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Your surgery is scheduled at:

- **Altru Hospital**
  701.780.5690
  1200 S. Columbia Rd
  Grand Forks, ND 58201

- **Altru Specialty Center**
  701.732.7320
  4500 S. Washington St.
  (West Entrance)
  Grand Forks, ND 58201

- **Truyu Aesthetic Center**
  701.780.6623
  3165 DeMers Avenue
  Grand Forks, ND 58201
Admission

» Please check in at the appropriate registration desk.

» You will have an ID (Identification) bracelet applied. At Altru, expect to have your ID verified before any care is delivered as a part of providing safe patient care.

» After your registration, your pre-op preparation will begin. This will include any lab work or procedures your surgeon ordered.

» A nurse will then complete your admission.

» You will put on a gown and place your clothing in a garment bag.

» You will receive a numbing medication before your IV is started to minimize discomfort.

» If you have not signed your surgical consent form, you will be asked to complete this. This form gives your surgeon permission to perform the surgery. Your signature indicates that you understand the nature of the operation and the risks. Please feel free to discuss any questions with the surgeon or nurse.

» If your surgery has a left, right or bilateral, your surgeon will use a marker to mark the surgical site.

» Shortly before going to surgery, you will be asked to empty your bladder (urinate).

» Your glasses, dentures, contacts, wigs, etc. will be removed and secured with your clothing until you return from surgery.

Types of Sedation/Anesthesia

» You will meet your anesthesia team (a doctor of anesthesia and a nurse anesthetist). They will review your medical history and explain the type of anesthesia available. Any questions about anesthesia can be asked at this time. You will be asked to sign your anesthesia consent form at this time, if you have not signed earlier.

- **General Anesthesia:** You will be completely asleep during the entire procedure.

- **Monitored Anesthesia Care (MAC):** MAC keeps you very drowsy during surgery. You may be awake, but you will likely not remember much and you will be kept comfortable.

- **Regional and Local Anesthesia (Referred to as a block):** This numbs only part of the body. The analgesic won’t make you fall asleep, but you may be given other medication to help you relax or sleep.

- **For our pediatric patients:** Anesthesia is given to children through a mask. To ease their fears, children of appropriate age will be shown an anesthesia mask and be allowed to hold it. Also, a flavor can be picked out to make the mask smell good when it is put to their face.

- Your child will still be awake when they leave for the operating room. They may be carried by staff, ride on a cart or pulled in a wagon.

The Operating Room (OR)

» You will be aware of entering the OR suite, but may not remember any of the events due to medication you will have been given.

» Anesthesia staff will be monitoring you the entire time you are in surgery.

» You will have a heart monitor, a blood pressure cuff and a finger probe to monitor your vital signs.

» The room is cool, but you will be kept warm throughout the procedure.

Post Anesthesia Care Unit (PACU/Recovery Room)

» Following your surgery you will spend time in PACU while you are waking up from surgery.

» Your family/friends will be notified of your arrival.

» The PACU staff will monitor you closely and when they feel you are ready they will return you to the post-operative area, where your family/friends may join you.

» The length of your post-operative stay varies with the type of surgery and anesthesia.
For our pediatric patients:
- Due to the effects of anesthesia your child may return fussy and irritable. This is common and usually resolves quickly.
- Some children may be inconsolable for a short time but this does not mean they are in pain.
- The nurses are trained to assess and treat pain in pediatric patients.

Discharge Process
- It is during this time your surgeon will determine your length of stay. Some patients are able to go home the same day. Other patients, depending on the surgery, can be expected to spend one or more nights in the hospital. You will be provided an orientation to the room setup and hospital routine when staying overnight.
- You will be discharged when your condition is stable: No excessive bleeding, pain under control, able to tolerate liquids, and able to get up without getting light-headed or faint. In some cases, able to pass your urine.
- When you are ready for discharge you will be given written instructions for your care, follow-up appointment(s) and prescription(s).
- Please arrange for a responsible adult driver to take you home.
- **You may not drive yourself home.**
- If possible, please refrain from using public transportation.

Pain Management
- Managing your pain is important to us. However, you should expect to feel some discomfort after surgery. Your level of discomfort will be evaluated before and after surgery.

We want to ensure your comfort to the best of our ability.
- Talk to your caregivers about your pain and pain relief measures. At Altru we utilize a pain scale in which you rate your pain on a scale of 0 (no pain) to 10 (worst pain). Your responses will guide your caregivers in providing the proper dosages of pain medication, as well as other comfort measures, to meet your needs.
- When a pain-relieving measure is provided, you can expect to be re-evaluated shortly after to assess its effectiveness.
- Fear of addiction is common for people who take opioid analgesics (narcotics) for pain relief. Drug addiction is defined as dependence on the regular use of opioid analgesics to satisfy physical, emotional and psychological needs rather than for medical reasons.
- Pain medications are **not** addictive when the medication is prescribed for a short time and stopped gradually.

Tips for Managing Pain
**With medication:**
- Take your pain medications routinely as directed or before activities that can make your pain worse. This can help to keep your discomfort under control.
- Some common side effects from narcotic medication use include: sleepiness, constipation and nausea.
- Taking medications with food can help to prevent nausea, along with placing a cool washcloth on your forehead.
- If you experience nausea while you are at the hospital, a medication that helps reduce the feeling of nausea can be given.
Other Treatments:
There are a number of treatments available for pain management whether you are here in the hospital or at home. Your diagnosis may impact which treatments you are able to do. Medications are only one part of the puzzle of pain management. Here are some options to start with:

» Acupuncture
» Aromatherapy
» Assistive devices
» Counseling via pastor, professional, etc.
» Exercise on your own
» Physical Therapy, Occupational Therapy
» Heat and/or cold
» Laughter
» Massage
» Pacing
» Positioning
» Relaxation, imagery, meditation, self-hypnosis or breathing techniques
» Spinal cord stimulator
» Support group
» Transcutaneous electrical nerve stimulation (TENS)
» Water therapy, bathing/shower, whirlpool
» Interventional pain management (must have referral from provider)
» Music Therapy
» Therapeutic touch
» Pet Therapy

What can you do when your pain gets worse?
Tell your doctor or nurse. Tell them how bad your pain is or if you’re in pain most of the time. Tell the doctor if the pain medicine you’re taking is not helping.

*Some therapies are available only as an outpatient. Speak to your primary care provider.

Falls Prevention
Whether you are going home the same day of your procedure or if you are spending the night(s) in the hospital, because you had surgery you are at a greater risk for falling.

At home

» It is normal to feel dizzy and sleepy for 12 to 24 hours after your surgery.
» When a person is dizzy or sleepy, he or she may be at risk for falling.
» The first day/evening following your surgery we encourage you to have a responsible adult with you for your safety.
» Place a pillow or folded blanket on a chair to make sitting/getting up easier.
» Have additional pillows available for extra support/elevation if needed.
» Having a bedroom on the main level may be easier depending on the type of surgery.
» Your bedroom should be free of clutter for your safety.

In the hospital
Here at Altru, we practice hourly rounding. A staff member will be in your room every hour to assess your needs.

You can avoid a fall by working with your healthcare providers, asking for help when needed, and following a few reminders:

» Always sit at the side of the bed before you get up. Take your time, and wear no-slip socks/shoes at all times.
» Avoid using your bedside table as support. It has wheels and can roll away.
» You may have an alarm on your bed. If it goes off, please do not get out of bed. A nurse will be in to help you.
» If you are at high risk for a fall, a caregiver will need to stay in the bathroom with you. We respect your privacy as much as possible. Your safety is our top priority.
Recovering at Home

For the first 24 hours after your surgery:

» Do not drive or use heavy equipment.

» Do not make important decisions or sign documents.

» Avoid alcohol.

Plan for help at home for a couple days/weeks following your procedure. You may need help with:

» Dressing changes

» Bathroom trips

» Medication administration

» Transportation

» Outdoor activities (mowing/shoveling)

» May need to have a family member watch children and/or pets

Getting your house ready

» Make everyday items easier to reach (dishes, toiletry items, etc.)

» Rearrange furniture to allow extra room for walking.

» Remove anything from the floor that may cause tripping (rugs, cords, newspapers).

» Night lights are helpful to ensure safe walking in the evening.

» Install grab bars near the toilet and the bathtub or shower.

» Non-skid mat, shower stool or raised toilet seat may make bathroom trips easier.

» Apply non-slip treads on stairs.

» Put frequently used items in easy to reach places that do not require using a step stool.

What is a Surgical Site Infection (SSI)?

» An infection that occurs in the part of the body where the surgery took place.

» It can be caused by bacteria (germs) in most hospital environments, but also from bacteria you normally have on your skin.

» Most patients who have surgery do not develop an infection.

- One to three out of every 100 patients develop infections.

- Some surgeries have higher risk of infection than others.

What you can do to help prevent getting an infection:

» Your doctor or nurse will explain everything you need to know about taking care of your wound.

- Please be sure to ask questions if you don’t understand the information given to you.

» Inspect your incision every day at home.

» Keep incision clean and dry.

» Bed should have clean linens.

» Have a clean house to eliminate dirt and bacteria.

» Follow your doctor’s orders as to if you can get your staples or sutures wet.

» Always wash your hands before and after caring for your wound.

- If someone is helping you, make sure they do the same.

- Follow the directions on how and when to change your dressing.

- Do not allow family or friends who visit you to touch the surgical wound.

» Your nurse will provide phone numbers for you to call if you have questions while at home.

Home Care

As you recover at home, it is important you understand which symptoms to watch for and when it is necessary to report them to your physician.

CONTACT YOUR PROVIDER if you experience any of the following symptoms or situations:

1. Nausea or vomiting that lasts longer than 24 hours after surgery.

2. A large amount of bleeding or discharge.

3. If the pain medication is not relieving or reducing your pain.

4. If the incision begins to open or separate.

5. If you experience signs or symptoms of a possible infection.

- Fever greater than 101 degrees F.

- Chills
- Pus-like drainage (white, yellow, or green in color); and/or an increasing amount of drainage.

- Increasing tenderness or pain near the wound site.

6. If you are not improving by day four after the day of surgery.

A nurse will contact you by phone on your first or second post-op day to assess how you are feeling, and to answer any questions you might have. If your surgery was performed on a Friday we will call you the following Monday.