This booklet helps you understand and prepare for your surgery. If you have any questions about your upcoming surgery please call the Charge Nurse at the Pre-Admission Clinic—306-766-0408

*PLEASE BRING THIS BOOK TO ALL APPOINTMENTS AND YOUR HOSPITAL STAY*
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Patient Surgical Education Booklet

Introduction

Welcome to the Saskatchewan Health Authority (SHA). Our aim is to provide our patients with the best possible health care experience.

It is important that you choose a personal Coach to be with you throughout your surgical journey.

A coach is a person who will be supporting you prior to surgery, during your hospital stay, and at home with your recovery. This person can be a family member, friend or caregiver. Please review this booklet with your coach before your surgery so you have an understanding of the care you will be receiving.

This booklet will:

- help you understand and prepare for your surgery
- explain how you can play an active part in your recovery

Please review this booklet with your coach, and bring it with you to all of your appointments prior to surgery and on the day of your surgery.

Having surgery can be stressful for patients and their coach. The good news is that you are not alone. We support you each step of the way. Please ask us if you have any questions about your care.

Steps of Surgery

- PreAdmission Clinic (PAC)
- Day of admission surgery/Day Surgery (DAS/DS)
- Operating Room
- Post-Anesthetic Care Unit (PACU)
- Hospital Stay
- Discharge Home
Planning for Your Surgery

It is important for you to be in the best possible condition for your surgery. This will help you recover faster and decrease the chances of any problems during and after surgery.

The goal is for you to get back to your regular activities as soon as possible. To do this, you need to play an active part in getting ready for your surgery.

**Quit Smoking/Recreational Vaping**

Smoking and vaping are not allowed on hospital property.

If you smoke or vape recreationally, you are encouraged to quit at least 4 weeks prior to surgery. People who stop smoking/don’t smoke prior to surgery have fewer complications after surgery. Smokers have more breathing problems after surgery because of the irritation from the smoke in their lungs. Cigarette smoke contains carbon monoxide which reduces the amount of oxygen in your blood and nicotine which increases your heart rate and blood pressure.

This may be a good time to consider quitting smoking/vaping.

By quitting smoking, your recovery in hospital may also be shorter. If you need help to quit, speak to your family doctor and visit Partnership to Assist with Cessation of Tobacco (PACT) [www.makeapact.ca](http://www.makeapact.ca) or call the Smokers Helpline 1-877-513-5333.

The benefits of quitting smoking begin the day you quit!

**Get Active**

Exercise and do your regular activities. Exercise can help decrease pain, increase strength and keep your heart healthy before and after surgery.

You are strongly encouraged to perform 20-30 minutes of moderate intensity activity (biking, walking) 3-4 times per week leading up to your surgery. Research shows that patients who do moderate exercise prior to surgery have fewer complications and better outcomes.

**Healthy Eating**

Good nutrition before and after surgery can mean a faster recovery for you:

- Eat three meals a day or five small meals a day. **Do not** skip meals.
- Eat protein rich foods at each meal such as lean meat, fish, poultry, beans, eggs, tofu, cheese, nuts, cottage cheese, and yogurt. Protein is important for your body to heal.
- Also, eat plenty of vegetables, fruits and whole grain foods.
- Drink at least six to eight glasses (one glass = 250mL or 8 oz.) of fluid per day, preferably water.
- Read food labels to monitor for foods high in fat, sugar and salt. Eat processed foods less often and in small amounts.
- Plan and prepare meals and snacks that have little to no added salt, sugar and saturated fat.
- Choose healthier food options when eating out.
Planning for Your Surgery

Managing Your Iron Levels

Your doctor may give you advice about iron therapy based on your iron levels. Improving your iron levels before surgery may help avoid the need for blood transfusion. A blood transfusion after surgery may mean your recovery is slower.

Important Information for Your Surgeon

Keep your surgeon informed about your medical health. Health problems such as allergies, diabetes, breathing problems, any heart conditions, and obesity can affect your surgery and treatment outcome. Plan early to help reduce worry and anxiety by having arrangements ready for your discharge from the hospital.

Things to Arrange in Advance:

- Someone to pick you up from the hospital and take you home when you are discharged.
- Groceries for one week. Plan to have foods that are easy to prepare and eat such as soups, eggs, cottage cheese, soft/canned fruit, frozen vegetables, and whole grain bread.
- Someone to help you after your surgery. This could be for a brief time or longer, depending on the surgery.
- You may need help with laundry, cleaning, cooking, yard work, etc.
- Someone to assist you in your usual care of others such as children, parents, or pets.
- Any equipment you need when you are discharged from hospital (e.g. crutches, walker or other aids).

Sharing information with your health care provider about your needs and concerns helps us meet your needs and work together to make decisions for your care.

Ask your surgeon when you are able to:

- drive
- return to work
- return to usual activities, such as cleaning, exercise, or laundry
- take your own medications
- travel long distances, including air travel
Preparing Your Child for Surgery

Surgery and hospitalization can be frightening and overwhelming for a child. Here are some helpful tips for how to prepare both you and your child.

**Pediatric Video Tour:**

This internet video shows some of the things a child might experience when going for surgery. It helps to ease anxiety and answers questions. Knowing what to expect removes the “fear of the unknown”. We encourage you to watch this short video with your child.

- Online, open google chrome, type [www.rqhealth.ca/admission](http://www.rqhealth.ca/admission)

**What Should I Pack for my Child?**

- Saskatchewan Health Services card
- comfortable, loose fitting, easy-to-put on clothing
- comfort item for your child (i.e. favourite toy, blanket, book, pacifier)
- favourite sippy cup or bottle to drink from after surgery (for younger children). Generic disposable bottles are provided by the hospital

Additional items for an overnight stay:

- toiletries, such as toothbrush, toothpaste and hairbrush for both you and your child
- favorite toys and games to play with (free Wi-Fi is available– RQHR Guest)
- label clothes and personal belongings

- **“Welcome to Unit 4F Regina General Hospital Patient/Family Information” (CEAC 0186)** is a booklet that provides information about the pediatric unit in Regina if your child will be staying in overnight after surgery. The unit will provide you with this book when admitting your child or you can locate it on the website [www.rqhealth.ca](http://www.rqhealth.ca) under Health A-Z and searching the document.

**Resources**– For information to assist with talking to your child about surgery, we recommend the following resources on the website [www.aboutkidshealth.ca](http://www.aboutkidshealth.ca):

- Surgery: Talking to Your Child
- Siblings in the Hospital: Helping Your Children Cope
Pre-Admission Clinic (PAC)

We prepare you for your surgery by taking a medical history and giving you your instructions to get you ready for your surgery.

Plan to be at the clinic for about 1 to 3 hours. In some cases this time may be longer.

Location:
Regina Centre Crossings
Surgical Assessment Centre
Suite 102-1621 Albert Street
Regina, Saskatchewan

PAID PARKING IS IN EFFECT

- After you arrive and register, the registration clerk asks you to have a seat in the waiting room.
- You are shown to a private room and a nurse completes an assessment and health history with you.
- If you do not speak or understand English, bring someone with you to the appointment to translate.
- Bring all of your medications with you to your appointment in their original containers or bubble packs. This includes all prescriptions, herbals, vitamins and over-the-counter medication. You may need to stop or adjust the dosage of some of your medications before your surgery.

Some other information we will discuss:

- hair removal
- nutrition before and after surgery
- activity goals for each day after your surgery
- blood work and other tests that may need to be done before surgery
- bowel preparation if ordered by your surgeon
- need for anesthesiologist or a medical internist review (your surgeon decides this)
Spiritual Care

While in hospital, patients have the right to practice their own personal faith and beliefs or to practice no personal faith beliefs. Spiritual care providers protect the rights and confidentiality of all patients regarding spiritual matters, and are here to serve all.

Spiritual care responds to the religious and spiritual care needs of patients, friends, and family members when they are:

- seeking sources of hope, meaning, comfort and strength
- wrestling with issues of forgiveness or unresolved conflict
- addressing a crisis of life or faith
- struggling with anger, despair, hopelessness or loneliness
- dealing with the fear of death or dying

To request Spiritual Care, please contact the hospital switchboard.

Switchboard:
Pasqua Hospital 306-766-2222
Regina General Hospital 306-766-4444

Antibiotic Resistant Organisms (AROs)

During your PAC interview, we ask if you have or carry any possible infections that could affect or complicate your hospital stay.

AROs may cause problems for patients who are in the hospital.

Four organisms of concern are:

Methicillin Resistant Staphylococcus Aureus (MRSA) - bacteria that may be found on the skin and in the nose of healthy people.

Vancomycin Resistant Enterococcus (VRE) - bacteria that may be found in the bowel.

Extended Spectrum Beta Lactamase (ESBL) - enzymes produced by some bacteria or germs that can make them resistant to certain antibiotics. These bacteria or germs can be found in many parts of your body but are normally in your bowel.

Carbapenem Resistant Enterobacteriaceae (CRE) - a family of germs that are difficult to treat because they have high levels of resistance to antibiotics.
Medications

Some medications increase the risk of bleeding during surgery. Your health care provider will tell you which medications to stop before surgery.

Some that may be stopped before surgery are:

**Blood thinners:**
- warfarin (Coumadin®, Taro-Warfarin®)
- dabigatran (Pradaxa®), rivaroxaban (Xarelto®), or apixaban (Eliquis®)

**Anti-platelet medications:**
- clopidogrel (Plavix®), ticagrelor (Brilinta®), or prasugrel (Effient®)
- acetylsalicylic acid (ASA) or Aspirin®, or medications containing this product.
- Entrophen®
- A.C. and C.® (various manufacturers)
- Alka-Seltzer®
- Asaphen® products
- Norgesic®
- Aspirin® products
- Novasen® products
- Robaxisal® products

**Non-steroidal anti-inflammatories (NSAIDs):**
- ibuprofen (Motrin®, Advil®)
- naproxen (Aleve®)
- diclofenac (Voltaren®)

This is not a complete list!

Some herbals, vitamins and over-the-counter medications increase your risk of bleeding and may need to be stopped before surgery. Ask your health care provider when and if you should stop these medications.
Advance Care Planning (Living Will)

If you are 18 years of age or older, it is routine on admission to a SHA facility to be asked if you have an Advance Care Plan or Proxy. If you have completed an advance care plan (living will), please bring a copy with you.

There are three steps in Advance Care Planning:

1. **Think** about your values and wishes regarding health care preferences.
2. **Talk** to your health care providers, understand and learn about your health. Get the information you need to make informed choices about health care treatments and interventions. **Talk** to those close to you and choose someone (Proxy) who can honour your wishes.
3. **Act** by:
   - completing an Advance Care Plan
   - appointing a Proxy. A Proxy can assist in making health care decisions for you if you can no longer speak for yourself. To be valid, the appointment of a proxy needs to be in writing, signed, and dated (no lawyer needed). It is important that you discuss your health care directions with your proxy.
   - sharing your advance care plan with your proxy, loved ones and health care providers

“My Voice - Planning in Advance for Health Care Choices” (CEAC 1042) is a workbook that has been developed to assist you in making informed decisions about your health care. To obtain a copy of the “My Voice” workbook or to access additional resources on Advance Care Planning and appointing a proxy contact:

Advance Care Planning Program

Phone: 1-306-766-5922
Email: advancecare@rqhealth.ca

Online: open Google, type Advanced Care Planning Regina

Click on link: Advanced Care Planning: Regina Qu’Appelle Health Region

“Understanding Goals of Care” is a short online video located on the Advanced Care Planning webpage. This video helps you understand the goals of care you may be asked about.

You are encouraged to bring in your advance care plan. It is your legal direction for the health care team and your proxy (substitute decision makers) to follow in situations where you are unable to make health care decisions for yourself.

YOU HAVE A RIGHT TO BE INVOLVED IN YOUR HEALTH CARE
What if Your Health Changes Before Surgery?

If you do not feel well or if there is a change in your health, let your surgeon’s office know at least 24 hours before your surgery.

Some important changes could be:

- a new cough or a cough that is getting worse
- fever or chills (temperature higher than 38 °C or 100.4° F.)
- diarrhea
- shortness of breath (worse than your usual)
- severe headache (worse than your usual)
- muscle aches
- extreme fatigue or feeling very tired
- vomiting (throwing up)

If You Must Cancel Your Surgery:

Monday to Friday from 7:30 a.m. to 4:00 p.m.

Call your surgeon’s office or the Surgical Waitlist Inquiry 1-866-622-0222

For immediate cancellation of the next day’s surgery (after 4:00 p.m. to 7:30 a.m.) or anytime on weekends:

Call Bedline (306) 766-6075

Note: On the day of surgery, unexpected things may happen that make it necessary to cancel your surgery (e.g. an emergency case, all hospital beds are full). Be prepared to have a ride home in case this happens. The Operating Room schedulers make every effort to rebook your surgery as soon as possible.
The Day Before Your Surgery

Day Surgery (DS) or Day of Admission Surgery (DAS) nurses will contact you the day before your surgery to update you on your surgical time, discuss your medications and go over any final details.

At Home: Getting Yourself Ready

Eating or Drinking Instructions:

- **Do not** drink any alcoholic beverages or use any illicit substances for 24 hours before your surgery. They may change how your body reacts to certain medications.
- **Do not** smoke or vape at least 24 hours before your surgery.

  **Adult/children** having surgery:

- **Do not** eat solid food after midnight the day before your surgery or your surgery may have to be postponed or rescheduled for your own safety.
- You may have clear fluids up until 2 hours before surgery unless advised otherwise by a nurse. (See examples below)
- **Do not** have cream, whitener, milk or creamed soups.

<table>
<thead>
<tr>
<th><strong>Children</strong> - Nothing other than the following after midnight</th>
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<tbody>
<tr>
<td>Breast milk: up to 4 hours prior to surgery time</td>
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<tr>
<td>Infant formula: up to 6 hours prior to surgery time</td>
</tr>
<tr>
<td>Non-human milk: up to 6 hours prior to surgery time</td>
</tr>
<tr>
<td>Clear fluids: up to 2 hours prior to surgery time</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Adults</strong> - Nothing other than clear fluids after midnight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clear fluids: up to 2 hours prior to surgery time</td>
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</table>

*Clear fluids include:* water, apple juice, black coffee or clear tea, *white* cranberry juice, *white* grape juice, soup broth (bouillon or consommé), non-alcoholic and carbonated beverages (clear soda), sport drinks, crystal fruit drinks, popsicles, gelatin desserts or Jello™
Bowel Preparation:
- Bowel preparation is a way to make sure your bowels are empty before you have surgery.
- Your doctor may prescribe bowel medication for certain surgeries. If ordered, take these medications as instructed by your doctor or nurse.
- It is best to be sure you have a bowel movement the day before or morning of your surgery.

Bathing or Shower Instructions:
- Have a bath or shower and shampoo your hair with unscented products the night before or morning of surgery.
- Do not shave, wax or clip any hair around the surgical site for seven days before surgery.
- Do not use scented personal care products (e.g. deodorant, after shave lotion, colognes or shampoos).

The Morning of Surgery
- Do not use mints, gum, candy, throat lozenges and/or chewing tobacco the morning of surgery.
- You may brush your teeth and/or use mouthwash as long as you do not swallow.
- If you are instructed to take medications on the morning of your surgery, only a sip of water is allowed.
- Take your medications as directed and remember to bring them with you in their original bottles.
- Bring your CPAP (Continuous Positive Airway Pressure) machine and equipment, if applicable.
- Do not use scented personal care products.
- Remove makeup, jewelry and body piercings before coming to the hospital.

If you are going home the same day as your surgery ensure that you have a competent adult to pick you up from the hospital and stay with you overnight for 24 hours.

Failure to follow these instructions can result in cancelling your surgery.
What to Bring to the Hospital

- this booklet and a pen
- your Saskatchewan Health Services card
- your current prescription medications in their original container or bubble pack and a list of any
  herbals, vitamins, and over the counter medications
- hearing aids, dentures, and glasses with cases if you have
- any special equipment or aids you may use at home such as CPAP machines, crutches, walkers, wheel
  chairs or braces. (Label them with your name and address)

Additional items for an overnight stay:

- personal care items as: toothbrush and toothpaste, comb or brush, razor, deodorant*, soap*,
  shampoo* and conditioner* (if desired)
- slippers (non-slip walking shoes with a low heel)
- tissue*
- a small amount of cash if you wish (cafeteria or gift shop)
- something to read or puzzle book
- a hospital gown and housecoat are provided. You may bring your own, but you are responsible for the
  care of these items

*Do not bring scented personal care products.

Scented products can aggravate health problems for some people who have asthma, allergies and other
medical conditions.

The Saskatchewan Health Authority does not assume responsibility for damaged or lost
items.

Please remember NOT to bring valuable items with you to the hospital.
In the Hospital

If you will be admitted to the hospital following your surgery go directly to the Day of Admission Surgery/Day Surgery (DAS/DS) Unit on the 2nd floor. Staff takes you to a patient room and asks you to change clothes and pack up your belongings.

If you are booked for Day Surgery, register at admitting. After you have registered in Admitting, go to Day Surgery on the 2nd Floor. Staff will take you to a locker room and will ask you to change clothes, pack up your belongings and store in the locker until you are discharged.

In the DAS/DS unit

- **One visitor** at bedside for adult patients.
- Children may have **two visitors**.
- No outside food at the bedside.
- Please keep cellphones on silent or vibrate.
- Please keep noise levels at a minimum. It is important for your loved one to rest.
- If you are a support person and will be taking your loved one home, please remember to bring a wheelchair up to the unit for when they are being discharged.
- Once you have gone into the OR your loved one will be directed to the waiting room.

When you arrive to the DAS/DS unit

- You will change into a hospital gown.
- Patients spending one or more nights—you will place your belongings into a plastic bag which is labeled with your name and taken to your room later in the day.
- Your height and weight are measured.
- Your blood pressure, temperature, heart rate and oxygen levels checked.
- Your nurse may clip your hair in the surgical area, if required.
- Your nurse confirms your medical history and medications.
- Your nurse starts an intravenous (IV) in your arm.
- Your surgeon may mark the area of your surgery.
- You may get a warm blanket before surgery to keep you warm.
- You empty your bladder before you go in for your surgery.

Once all of the preparations are complete and the Operating Room (OR) is ready, a porter or nurse takes you to the OR. Family and friends are not allowed in the OR.
Surgery – In the Operating Room

- OR staff will ask you questions as part of the Surgical Safety Checklist. Many of these questions you have already answered and the questions are repeated for safety reasons.
- You can ask questions of your surgical team at any time.
- You move into the operating theatre and then move to the operating room bed.
- A nurse places electrodes (or sticky tabs) on your chest to monitor your heart.
- A blood pressure cuff on your arm to measure your blood pressure and a clip on your finger to track your oxygen level.
- The operating rooms are kept at a constant temperature which may feel cool. Tell your health care team you would like a warm blanket.
- You get antibiotics and a blood thinner to help decrease your chance of infection and blood clots.

Types of Anesthetic

There are different types of anesthesia. Your anesthesiologist discusses the appropriate type for your surgery.

General Anesthesia
This is a combination of medications given to you through your intravenous (IV) and a mask. This causes you to go to ‘sleep’ and not feel any pain. You receive an oxygen mask to breathe from before the medications are put into your IV. Once you are ‘sleeping’, your anesthesiologist helps you breathe using a tube or mask.

Epidural Anesthesia
This is used in combination with general anesthetic. A small tube is placed into your back. Medication for pain control runs through this tube while you are in the OR, as well as after your surgery while you are recovering on the nursing unit. Patients who are having specific procedures may be offered this type of anesthesia.

Local Anesthesia
This can be used alone or in combination with another type of anesthetic. You may hear it referred to as a ‘block’. This helps you with pain control during and after your surgery.

Spinal Anesthesia
Medication is put into your spinal fluid to make your legs feel numb. You do not feel pain and cannot move your legs until after the procedure. You may be awake or given medication to help you relax.
After Your Surgery - Post Anesthetic Care Unit (PACU)

- After your surgery, you move to the PACU to recover from the anesthetic.
- This is a large room with other patients so it may be noisy. Your dignity and privacy are maintained at all times.
- You receive oxygen as soon as you arrive in PACU.
- A nurse checks the area where you had your surgery and monitors your vital signs and breathing closely.
- Your length of stay in PACU varies.
- You get medication for nausea as needed.
- You get pain medications as needed. Everyone experiences pain and discomfort differently after surgery.

**Pain is expected after surgery. The aim is to make the pain bearable.**

**Pain Control**

It is important to control your pain because it will help you to:

- take deep breaths
- move more easily
- eat better
- sleep well
- recover faster
- do things that are important to you
- perform your daily activities

Your nurse asks you to describe your pain using a number between 0 and 10. 0 means no pain and 10 is the worst pain you have ever had. We want to keep your pain at or below 4/10. Please tell us if you have pain.

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Used with permission from MMS
Pain Control

Epidural Infusion
You may have a small tube in your back to give you pain medicine. This is called an epidural. It is usually started in the OR before you go to sleep. It is usually removed on Day 2 after surgery once your pain is controlled.

Pain Controlled Analgesia (PCA)
You may have a medicine pump attached to your IV. When you push a hand-held button, the pump gives you a safe dose of pain medicine.

Other Options
Let your nurse know if your pain level is too high to do your daily activities. Other pain control options may be available.

If you have had a General Anesthetic:
The medication given to you during your operation will be acting in your body for 24 hours. The sleepy feeling you may have will slowly wear off.

If you have had a Spinal Anesthetic:
You will stay in bed until after the feeling and strength return to your legs and buttocks.
If you experience headache while sitting or standing, difficulties emptying your bladder, fever or leg weakness, contact your doctor.

After Surgery: recovering in hospital
- You are moved out of the PACU (Recovery Room) into the area where you stay overnight and until you are ready to be discharged home.
- Your nurse monitors your condition during your stay.
- You may be sitting up or walking with help the evening of surgery. Do not get up without help from your nurse.
- Your discharge progress will be discussed daily. When you are given the date you may return home, please arrange for someone to pick you up before 2 p.m.

Nutrition
You have an (IV) until you are eating and drinking well. Sometimes your IV is left in to give medications. Food is usually introduced gradually, depending on your surgery. Check with your nurse or dietitian before eating or drinking any food brought to you by family or friends, as this may stand in the way of your recovery.
After Surgery Exercises

Your health care team will remind you to do these after surgery exercises to prevent complications and speed up your recovery following your surgery.

Try to do these exercises every half hour when you are awake.

How to breathe deeply:

- Inhale as deeply as you can.
- Hold the breath for two seconds.
- Exhale completely.
- Repeat three times.

How to cough:

- Inhale deeply.
- Cough. The cough should come from your abdomen, not from your throat.
- Hold a pillow on your abdomen for support.

How to exercise your feet and legs:

- Push your toes toward the end of the bed, as if you are pressing down on a gas pedal.
- Pull your toes toward the head of your bed, then relax.
- Circle each ankle to the right, then to the left.
- Repeat three times.

Remember: Your recovery will go more smoothly if you do breathing and circulation exercises and get out of bed and walk with assistance as early as possible.
After Your Surgery

- Make sure your health care providers clean their hands before examining you. If they do not wash their hands, ask them to do so.
- **Do not** touch the surgical area or dressings unless instructed to do so.
- Clean your hands with soap and water or an alcohol-based hand rub before eating and after using the washroom.
- Family and friends must 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 do so.

After Day Surgery: Going Home the Same Day

- You **must** not drive for 24 hours after surgery or longer as directed by your surgeon.
- You **must** have a competent adult accompany you at home for 24 hours after surgery.
- Do not drink alcohol, do illicit drugs, drive or operate heavy machinery for 24 hours after surgery or while you are taking a narcotic pain medication.

Discharge Home After a DAS Surgery

**You are ready to go home when:**

- You have no vomiting and your nausea is manageable.
- You are eating and drinking well.
- You are passing gas and urine.
- You are able to mobilize safely.
- You are able to do your activities of daily living or have a support person in place.
- Your home is organized for you (meals, special equipment).
- Your questions or concerns about your recovery at home have been answered by your healthcare team.

**What you need to know when discharged home:**

- Medicine and/or prescriptions you need to take at home.
- What to eat and drink.
- How to care for your incision/bandages.
- Supplies you need at home.
- When to return to regular activities (driving, exercise, lifting).
- Signs and symptoms of an emergency or what to do/who to call.
- Date and time of your follow up appointment with your surgeon.

**NOTE:** There may be special equipment required after your surgery (e.g. crutches, slings, and braces) that incur with an extra cost. These charges are billed to you from RQHR Finance Department.
At Home

Care of Incision:

- Instructions are given to you about bathing and care of your incision (if you have one).
- Sometimes patients leave the hospital with skin sutures (stitches), clips, tapes, or drains still in place. You are given instructions when and where to have these removed.
- No baths, hot tubs or swimming until staples/stitches are removed.
- Keep your incision clean and dry until staples/stitches are removed.
- If you are instructed that showering is ok, pat your incision dry after you shower.
- If you are instructed to keep a dressing on your incision, put on a clean dressing after showering.
- If you have a drain removed before you leave the hospital you may have drainage at this site for 1 or 2 days after removal.

- Always clean your hands before and after caring for your wound.
- It is normal for your incision to be itchy, feel tender, tight, and numb while healing.

Patients may receive a phone call from the Regina Qu’Appelle Health Region Infection Control Department after surgery to monitor whether you have experienced a surgical site infection.

Call your health care provider if you have symptoms of:

- Increased redness, pain, and drainage at the surgery site
- Chills and fever (temperature higher than 38 C or 100.4 F)
- Redness or pain in your lower legs, even with resting
- Swelling of the legs, ankles or feet
- Skin changes in the leg, such as discolouration, thickening or warmth in the legs
- Discomfort, heaviness, pain, aching, throbbing, itching, or warmth in the legs
- Pain in your chest, difficulty breathing, or shortness of breath.
- Coughing up blood
- Rapid or irregular heart rate
- Lightheadedness.

If you cannot reach your doctor, go to the nearest Emergency Department.
At Home

Healthy Eating for Recovery

*Depending on your surgery, you may have to eat a specific diet. Please be sure to follow your diet as instructed.

- It is very important to continue eating well at home for ongoing recovery from surgery. Eat meals regularly. Do not skip any meals.
- Try five small meals instead of three large meals.
- Eat protein rich foods at each meal and snack like lean meat, fish, poultry, milk, cheese, yogurt, eggs, beans, nuts, nut butters and tofu.
- Eat meals with foods from all of the food groups: meat and alternatives, grain products, vegetables and fruit and milk products.
- Stay well hydrated by drinking six to eight glasses (1500-2000 mLs) of fluid each day. Choose water most often.

Snacking between meals can help you meet your nutrition needs after surgery. Healthy high protein snack ideas may include:

- Peanut butter or cheese with crackers or fruit (banana or apple slices)
- Muffins made with seeds, nuts and dried fruit
- Pudding and yogurt (add milk powder for extra protein or choose Greek yogurt)
- Hard boiled eggs
- Hummus and crackers or carrot sticks
- Trail mix with nuts, seeds and dried fruit
- Smoothies or milkshakes made with fruit and yogurt.
- Commercial nutrition supplement drinks such as Ensure, Boost or store brands can help if you have a hard time eating enough food.
At Home

Managing Constipation

Constipation is common after surgery and may happen for many different reasons such as side effects from anesthetic and some medications, change in diet and decreased activity.

Some ways to help with constipation include drinking more water, adding fibre to your diet and increasing activity as directed.

Speak to a pharmacist about medications to provide relief.

Activity

After you go home:

• Try to walk several times each day. Slowly increase the distance until you reach your usual level of activity
• Do not lift more than 4.5 kg (10 lbs) for 6 weeks after surgery
• Ask your surgeon when you are able to drive again
• Ask your surgeon when you may return to work
• When you are pain free you may continue most activity, including sexual activity.

Ask your family and friends for help with:

• transportation
• meal preparation
• laundry
• grocery shopping
• house cleaning
• yard work.

Medications

• Take pain medications as directed
• As you continue to recover your pain should get better day by day.
• As you get better you will need less pain medication. Consult your health care provider or pharmacist on the best way to reduce your dose.
At Home

Opioids for pain after surgery: Your questions answered

1. Changes?
   You have been prescribed an opioid.
   Opioids reduce pain but will not take away all your pain. Ask your prescriber about other methods of reducing pain including using ice, stretching, physiotherapy, or non-opioid drugs like acetaminophen or ibuprofen. Know your pain control plan and work closely with your prescriber if your pain does not improve.

2. Continue?
   Opioids are usually required for less than 1-2 weeks after surgery.
   As you continue to recover from your surgery, your pain should get better day by day. As you get better, you will need less opioids. Consult your doctor or pharmacist about how and when to reduce your dose.

3. Proper Use?
   Use the lowest possible dose for the shortest possible time.
   Overdose and addiction can occur with opioids. Avoid alcohol and sleeping pills (e.g. benzodiazepines like lorazepam) while taking opioids. Do not drive while taking opioids.

4. Monitor?
   Side effects include: sedation, constipation, nausea and dizziness.
   Contact your doctor or pharmacist if you have severe dizziness or inability to stay awake.

5. Follow-Up?
   Ask your prescriber when your pain should get better.
   If your pain is not improving as expected, talk to your healthcare provider.

To find out more, visit: OpioidStewardship.ca and DeprescribingNetwork.ca

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<td>Never share your opioid medication with anyone else.</td>
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<td>Store your opioid medication in a secure place; out of reach and out of sight of children, teens and pets.</td>
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<td>Ask about other options available to treat pain.</td>
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Take unused medications back to a pharmacy for safe disposal. Talk with your pharmacist if you have questions. For locations that accept returns: 📧 1-844-535-8889 ☑️ healthsteward.ca

Did you know?

About 16 Canadians are hospitalized each day with opioid poisoning.
— Canadian Institute for Health Information, 2017

Examples of opioids used for pain after surgery:

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Notes:

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Saskatchewan 
Health Authority
Pasqua Hospital

Located at:
4101 Dewdney Avenue
Regina, Saskatchewan
DAS/Day Surgery Unit Phone: (306) 766-2738

Regina General Hospital

Located at:
1440-14th Avenue
Regina, Saskatchewan
DAS/Day Surgery Unit Phone: (306) 766-3760
Regina Qu'Appelle Health Region has a contract with a third-party surgical provider in Regina to help patients get certain types of surgeries more quickly. Your surgeon may decide you surgery is low risk and sends you to this clinic:

**Regina Surgical Centre—Surgical Centres Incorporated (SCI)**
Located at: 2060 Halifax Street
Regina, Saskatchewan
Phone: (306) 522-3282
Hospital Visitor Information

Visitor Hours

- Visiting hours vary according to the unit.
- We know that visitors are important to recovery.
- Patients need their rest after surgery.
- Some units have a daily rest period. Visitors are asked not to visit during these hours so that you can rest.
- Talk to the staff on the unit for more information.
- Before bringing any flowers or food into the hospital for the patient please check with the nursing staff.
- We suggest that only 2 people visit at a time.

Patient Safety

We care about patient safety: protecting you, your family, and friends from infectious illnesses when you are at our hospital. We all have a role to play in helping to protect you, your family members, friends and other patients from serious infectious illnesses that can be spread in hospital. Please ensure you wash your hands with soap and water or with hand disinfectants provided at the hospital entrance before and after your visit to the hospital. It is important that your visitors are feeling well before coming to the hospital. If they are sick we ask that they stay home until they are better as they may make you, other patients, or health care workers in the hospital sick.

Before coming to the hospital, visitors need to check if they have had any of the following symptoms in the past 24 hours

- a new cough; or a cough that is getting worse
- a fever or chills, or both
- diarrhea
- shortness of breath (worse than your usual)
- severe headache (worse than your usual)
- muscle aches
- extreme fatigue or feeling very tired
- vomiting (throwing up)

*If a visitor has any of the above symptoms, stay at home.
**Reports of Patient Condition**

Any personal information about patient’s diagnosis and treatment is considered confidential. This information is available only to designated members of the patient’s immediate family, provided the patient has given permission.

**Protecting Your Privacy**

The Saskatchewan Health Authority (SHA) understands that your health information is a very personal and private matter. We are committed to keeping it confidential and secure. SHA collects personal health information about you for the primary purpose of providing the health care service you need.

The SHA ensures that your personal health information is shared only as necessary, amongst members of your health care team for the purpose of giving you care or as permitted or required by law. SHA stores your information securely and disposes of the information properly when the time comes to do so.

**Contacts**

**Patient Advocate Services**

Main Floor 2110 Hamilton Street
Regina, Saskatchewan S4P 1A5
Telephone: (306) 766-3232
Toll Free: 1 866-411-7272
Facsimile: (306) 766-7792