



Pre-operative/Pre-procedure

INFORMATION FOR ADULT PATIENTS

PLEASE READ PRIOR TO YOUR DAY OF SURGERY AT:

Norman Regional Hospital • 405-307-1250
Norman Regional HealthPlex • 405-515-1250
Moore Medical Center • 405-912-3045



Pre-operative Instructions

Thank you for choosing Norman Regional Health System for your surgery. It is our privilege to serve you.

Your surgery is scheduled on _____ (date) at:

- Norman Regional Hospital
405-307-1250
- HealthPlex
405-515-1250
- Moore Medical Center
405-912-3045

I. TIME OF ARRIVAL

You will receive a call from Same Day Surgery (SDS) the day before your procedure/surgery between 2 p.m. and 5 p.m. to notify you of your arrival time. If you prefer, you may call SDS at the number above on the business day before your procedure between 2 p.m. and 5 p.m. Please note that if surgery is on a Monday or following a holiday you will be called the previous business day.

Please arrive at Same Day Surgery at _____ (time).

Bring: insurance card and co-pay if applicable; medication bottles or accurate list of all the medications you take; list of dates of all surgeries and hospitalizations.

II. IN PREPARATION FOR YOUR PROCEDURE:

What to eat and drink: Do not eat or drink anything after midnight the night before your surgery, unless your physician instructs you otherwise.

Medications: Certain medications such as ACE inhibitor class of blood pressure medications, blood thinners, and diabetic medications may need to be discontinued in advance and/or held the morning of surgery. As a rule, most other medications should be taken. It is important to discuss the prescription and herbal medications you take with your surgeon and your pre-admission nurse to determine the appropriate plan for you.

We will need an accurate list of all your medications. Please bring your prescribed medications with you in the prescription bottles unless otherwise instructed.

Take the following medications on the day of surgery: _____

Pre-operative Instructions

Hold the following medications: _____

General guidelines:

- A. You may brush your teeth as long as you swallow nothing. Avoid gum and mints.
- B. Notify the doctor of any changes in your physical condition; any fever, cold or flu symptoms, rashes or sores.
- C. Bathe or shower the night before or the morning of your procedure using antibacterial soap. This is to be used from your neck down. Be careful to not get in your eyes.

III. ON THE DAY OF YOUR PROCEDURE:

What you will need to do:

- A. Check your armband for correct spelling. Full, legal name, please.
- B. If you have an Advanced Directive and the hospital does not have a copy on file on file, please bring to hospital.
- C. Wear loose comfortable clothes that are easy to change and low heeled shoes.
- D. Please leave all valuables at home. The hospital is not responsible for personal belongings. This is all jewelry including wedding rings, watches, credit cards and cash.
- E. Please wear no makeup, hairpins or barrettes. Jewelry (including all body piercings) must be removed before surgery to prevent injury to you.
- F. Because our waiting patients are not permitted to eat or drink, we ask visitors not to eat or drink in the waiting room. There is a cafeteria available.
- G. Bring an overnight case if you are spending the night. Leave it in the car until after surgery and your family/friend can bring it in.
- H. If you will be admitted to the hospital after surgery and you use a CPAP or BIPAP machine at home, please bring your machine to use during your stay.

IV. AFTER THE PROCEDURE:

IMPORTANT POLICY:

- A. Please arrange for an adult (family or friend) to drive you home. No patient having anesthesia or sedation is permitted to drive. Per hospital policy we will not be allowed to discharge you to a taxi. For your safety, it is recommended that a responsible adult stay with you for 24 hours after your surgery and anesthesia.
- B. Do not take any medications that have not been prescribed for you or approved by your doctor.
- C. Do not drive a car or plan to make any important decisions for 24 hours after anesthesia. Ask your doctor when you may return to school or work.

Pre-operative Instructions

The Same Day Surgery nursing staff is dedicated to helping you have the best surgical experience possible. Please do not hesitate to ask any questions you may have or otherwise let us know how we can be of assistance.

Questions & Answers

I. CAN HERBAL SUPPLEMENTS AND VITAMINS AFFECT MY SURGERY?

Herbal supplements can cause a change in how your body will react during your surgery/anesthesia. Anyone having surgery should provide a list of all their medications including herbal and vitamin supplements to their physician and their admission nurse.

The following herbal medications, supplements, and vitamin E should be stopped at least two weeks before your surgery. This allows enough time for the effects of the herbs to leave your body. Please notify your doctor if you are taking any of the following herbs:

St. John's Wort: may increase or prolong the effects of some anesthetics and narcotics

Kava-Kava: may increase or prolong the effects of some anesthetics and narcotics

Ginko, Fish Oil, Garlic, Ginger, Vitamin E & Feverfew: may increase bleeding

Ginseng: may increase blood pressure and heart rate, and may decrease the effectiveness of some blood thinners

Ephedra: may interact with antidepressants or antihypertensives to cause increase in blood pressure or heart rate

Please let your doctor or anesthesiologist know if you have taken any herbal medicines up until the time of your surgery so they can make any necessary adjustments.

II. WHAT HAPPENS BEFORE THE SURGERY?

Before your operation, blood tests, x-rays, and an electrocardiogram (EKG) may be ordered. On the day of surgery, do not eat or drink anything. Some medications, as directed by your doctor, may be the exception.

You first will have your IV started. The IV will be used to give you fluids before, during and after surgery. It will also be used to give anesthetic drugs and other medications. After your IV is started, you will be taken to the Operating Room and moved onto an Operating Room table.

You will be connected to monitors that will allow continuous observation of your vital signs before, during, and after immediately after surgery. Your anesthesiologist or nurse anesthetist will be watching these monitors, and will stay with you at all times during your surgery.

III. ANESTHESIA

WHAT IS ANESTHESIA? Anesthesia is a state of freedom from pain. There are many safe anesthetics available. The anesthetic or combination of anesthetics are selected after the anesthesia provider considers the needs of the patient and the type of surgery. Some anesthetics are given as a gas and some are injected directly into the skin or nerves.

WHO GIVES ANESTHESIA?

Anesthesiologist: A doctor specializing in the use of medications which put people to sleep during surgery.

C.R.N.A. (Certified Registered Nurse Anesthetist): An advance practice registered nurse trained to give anesthetics, supervised by an Anesthesiologist.

Your anesthesia provider will see you before your surgery and will decide upon a plan for the type of anesthesia that will be best for you.

WHAT KINDS OF ANESTHESIA ARE THERE?

1. **General Anesthesia:** Anesthetic medications are given to you through an intravenous line or an anesthesia mask, creating a state of reversible unconsciousness, so that you will not feel, see or hear anything during your surgery.
2. **Regional Anesthesia:** Regional anesthesia produces numbness with the injection of local anesthesia around nerves in the area of the body corresponding to your surgery. Epidural or spinal blocks numb the abdomen and both legs. Other nerve blocks are used for the nerves of the arms or legs to numb individual limbs. Medications are usually given with the regional anesthesia to make you comfortable, drowsy and to blur your memory. The numbness lasts from two to four hours (or longer), and often the legs cannot move during this time. Normal feelings return in a few hours.

Questions & Answers

- 3. Monitored Anesthesia Care (MAC):** With MAC, your anesthesiologist administers pain medication and sedatives through your intravenous line. The surgeon or anesthesiologist also inject a local anesthetic into the skin, which provides pain control during and after the procedure. While sedated, your anesthesiologist will monitor your status closely.
- 4. Local Anesthesia:** Local anesthetics are injected by the surgeon to provide numbness at the surgical site. If only local anesthesia is given, there may be no anesthesia provider with you.

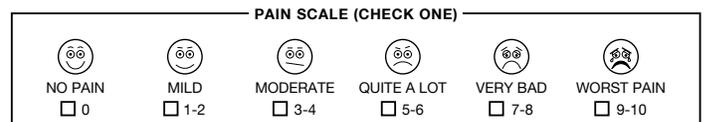
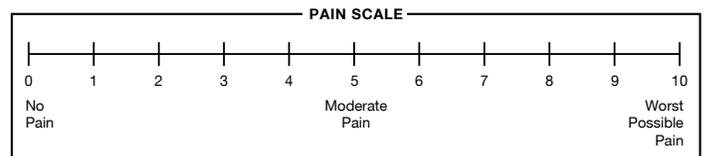
IV. WHAT HAPPENS IN RECOVERY?

After surgery you will be taken to the Post Anesthesia Care Unit (PACU). The nurses in PACU are specially trained to care for patients who are awakening from anesthesia. You will receive medications to keep you comfortable and let you rest. When you meet discharge criteria and are stable, you will be taken to an assigned room in the hospital or transferred back to Same Day Surgery.

V. HOW WILL MY PAIN BE MANAGED?

Your pain is whatever you say it is. Pain can affect how well you eat and sleep, and can affect the healing process. Our goal is to help keep you as comfortable as possible so you can focus on healing. The nursing staff at Norman Regional Hospital will frequently ask you about your pain, and will assess your level of sedation. Please do not wait for your nurse to ask. Tell the nurse right away if you start having pain that you feel needs to be treated.

Physicians and nurses will most often ask you to rate your pain by using the zero to 10 pain scale. Zero on the scale means you are having no pain, while ten on the scale equals the worst pain you have ever had. There are other ways to assess pain, including a “faces” scale. The staff will work with you to determine which method works best for you. After pain medication or relaxation technique the nurses will ask you to re-evaluate your pain. This will help determine if the medicine or other treatment is working for you.



Certain pain medications can affect your breathing. The nurses will closely monitor your sedation level. The amount of sedation will determine which pain management technique will be most appropriate for you.

VI. WHAT IS THE CHARGE?

Please call the Patient Billing Office at 405-307-1318 for answers to your questions related to charges.

Miscellaneous Information

HOSPITALITY HOUSE

The Hospitality House offers affordable overnight accommodations for out of town families. It is located at the Norman Regional Hospital campus on Rich Street, directly across from the south entry. Contact the Volunteer Services office at 405-307-6691 for information or to reserve a room. If you prefer, you may go directly to the Hospitality House for reservations. If you stay the night prior to your surgery, please notify the Same Day Surgery Unit so we will know where to reach you should there be any changes in the surgery schedule.

SMOKING CESSATION

Quit Smart, tobacco cessation classes are available through Norman Regional Hospital. To enroll and for program costs, please call the Community Health Education Services of NRH 405-307-1776. For more information please ask a staff person for a brochure on Smoking and Heart Disease.

SPEAK UP

Speak up if you have questions or concerns, and if you don't understand, ask again. You are the center of the health care team. Norman Regional Health System is committed to reducing health care errors in our organization. If you have concerns about your safety, you are encouraged to share your concerns by calling the patient care hotline at 405-307-7899.

MEDICAL INTERVENTION TEAM (M.I.T.)

The 24/7 Medical Intervention Team is made up of an Intensive Care RN and a Respiratory Therapist. The purpose of the MIT is to clinically intervene, in the absence of a physician, when a patient develops changes in medical condition, and also to prevent patients from progressing to a code arrest.

When should someone call for MIT?

A patient, visitor, or family member can call the MIT if they observe a worsening of person's condition evidenced by a change in level of consciousness, respiratory distress or cardiac changes or suspected stroke.

Who should call for MIT?

Any person witnessing the symptoms listed above.

How to call for MIT?

- Dial "88" for the operator. Ask for the MIT and state the room number of location.
- Inform the nurse caring for the patient.
- The nurse caring for the patient notifies the attending physician.

CONTACT ISOLATION

Notify the nurse and or Surgeon if you have a history of MRSA/VRE or any other wound infections.

Miscellaneous Information

RESPIRATORY HYGIENE/COUGH ETIQUETTE IN THE HOSPITAL

To prevent the transmission of all respiratory infections at NRHS, the following measures have been implemented for you and your family's health.

- Visual alerts are placed throughout the facility instructing patients and family/friends to inform healthcare personnel of symptoms of a respiratory infection. These alerts emphasize covering nose/mouth when sneezing/coughing to prevent the spread of disease.
- Use tissue to contain secretions and dispose of them in the nearest waste receptacle after use.
- Perform hand hygiene (wash with alcohol-based hand rub, soap and water, etc.) after having contact with respiratory secretions and contaminated objects/materials.
- The hospital provides tissues and no-touch receptacles for used tissue disposal.
- Masks are available to persons who are coughing.
- If possible, have persons with a cough sit 3 feet away from you and others.

National Patient Safety Goals (NPSG)

The National Patient Safety Goals program focuses on patient safety within health care and is designed to stimulate organizational improvement activities for several of the most pressing patient safety issues that all organizations are struggling to manage effectively. This program is an important component of The Joint Commission's overall efforts to improve health care in our country. Some of the safety goals follow:

I. IMPROVE THE ACCURACY OF PATIENT IDENTIFICATION

Patient Identification

Staff will identify you before procedures are performed or medications given. The staff will identify you by checking your name and identification number on your arm band, and will continue to frequently check your armband. It isn't that we don't remember you; we just want to ensure we are doing the correct thing to the correct patient.

Eliminating Transfusion Errors

Blood transfusions require a 2 person check at the bedside, involving the patient if possible.

II. IMPROVE COMMUNICATION AMONG CAREGIVERS

Timely Reporting Of Critical Tests And Critical Results

Critical test results are communicated in a timely manner to the physician, and documented in the patient record.

Hand-Off Process

To ensure the best quality of care for our patients we have improved the quality of communication by developing a hand-off process. This process provides verbal and written communication of information necessary for continuity of care from one caregiver to another.

III. IMPROVE THE SAFETY OF USING MEDICATIONS

Label Medications

Medications are labeled with medication name, strength, and amount. Labeling of specimens is done at the bedside to ensure correct specimen from correct patient.

Reduce Harm From Anticoagulation Therapy

Deep vein thrombosis or DVT is a blood clot that forms in a vein deep in the body. Blood clots occur when blood thickens and clumps together. Most deep vein blood clots occur in the lower leg or thigh. They also can occur in other parts of the body. A blood clot in a deep vein can break off and travel through the bloodstream. The loose clot is called an embolus. When the clot travels to the lungs and blocks blood flow, the condition is called pulmonary embolism (PE). A PE is a very serious condition. It can damage the lungs and other organs in the body and cause death.

The signs and symptoms of a deep vein thrombosis (DVT) may be related to a DVT or to a pulmonary embolism (PE). Contact your nurse and doctor if you have symptoms of either. Both DVT and PE can cause serious, possible life-threatening complications if not treated. Only about half of the people with DVT have symptoms. These symptoms occur in the leg affected by the deep vein clot.

They include:

- Swelling of the leg or along a vein in the leg
- Pain or tenderness in the leg, which you may feel only when standing or walking
- Increased warmth in the area of the leg that is swollen or in pain
- Red or discolored skin on the leg

Symptoms of a Pulmonary Embolism include:

- Unexplained shortness of breath
- Pain with deep breathing
- Coughing up blood

IV. REDUCE THE RISK OF HEALTH-CARE ASSOCIATED INFECTIONS

Hand Hygiene

We protect you from infections by cleaning our hands before and after contact with you. Your health care providers will wash their hands with soap and water or use alcohol foam to disinfect their hands.

Preventing Surgical Site Infections

We follow the National Surgical Care Improvement Project guidelines, which include giving the appropriate antibiotics for certain procedures at the correct time. The guidelines also direct care providers to clip surgical sites instead of shaving.

Accurately And Completely Reconcile Medications Across The Continuum

It's important for health care providers to know which medications you take. Please bring your medication with you to the hospital in their bottles (prescriptions and non prescriptions). We will need to make a correct current medication list.

Reduce The Risk Of Patient Harm Resulting From Falls

The combination of long periods of fasting, invasive procedures, and medications you may not be accustomed to can put you at a higher risk for falling. Please call for help if you need to get up. We will assist you.

V. UNIVERSAL PROTOCOL FOR PREVENTING WRONG SITE, WRONG PROCEDURE, AND WRONG PERSON SURGERY

Conduct A Pre-Procedure Verification Process

You will be asked certain questions several times by different people to ensure your safety. For example, before your surgery, several perioperative staff members will ask you to verify what procedure you are having as well as the specific surgical site planned.

Mark Your Surgical Site

Before your procedure, the doctor will confirm with you the correct surgical site, and will mark "YES" on the correct site in cases of laterality (right / left) or multiple sites (eyes, ears, fingers, toes, etc.).

Perform A "Time-Out"

Before your procedure, a time-out is conducted. A time-out is active communication with all the members of your surgical or procedure team, verifying correct patient, correct site, correct procedure, correct equipment, informed consent done, prophylactic antibiotics given at the correct time prior to incision. Time-outs are documented in the patient record.

Additional Information

Additional information can be found on these sites:

American Society of Anesthesiology - Patient information regarding anesthesia, including use of herbal medications and obstructive sleep apnea: www.asahq.org/patientEducation

www.jointcommission.org/PatientSafety/SpeakUp

[www/jointcommission.org/Patient Safety/NationalPatientSafetyGoals](http://www/jointcommission.org/PatientSafety/NationalPatientSafetyGoals)

NORMAN REGIONAL (MAIN CAMPUS)

901 N. Porter, Norman, OK 73071 • 405-307-1000

SAME DAY SURGERY • 405-307-1250

Same Day Surgery is located on the NE side of the hospital on N. Findlay Ave.
From Porter & Robinson St. go East to N. Findlay St., turn right. (2nd big Parking lot on Right)

Registration for Preadmission is on the Entrance Level

Same Day Surgery is located on the 1st floor – Take Elevator H to 1st floor, turn left

Directions from Oklahoma City:

From I-35 S, at Exit 113 take ramp left and follow signs for US 77 S
to Robinson St. turn left then Right onto Porter

HEALTHPLEX

3300 HealthPlex Parkway, Norman, OK 73072 • 405-515-1000

SAME DAY SURGERY • 405-515-1250

Same Day Surgery is located on the Northeast side of the hospital, Parking Lot with 3 Flags
Registration for Preadmission is on the First Floor

Same Day Surgery is located on the 2nd Floor (Tower Elevators to 2nd Floor, turn left down the hallway
and check in at the Reception Desk)

Directions from Oklahoma City:

From I-35 Southbound, Take Exit 112
(Tecumseh) Right onto W Tecumseh to
Healthplex Parkway on left

Directions from Norman:

From I-35N toward Oklahoma City,
Take Exit 112 (Tecumseh Rd) follow ramp
and Turn Right onto Tecumseh to
Healthplex Parkway on left

MOORE MEDICAL CENTER

700 S. Telephone Rd., Moore, OK 73160 • 405-793-9355

SAME DAY SURGERY • 405-912-3045

Same Day Surgery is located on the East side of the hospital
Telephone Rd to SW 6th Street, turn left, follow curve to “Outpatient” Building on Left

Directions from Oklahoma City:

From I-35 S, Take Exit 117/S 4th St,
Turn Right onto SW 4th St,
Turn Left on Telephone Rd

Directions from Norman:

From I-35 N toward Oklahoma City
Take Exit 117 (S 4th St/Main/N. 5th St.)
Take first Right after exit, turn right on
S. Howard then immediately right onto
SW 4th St, turn Left on Telephone Rd

NormanRegional.com

Norman Regional Hospital
Moore Medical Center
Norman Regional HealthPlex



Norman Regional
HEALTH SYSTEM