- How will I get groceries?
- How will I get to my doctor's appointment?
- Are there stairs at home that may be difficult?
- Are there rugs that may be a tripping hazard?
- Do I need a non-skid bath mat, handheld shower head or shower chair to prevent slips?
- Will I need any type of assistive devices like a walker or crutches?

Your care team, which includes your physician, nurses, and physical therapists will be working with you and your insurance company to get you what you need at home.

Questions to Ask Before You Leave the Hospital

1. Is my pain under control? Do I feel well enough to go home?
2. Do I have new medications and what are their side effects?
3. How do I take care of my wound?
4. What are the signs and symptoms of infection?
5. Is there someone to drive me home?
6. What activity am I allowed to do when I leave the hospital (walking, driving, bathing)?
7. Am I comfortable knowing how to use the equipment (walker, brace, crutches, wheelchair, etc.)?
8. Do I have the help I need at home after surgery?
9. Has my doctor addressed any concerns regarding my care?

Home Discharge Criteria

You can be discharged home when:

- Your vital signs (blood pressure, heart rate, etc.) are stable
- You can walk safely and transfer with minimal assistance
- You are eating and drinking enough
- Your pain is controlled on oral pain medication
Functional Pain Goal _____
- You and/or your family understand your medications
- Your drain and/or wound care can be performed at home by you, your family or a visiting nurse
- You and/or your family understand the signs and symptoms of infection
- You are urinating without a catheter
- You have a family member or friend to take you home

New Medication Side Effects

Purpose	Common Side Effects
Narcotic pain relief	Dizziness, drowsiness, constipation, upset stomach, rash, confusion
Anti-inflammatory	Upset stomach, sleeplessness (Decadron and prednisone only)
Muscle spasm or decreases nerve pain	Drowsiness, dry mouth, dizziness, upset stomach, nausea, vomiting
Calms nerves or makes you sleepy	Dizziness, headache, unsteady walking, dry mouth or throat
Antibiotics	Loss of appetite, stomach cramps, headache, dizziness, flushing, diarrhea, sore mouth
Nausea / vomiting	Headache, constipation, drowsiness
Heartburn or reflux	Headache, diarrhea
Allergic symptoms	Dry mouth, drowsiness, dizziness
Sore throat	Numbness of mouth or throat
Constipation	Diarrhea, nausea, stomach cramps
Iron supplement	Constipation, dark stool, upset stomach

The following list includes the most common medications that may be new to patients after surgery. If you have questions about other medications, please ask your nurse. Our pharmacist would be happy to review your medications with you. Simply ask your nurse.

Examples Brand (generic)
Norco, Lortab, Vicodin (hydrocodone/acetaminophen), Oxycontin (oxycodone), morphine, fentanyl, Demerol (meperidine), Dilaudid (hydromorphone), Nucynta (tapentadol), Ultram (tramadol)
Celebrex, Decadron, hydrocortisone, ibuprofen, Mobic (meloxicam), Toradol, prednisone
Robaxin (methocarbamol), Soma (carisoprodol), Valium (diazepam), Skelaxin (metaxalone), Neurontin (gabapentin), Fexeril (cyclobenzaprine), Lyrica (pregabalin)
Valium (diazepam), Ativan (lorazepam), Versed (midazolam), Xanax (alprazolam), Ambien (zolpidem), Restoril (temazepam)
Ancef (cefazolin), Keflex (cephalexin), Cleocin (clindamycin), Vancocin (vancomycin), Levaquin (levofloxacin), Rocephin (ceftriaxone)
Zofran (ondansetron), Phenergan (promethazine), scopolamine patch
Nexium (esomeprazole), Pepcid (famotidine), Prevacid (lansoprazole), Prilosec (omeprazole), Protonix (pantoprazole), Zantac (ranitidine)
Benadryl (diphenhydramine)
Cepacol lozenges (benzocaine/menthol)
Colace, milk of magnesia, Miralax, Dulcolax (bisacodyl)
Ferate (ferrous gluconate), SlowFE (ferrous sulfate)

Side Effects of Other Medications

Purpose	Common Side Effects
Blood thinner to stop or break up clots	Risk of bleeding, upset stomach
Lowers cholesterol	Headache, muscle pain, stomach upset
Heart rhythm problems	Dizziness, headache
Lowers blood pressure	Dizziness (especially on standing), cough
Lowers blood pressure and heart rate	Headache, dizziness/drowsiness

Our hospital does not charge separately for medication, so we will use our stock medications as much as possible at **NO COST** to you.

However, we may ask you to bring medications that we do not routinely stock or medications that need nursing/pharmacy review.

These are some additional medications that you may be taking at home, depending on your medical history.

Examples Brand (generic)
Lovenox (enoxaprin), Heparin, Coumadin (warfarin), Aspirin, Plavix (clopidogrel)
Lipitor (atorvastatin), Mevacor (lovastatin), Pravachol (pravastatin), Crestor (rosuvastatin), Zocor (simvastatin)
Pacerone/Cordarone (amiodarone), Digitek or Digitalis (digoxin)
Lotensin (benzapril), Capoten (captopril), Vasotec (enalapril), Zestril (lisinopril), Accupril (quinapril), Altace (ramipril), Avapro (irbesartan), Benicar (olmesartan), Diovan (valsartan)
Tenormin (atenolol), Coreg (carvedilol), Lopressor or Toprol XL (metoprolol), Cardizem/Cartia XT/Tiazac/Dilacor XR (diltiazem)

Symptoms to Watch at Home

Please call your physician if you have any of the following:

- Temperature greater than 101.5°
- Increased redness or swelling from wound
- Increased bleeding or drainage from wound
- Decreased movement or sensation

If you have questions, please call a nurse at 979.731.3110.

Your Responsibilities in Managing Your Health

To better manage your health at home:

- Follow your discharge instructions
- Keep your next appointment with your surgeon
- Eat a well-balanced diet
- Drink lots of fluids to avoid constipation
- If you have a CPAP or BiPAP machine, wear it whenever you lie down

IMPORTANT NUMBERS

Your Physician's Office

Hospital Number for Nursing	979.731.3110
Dietary	979.731.5035
Housekeeping	Use call button
Pharmacy	Use call button
Pre-Admission Testing	979.731.3207
Dietitian	979.731.3100

Inpatient Manager	Courtney Coats	979.731.3932
Chief Nursing Officer	Suzy Hoyle	979.731.3149
Chief Executive Officer	Kori Rich	979.731.3930

Date of surgery:

Arrive at:

**This booklet is part of a national project.
Project Re-engineering Discharge (RED) is
designed to improve safety and reduce
re-hospitalization rates.**

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