

Preparing for Your Surgery/Procedure



THANK YOU FOR TAKING CARE OF YOUR HEALTH. TOGETHER, WE ARE MORE THAN MEDICINE.

I AM HAVING SURGERY OR A PROCEDURE - NOW WHAT?

Ask questions! You know your body best. Here are some topics to discuss ahead of time with your surgeon and surgical team:

- Ask what you need to do before the surgery or procedure. Are there other appointments, providers, tests, etc. to complete?
- Mention major medical conditions such as diabetes or a history of having a heart attack or stroke.
- Let your surgeon know if you have a fear of small, confined spaces.
- Tell your surgeon about all medications you are taking, especially any kind of blood thinners (i.e. aspirin, ibuprofen, or Plavix) and why.
- Tell your surgeon if you need paperwork filled out about missing time from work or school.
- Confirm that we have the best phone number to reach you.

- Discuss any transportation issues you may have.
- Ask about your expected length of recovery and if your surgery will require you to spend the night in the hospital.
- Ask about appointments after your surgery / procedure such as follow-ups, physical therapy or wound care.
- Maintain your normal physical activity and complete any exercises that have been assigned by your surgeons or physical therapists.
- Ask about home care instructions and when you can resume taking your medications.

SURGERY/PROCEDURE DETAILS

Date:	Time:	
Your surgery/procedure is schedu	ıled with:	
To cancel your surgery, call your s (MonFri. 8:00 a.m 4:00 p.m.).	surgeon's office: If after 4:00 p.m. or the weekend, call	 216-957-6367.
Your surgery/procedure is schedu	ıled at the following MetroHealth locat	ion:
Brecksville Health and Surgery Center 9200 Treeworth Blvd. Brecksville , OH 44141	Cleveland Heights Medical Center 10 Severance Circle Cleveland Heights, OH 44118	Main Campus Medical Center 2500 MetroHealth Drive Cleveland, Ohio 44109
Parma Medical Center 12301 Snow Road Parma, Ohio 44130	West 150th Health and Surgery Center 4330 West 150th Street Cleveland, Ohio 44135	

WHAT TO EXPECT - FIRST STEPS

- When you schedule your surgery/procedure, your provider's office may schedule a Pre-Admission Testing (PAT) appointment for you.
- If you are going home the same day as your surgery/procedure, ask a friend or family member to give you a ride to and from your surgery/procedure. On the day of the surgery/procedure, our staff will call to verify your ride. If we cannot reach the adult who is picking you up, your surgery may be postponed.
- Uber/Ride Shares do NOT count as a responsible adult to take you home.
- Make sure a responsible adult can stay with you for the first 24 hours after the surgery/procedure. You are at an increased risk of falls during this time.
- Schedule your follow-up appointment and/or any other post-surgery care you will need. Contact your surgeon's office or our Customer Care Center at 1-800-MYMETRO for help.
- Our convenient lab locations and outpatient health centers will schedule appointments to complete your labs. Schedule lab visits through your MyChart account or by calling 1-800-MYMETRO to schedule an appointment.

Lab Locations:

Bedford Medical Offices

19999 Rockside Road Bedford, OH 44146

Broadway Health Center

6835 Broadway Avenue Cleveland, Ohio 44105

Brecksville Health and Surgery Center

9200 Treeworth Blvd. Brecksville, OH 44141

Cleveland Heights Medical Center

10 Severance Circle Cleveland Heights, OH 44118

Middleburg Heights November Family Health Center

7800 Pearl Road Middleburg Heights, OH 44130

Main Campus Medical Center

2500 MetroHealth Drive Cleveland, Ohio 44109

Parma Medical Center

12301 Snow Road Parma, Ohio 44130

PLAN AHEAD

office as soon as possible.

YOU SHOULD NOT BE WORKING ON YOUR SURGERY/PROCEDURE DAY. Arrange for the necessary time off from work including the day of the procedure.
 BRING THESE ITEMS WITH YOU: ID card (driver's license or passport) Insurance card. List of your medications (or bring them with you). CPAP or BIPAP machine. Assistance items such as oxygen, inhaler, cane, walker, etc Eyeglasses if you wear contacts. Any toiletries you might need. Comfortable clothing.
 Leave all of your valuables at home (wallet, jewelry, and other items). Do not wear a strong-smelling fragrance (perfume, cologne, cream or lotion). Do not wear contacts to the hospital.
 CANCELLING YOUR SURGERY/PROCEDURE If you get a cold, are not feeling well, or become pregnant, please call your surgeon's

A FEW THINGS TO KNOW

YOUR COMPLETE HEALTH HISTORY IS VERY IMPORTANT TO DISCUSS WITH YOUR CARE TEAM. THIS INCLUDES:

- Have you ever had a surgery or procedure before?
- Is anything implanted in your body?
- How did you do with anesthesia?
- Imediate family member who had trouble with anesthesia?
- Do you have diabetes?
- Family history of stroke or heart related conditions?
- Sleep apnea or told you are at high risk?
- Complete list of medications and any herbs or supplements our Pre-Admission Testing Center may need to adjust them during the time before and after your surgery/procedure.

EMMI EDUCATION

- Emmi (Expectation Management and Medical Information) is a web-based program that
 provides educational videos that explain medical information in an easy to understand way.
- Many surgeons' offices will send out Emmi education directly related to your surgery.
- You can access Emmi Videos on any device through your existing MyChart account.

MYCHART REGISTRATION

- MyChart gives you online access to your medical record.
- You can view procedure results, messages from your doctor, and your key medical information.
- Sign up at https://mychart.metrohealth.org.

YOUR DOCTOR WILL ASK YOU ABOUT YOUR HEALTH HISTORY. BE PREPARED TO TELL YOUR DOCTOR ABOUT THE FOLLOWING:

All the medications you are taking, including:

- Prescriptions
- Over-the-counter drugs
- Vitamins
- Herbal supplements

IF YOU HAVE ANY MEDICATION ALLERGIES.

IF YOU ARE TAKING ANY MEDICATIONS THAT MAY CAUSE BLEEDING. SOME OF THESE ARE:

 Coumadin, Lovenox, or Plavix. Over-the-counter medications like ibuprofen (Motrin, Advil), naproxen (Aleve), or aspirin can cause bleeding as well. Some vitamins and herbs, such as garlic and fish oil, may also add to the risk for bleeding.

IF YOU HAVE A HEART STENT IN PLACE, TALK TO THE DOCTOR THAT PLACED THE STENT BEFORE YOU STOP ANY MEDICATIONS THAT THIN YOUR BLOOD.

IF YOU MAY BE PREGNANT OR ARE PREGNANT.

IF YOU OR A FAMILY MEMBER HAVE HAD DIFFICULTY WITH ANESTHESIA, SUCH AS HAVING A HARD TIME WAKING UP OR HAVING A PROBLEM CALLED MALIGNANT HYPERTHERMIA OR MH.

IF YOU HAVE A DENTAL BRIDGE, LOOSE TEETH, OR OTHER PROBLEMS WITH YOUR TEETH.

HEALTHY HABITS BEFORE A SURGERY/PROCEDURE

	EXERCISE
•	This will help make sure your body is as healthy as possible before surgery. If you are already exercising, keep up the good work. If you are not, start slowly adding activities to your daily schedule. Something as simple as a 15 minute walk a day is better than nothing at all. It doesn't have to be difficult or tiring.
	DIET
	Eating a well-balanced diet is also helpful to prepare your body. MetroHealth's Nutrition Services team includes registered dietitians, dietetic technicians and diet clerks who aim to provide proper nutrition for optimal health and healing. You need a referral from your primary care provider. Call 216-778-7835 to schedule an appointment.
	SMOKING
•	STOP SMOKING COMPLETELY before your surgery. This will reduce your risks of lung problems and promote healing. For more information about our Nicotine Dependence Prevention and Treatment Program visit our website: metrohealth.org/allergy-and-immunology.
	ALCOHOL
	Do not drink any alcohol 24 hours before surgery. It is important that you are honest about the amount of alcohol you drink.
	DRUGS/ILLEGAL DRUGS
	STOP using drugs/illegal drugs because they can change the needed dosage of anesthetics and can cause serious complications during and after your surgery/procedure.
	PLANNING
	Make sure everything is ready for you when you go home after your surgery/procedure. You may need help from family or friends with meals, laundry, bathing, cleaning, etc. Let your nurse or doctor know if you have concerns about going home.

Our department of Social Services may be able to help if you are concerned about going home after your surgery/procedure – please let your care team know.

WHAT IS ANESTHESIA?

You may receive either general, regional or sedation anesthesia depending on the type of surgery or procedure you are having and what is best for you.

GENERAL ANESTHESIA

- The anesthesia team gives general anesthesia by injection into your IV or you may breathe in a gas through a mask placed over your face. You will be asleep, quiet and pain free while doctors perform surgery or a procedure on you.
- You may breathe in a gas through a mask placed over your face. You will be asleep, quiet and pain free while doctors operate on you.
- After you fall asleep, the anesthesia team will place a breathing tube in your mouth to help you breathe.
- The doctor will connect the device to a machine that will help your breathing.
- You will also inhale the anesthetic gas through this machine.
- You always have a member of the anesthesia team with you while you are under anesthesia. The entire team will make sure you are safe during your surgery.

Benefits of General Anesthesia:

- Allows you to sleep.
- Relaxes your muscles.
- Helps you to relax and be pain free.
- Keeps you from remembering the surgery.
- Lets the doctor manage your airway, breathing, and blood flow.

What problems could happen?

- Heart problems.
- Breathing problems.
- Dizziness.
- Upset stomach and throwing up (also known as nausea and vomiting).

Common side effects of general anesthesia:

- Sore throat.
- Nausea and vomiting.
- Exhaustion and sleepiness for an extended period of time, usually hours.
- Other potential risks may be discussed with you in detail on the day of your surgery or procedure. If you have questions, please ask. General Anesthesia is very safe.

REGIONAL ANESTHESIA

Medication is injected near nerves with a very small needle to numb the area of your body that requires surgery. Regional anesthesia includes nerve blocks, epidurals, and spinals. You may receive your regional anesthesia in the preoperative area prior to the surgery/procedure. Regional anesthesia is extremely safe with a very low risk of infection, nerve injury, or adverse reaction.

Benefits of Regional Anesthesia:

- Wake up faster.
- Several hours of pain control, sometimes as long as 12-24 hours of pain relief.
- Better pain control than opioids (pain pills) alone.
- Less need for opioids and fewer side effects including nausea.
- Easier breathing from better pain control.
- Easier participation in physical therapy.
- You may go home earlier after your surgery or procedure.

SIDE EFFECTS OF REGIONAL ANESTHESIA

- You will feel uncomfortable when the shot is given.
- Tingling or loss of sensation once the anesthesia takes effect.
- Minor bruising, bleeding or soreness where the shot was given.

How is a nerve block performed?

- Your anesthesia team may use a painless ultrasound machine to find the nerves that send pain signals to your brain.
- The area is cleaned and a thin needle is used to add numbing medication around these nerves.
- Over the next 10-20 minutes, this area of your body will slowly get numb.
- This medication lasts around 8-24 hours.

WHAT IS SPINAL AND EPIDURAL ANESTHESIA?

- Spinal and epidural anesthesia completely numbs the body below the belly or chest.
- Spinal anesthesia lasts about 2-4 hours.
- Medication may be given in your IV so you can relax or fall asleep.
- Spinal anesthesia is done using a small needle in the back after cleaning and numbing the skin.
- The process to place an epidural is like spinal anesthesia, but a small catheter (thin plastic tube) is left in your back to keep giving medicine and pain relief.
- In addition to avoiding the side effects of general anesthesia, spinal and epidural anesthesia helps decrease the pain right after a surgery/procedure.

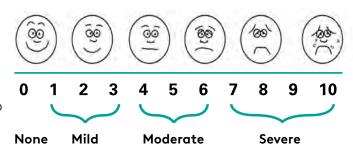
POST ANESTHESIA CARE UNIT (PACU)

- After your surgery/procedure, you will be taken to the PACU.
- Our nursing staff will watch you as you wake up.
- They can give you medications to help ease pain, discomfort, or nausea/vomiting.
- The anesthesia team will decide when you are ready to leave the PACU and go home or go to the nursing floor. This is based on how you wake up and recover from anesthesia.
- You most likely will feel tired and groggy. Plan to sleep for the rest of the day.

PAIN CONTROL

Pain relief is extremely important because it helps you:

- Breathe easily.
- Move more easily.
- Sleep better.
- Recover faster.
- There are many ways to help control pain after your procedure, if needed. Please keep us informed on how you are doing so we can help.



^{*}Pain medicine may not get rid of pain completely but keeps it at a level that allows you to move around, eat, and breathe easily. It is possible to never get to ZERO.

1 DAY BEFORE YOUR SURGERY/ PROCEDURE

A SCHEDULER WILL CALL YOU ONE BUSINESS DAY PRIOR TO YOUR SURGERY OR PROCEDURE (IF IT IS ON A MONDAY, YOU WILL GET A CALL ON FRIDAY) BETWEEN 10:30 A.M. AND 3 P.M.

If you miss the phone call and it is after 3 p.m., please call 216-957-6367. They will be happy to help you.

DURING THE CALL, THE SCHEDULER WILL REVIEW IMPORTANT INFORMATION INCLUDING:

- The MetroHealth location for your surgery/procedure.
- Your type of surgery/procedure.
- What time you should arrive.
- What you are allowed to eat and drink before your surgery/procedure.

FASTING GUIDELINES (NPO)

Adult Patients:

- Adult patients may have plain water (no additives) up to 2 hours prior to surgery arrival time.
- Otherwise, no food or any other type of liquids for **at least 8 hours prior to surgery arrival time.**
- A small sip of water with approved morning medications on the day of surgery is acceptable.
- The following patient populations should follow the instructions provided by their surgeon's office.

All Enhanced Recovery After Surgery (ERAS) cases

- Bariatrics
- All Endoscopy patients, this subset includes colonoscopies, EGDs, scoping procedures, etc.

Special considerations:

- If you are a diabetic patient and feel like you are experiencing low blood sugar, you may:
 - » Have a small sip of a clear liquid.
 - » Alert your anesthesiologist.

Pediatric Patients (under the age of 12 years old):

- Patients are not to have solid food for **8 hours** prior to coming for surgery.
- Patients can have **infant formula or non-human milk** (skim, 2%, whole, nut-milks, soy, etc.) **6 hours** prior to coming for surgery.
- Patients can have breast milk up to 4 hours prior to coming for surgery.
- Patients can have clear liquids (water, Pedialyte, Gatorade, Kool aid, apple juice, etc.) up to 2 hours prior to coming for surgery.

Follow any instructions that were given to you by the Pre-Admission Testing Department about medications, etc. or any other special instructions your doctor gave you about preparing for the surgery/procedure.

MAKE SURE SOMEONE CAN STAY WITH YOU FOR THE FIRST 24 HOURS AFTER YOUR SURGERY OR PROCEDURE.

- Make sure your ride can take you home.
- Our nursing staff will confirm you have a ride home if you are going home the same day. If we are not able to do this, your surgery/procedure may be delayed or rescheduled.
- Using a taxi or rideshare apps (i.e., Uber/Lyft) alone is not appropriate for discharge. You must have a responsible adult* to take you home.
- * A responsible adult is defined as a person who is physically and mentally able to make decisions for the patient's welfare, if necessary. They must acknowledge and accept this responsibility as well as the requirements for postanesthetic care of the patient.

ARE YOU DIABETIC?

- Make sure you know how to take your medication the day before and day of your surgery/procedure.
- Not sure what to do? Please call your primary care provider.

DAY OF SURGERY/PROCEDURE AT THE HOSPITAL

PRE-ADMISSION TESTING (PAT) WILL PROVIDE ADDITIONAL INFORMATION ON YOUR SURGERY/PROCEDURE LOCATION. A FEW COMMONLY ASKED QUESTIONS ABOUT THE GLICK CENTER (MAIN CAMPUS) INCLUDE:

PARKING/SHUTTLE SERVICE

The Glick Center (Main Campus) provides shuttle service at no cost Monday-Friday - 6 a.m. to 8:30 p.m. Holidays and Weekends - 9 a.m. to 5:30 p.m. Parking is charged by the hour. Pick up/drop-off locations:

- P4 Valentine Garage
- Outpatient Cancer Care Entrance
- Emergency Department Main Entrance

 Outpatient Physical Medicine and Rehabilitation (PMR) / REHAB Entrance

VALET PARKING

- The Glick Center Main Entrance (Monday-Friday, 5:30 a.m. 5:00 p.m.)
- Emergency Department Main Entrance (Seven Days a Week, 7:00 a.m. 11:00 p.m.)

There is a cost for this service that is the responsibility of the patient/visitor.

WHERE DO I CHECK IN?

Please come to MetroHealth at your scheduled arrival time.

- 1. Enter through the Main Entrance to Glick.
- 2. Check in at the registration desk in the Main Lobby. The desk is on the left as soon as you enter the lobby.
- 3. You will be provided with a badge to access the elevator.
- 4. Scan the QR code on the badge at the glass turnstiles.
- 5. Take the F1 elevators to 1R.

YOUR RECOVERY

		BEFORE YOU LEAVE YOU WILL RECEIVE YOUR FOLLOW-UP APPOINTMENT WITH YOUR
	SURGEON AND INSTRUCTIONS.	

- An adult MUST go with you when you are discharged and stay with you for the first 24 hours.
- Always clean your hands before and after caring for your wound(s).
- Complications can happen. It is important you know what is normal and what to watch out for.
- When you are discharged, you will receive post-op education from our PACU nurse verbally and in writing. A copy will also be uploaded to your MyChart.

PAIN

- Follow the directions provided by your surgeon in your discharge summary.
- Take your pain medicine at home as directed. If you get adequate pain relief from Tylenol/ Ibuprofen, please continue to use them.
- Use opioid pain medication for pain unrelieved by Tylenol or Ibuprofen.
- If you have severe pain that is not relieved by the pain medication OR you have a fever and do not feel well or any other concerning symptoms, you should call your surgeon or go to the emergency room.

INCISIONS

Watch for signs of infection – this includes notifying your doctor if your incisions are red, swollen, warm or have any drainage. Wash with soap and water, no tub baths or soaking until completely healed. You may shower as instructed by your surgeon.

BLEEDING

Notify your surgeon if you have bleeding that starts again or gets worse.

BOWELS

Your bowel habits may change after surgery. You can have constipation or loose stools. It should become more normal over time. Be aware if you are on stool softeners or pain medication that will affect your bowel habits.

NAUSEA & VOMITING

Notify your surgeon if you have new or worse nausea or vomiting, inability to drink or unable to keep down fluids.

DIET

- Be aware of food you are sensitive to and avoid it for the first few weeks.
- Calories and protein are very important. Include good sources of protein (dairy, meat, fish, beans, lentils and poultry).
- If it is difficult to eat, please take liquid nutritional supplements (Boost/Boost Breeze, Ensure or Carnation).
- If you **CANNOT** drink or keep liquids down, call your doctor.

WALKING/ACTIVITY

Review your level of activity with your surgical team - refer to your discharge summary.

CALL THE DOCTOR OR HEAD TO THE NEAREST EMERGENCY ROOM IF:

- Your incisions become warm, red, swollen or have pus-like drainage.
- Your incision begins to open.
- You are bleeding through a sanitary pad every hour or passing large clots.
- You have a temperature greater than 38.0 C/100.4 F
- If you have foul-smelling vaginal discharge (if related to your surgery).
- You are feeling weak and unwell.
- You cannot drink or keep liquids down.
- You are having more pain and it is NOT relieved by pain medications.

Emergent questions after hours/weekends:

Call 216-778-7800 and ask for the resident on call for the service that performed your surgery/procedure (i.e. Orthopedics or Plastics) or be prepared to provide the name of your surgeon. The operator can help.

SURVEY

You may receive a survey via text, email, phone or by mail about your surgery or procedure. This survey will be sent from an independent Survey company, NRC Health. Your experience is important to us. Sharing your experience helps us improve our services and benefits our patients.

INCENTIVE SPIROMETER PATIENT EDUCATION

WHAT IS AN INCENTIVE SPIROMETER?

- You may be given an incentive spirometer after your surgery/procedure. This is an important tool to aid in your recovery.
- An incentive spirometer is a device that measures how deeply you
 can inhale (breathe in). It helps you take slow, deep breaths to
 expand and fill your lungs with air. If you have had surgery, are on
 bed rest, or have problems with your lungs, you may need to use an incentive spirometer.



HOW DO I USE AN INCENTIVE SPIROMETER?

- Sit up as straight as possible.
- Put the mouthpiece in your mouth and close your lips tightly around it.
- Breathe in slowly and deeply through your mouth to raise the indicator. Try to make the indicator (blue disk) rise to the level of the goal marker.
- When you cannot inhale any longer, hold your breath for as long as possible but, at least 5 seconds. Then, breathe out slowly.
- Repeat these steps 10 times every hour when you are awake.
- Once you are done, take a deep breath and cough to clear mucus from your lungs.

COUGHING AND DEEP BREATHING



- Sit on the edge of a bed or a chair. Or lie on your back with your knees slightly bent.
- Lean forward slightly. Hold a pillow firmly against your incision with both hands.
- Breathe out normally.



- Breathe in slowly and deeply through your nose.
- Then breathe out fully through your mouth. Repeat.
- Take a third deep breath. Fill your lungs as much as you can.



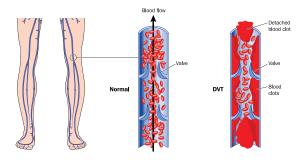
- Cough 2 or 3 times in a row.
- Try to push all of the air out of your lungs as you cough.
- Then relax and breathe normally.
- Repeat as directed.

DEEP VEIN THROMBOSIS (DVT) PREVENTION

All surgical patients are considered at risk for developing deep vein thrombosis, or DVTs. This potentially dangerous condition results in blood clots that form in a vein of the body and can lead to blockage of blood flow. DVTs are often found in the legs.

WHAT CAUSES DVTS?

- Immobility
- Blood disorders
- Obesity
- Smoking
- Dehydration



WHAT ARE THE SYMPTOMS OF A DVT?

- Pain/tenderness
- Swelling
- Warmth/redness

WHAT CAN HAPPEN IF I HAVE A DVT?

If untreated, a clot in the vein can break off and go to the lungs. This is called a pulmonary embolus (PE). This can be life-threatening. Some symptoms include chest pain and difficulty breathing.



CAN A DVT BE PREVENTED?

- Yes! By walking around and staying active, you can help prevent a DVT from occurring.
- After surgery, patients may need more help keeping the circulation going in their legs.
 Sequential compression devices (SCDs) are inflatable leg wraps that squeeze the calf muscle to improve circulation. Wear your SCDs anytime you are not walking around if you are admitted to the hospital.
- Your doctor may also order medications that will thin your blood to prevent DVTs.

NOTES:			

MetroHealth

THANK YOU FOR TRUSTING US WITH YOUR CARE.

Our goal is to improve and maintain your health. We encourage you to always ask questions if there is something you do not understand. Our providers will always take the time to address your concerns, treat you with respect and make you as comfortable as possible.

Thank you.

PUBLISHED: JULY 2024

QUESTIONS?

MetroHealth Medical Center:

(216) 778-7800

Language Access Line:

(216) 957-6955

After Hours:

(216)-778-7800 (Ask Operator for a Resident On-Call)

MyChart Support

Email: mychart@metrohealth.org

Phone: 216-778-8801

Monday - Friday, 7 a.m. - 7 p.m. ET

Patient Financial Services

Email: customerservice@metrohealth.org
Phone: 216-957-3250

Monday - Thursday, 8 a.m. - 8 p.m. ET

Friday, 8 a.m. – 5 p.m. ET

Did you miss your surgery time phone call?

Wait until 3:00 p.m., then call 216-957-6367.

About MetroHealth

Founded in 1837, MetroHealth is leading the way to a healthier you and a healthier community through service, teaching, discovery, and teamwork. Cuyahoga County's public, safety-net hospital system, MetroHealth meets people where they are, providing care through four hospitals, four emergency departments, and more than 20 health centers. Each day, our nearly 9,000 employees focus on providing our community with equitable healthcare—through patient-focused research, access to care, and support services—that seeks to eradicate health disparities rooted in systematic barriers. **For more information, visit metrohealth.org.**

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