

Patient Education Guide

LAKEWOOD SURGERY CENTER

CONTACT US

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PugetSoundOrthopaedics.com



Dear Valued Patient,

Thank you for choosing Lakewood Surgery Center and Puget Sound Orthopaedics for your upcoming surgical procedure.

We take pride in providing the highest quality care in a safe environment. At Lakewood Surgery Center you will always be treated with compassion and concern for your well-being.

Use this guide to familiarize yourself with the process of preparing for surgery. The guide provides information on how to prepare for your surgery, what to expect on the day of surgery, and how to plan for your care after surgery. You will also find helpful telephone numbers and directions to our surgery center.

We understand that undergoing a surgical procedure can be stressful. The professional staff at Lakewood Surgery Center is focused on providing you with the tools you need to feel at ease on the day of our procedure. Our health care team is dedicated to ensuring that your experience here is a positive one.

Sincerely, Lakewood Surgery Center Staff

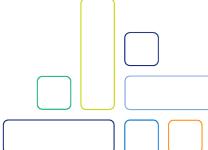


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Welcome to Lakewood Surgery Center



Thank you for choosing Lakewood Surgery
Center for your outpatient surgical procedure.
You and your caregiver are now on the
pathway to preparing for your surgery.

The information you'll find in this patient guide is intended to help you prepare for your surgery and inform you of what to anticipate afterward.

YOUR CARE TEAM

Your care team at Lakewood Surgery Center includes your Puget Sound Orthopaedics board-certified surgeon; physician assistant; and Lakewood Surgery Center team, which includes surgery coordinators, registered nurses, surgical technologists, and our anesthesiologists.

AN IMPORTANT NOTE ABOUT BILLING

You may receive separate invoices from:

- Lakewood Surgery Center
- Your surgeon
- Surgical assistant

- Anesthesiology
- Lab and/or pathology
- Pacific Medical

IMPORTANT CONTACT INFORMATION

•	Puget Sound Orthopaedics	253.582.7257
•	Lakewood Surgery Center	253.584.5252
•	Surgery scheduler	253.582.4240
•	Preoperative registered nurse	253.584.5252
•	Nurse manager	253,722,0496

MAKE A LIST OF QUESTIONS OR CONCERNS TO DISCUSS WITH YOUR SURGEON

Take some time to think about what your goals, concerns, and questions are related to your upcoming surgery. Get started by using the space below to make a list of what to discuss with your surgeon or physician assistant at your next appointment or during your preoperative interview with the registered nurse.

PREOPERATIVE QUESITONS

1 _			
2			
3			
4			
5			

ARRANGE FOR A CAREGIVER

PATIENT APPOINTMENTS/TASKS

- Caregiver must commit to staying with you for a minimum of 24 hours after being discharged to go home.
- Caregiver must be present at check-in.
- Caregiver must be present immediately following surgery to speak in person with the surgeon and receive discharge instructions from the nurse.
- Caregiver must be at least 18 years of age and have a valid driver's license upon check-in.

RECEIVED PHONE CALL FROM LAKEWOOD SURGERY CENTER REGISTERED NURSE TO REVIEW

- Simple Admit[™] registration
- Medications
- Lab/EKG orders
- Questions

ARRANGE FOR TRANSPORTATION TO AND FROM LAKEWOOD SURGERY CENTER

Driving directions to Lakewood Surgery Center

7308 BRIDGEPORT WAY W.

The surgery center is located in suite 102 on the first floor of the building.



FROM I-5 NORTH

- 1. Take the S 72 St. exit, EXIT 129, toward S 84 St
- Keep right; take the S 74 St W ramp
- 3. Merge onto 74th St W; continue for 2.24 miles
- 4. 74th St W becomes Custer Rd W
- Turn right onto Bridgeport Way W.
- Lakewood Surgery Center is on your left in the same building as Puget Sound Orthopaedics

FROM I-5 SOUTH

- Take the Bridgeport Way exit, EXIT 125, toward McChord AFB
- Turn left onto Bridgeport Way SW
- 3. Continue for 3.35 miles
- Lakewood Surgery Center is on your left in the same building as Proliance Puget Sound Orthopaedics

Preoperative instructions: prior to surgery

SEVERAL DAYS BEFORE SURGERY

 Our office will contact you regarding questions about your medical history and the medication that you are currently taking. If we are unable to contact you regarding your arrival time for surgery your surgery may be canceled.



- You must arrange for transportation to and from the surgery center.
- Your caregiver must be present with you at check-in. Your caregiver also must be present immediately after the procedure to speak with the surgeon and receive discharge instructions from the nurse. You will not be discharged unless accompanied by a responsible adult (18 years and older). Your caregiver must accompany you home and stay with you for at least 24 hours after surgery. If you do not have a caregiver present at the time of check-in your surgery may be delayed or rescheduled.
- Notify the surgery center as soon as possible if you experience any health changes such as a cold, persistent cough, or fever since your last visit.
 If you develop an infection or start taking antibiotics, your surgery may need to be rescheduled.
- All non-steroidal anti-inflammatory (NSAIDS) medication must be discontinued 10 days prior to surgery. Examples include Ibuprofen (Advil, Motrin), Naproxen (Aleve, Naprosyn), Daypro and Feldene (Piroxicam, Voltaren, and Diclofenac), and Meloxicam.
- All over the counter (OTC) herbal supplements, vitamins, and minerals
 must be discontinued 7 days prior to surgery. Examples include Saint
 John's Wort, garlic supplements, Vitamin E, ginseng, ginkgo, ginger, fish oil,
 willow bark, and feverfew.
- All blood thinning medication must be discontinued 5 days prior to surgery. Before discontinuing any blood thinning medications, please contact your prescribing doctor to establish whether it is safe or not to stop taking them. Examples include Coumadin, Warfarin, Aggrenox, Pletal, and Aspirin (to include baby Aspirin, Alka-Seltzer, and Excedrin). If you are taking Coudamin or Warfarin, you will be required to obtain a lab

test called PT/PTT/INR within 12 hours of your surgery. If these labs aren't available on the day of your surgery, you may be rescheduled for a later surgery date. Plavix (Clopidogrel) must be discontinued **14 days prior to surgery.**

DAY BEFORE SURGERY

- Do not smoke cigarettes or drink any alcoholic beverages for at least 24 hours prior to surgery.
- Do not eat or drink anything after midnight on the night prior to surgery (except for the medications noted below in Day of Surgery).
- No chewing gums or mints after midnight.

List of medications to stop before surgery

There are several medications that you may need to stop taking before your surgery date. Your surgeon will discuss with you which specific medications you will need to discontinue. Do not stop taking blood thinners without consulting your prescribing doctor.

NOTE: The medications and timelines listed below are guidelines. Do not stop taking any medications until you have been given exact instructions by your surgeon or physician assistant.

MEDICATION NAME	WHEN TO STOP TAKING
Adderall (Other stimulants/ADHD medications)	Do not take on day of surgery
Advil (Ibuprofen, Motrin)	10 days prior
Aleve (Naproxen)	10 days prior
Alka-Seltzer	5 days prior
Arava (Leflunomide)	2 days Prior
Aspirin (Aggrenox, baby aspirin)	5 days prior, do not stop until cleared by cardiologist

Blood Pressure medications ending in "tans" or "prils" (Losartan/Lisinopril)	Do not take on day of surgery
Celebrex	10 days prior
CIMZIA (certolizumab)	4 weeks prior
Diclofenac (Voltraren) Oxyaprozin (Daypro)Piroxicam (Feldene)	10 days prior
Excedrin	5 days prior
Imuran (Azathioprine)	2 days prior
Lantus/Levemir (Insulin)	Do not take on day of surgery. Any other insulin, take only half of your usual morning dose on the day of surgery
Lasix (Hydrochlorothiazide, Furosemide)	Do not take on day of surgery
Metformin (Gllyburide) Januvia (Sitgliptin)	12 hours prior
Methotrexate	Skip one cycle of doses
Mobic (Meloxicam)	7 days prior
Multivitamins	7 days
Non-Steoidal Anti-inflammatory (NSAIDS)	10 days prior
Orencia (Abatacept)	4 weeks prior
Phentermine	2 weeks prior
Plaquenil (Hydrozychloroquine)	4-6 weeks prior
Plavix	14 days prior, do not stop until cleared by cardiologist
Pletal (Cilostazol)	5 days prior
Remicade (Infliximab)	4-6 weeks prior
Supplements: Herbal, vitamins, and minerals	7 days prior
Ticlid	14 days prior
Warfarin (Coumadin)	5 days prior, do not stop until cleared by cardiologist

Preoperative instructions: day of surgery

DAY OF SURGERY

- If you are diabetic, check your blood sugar. If you are taking Metformin, Glyburide, or Januvia, you will need to stop taking these medications 12 hours prior to surgery. Do not take Lantus or Levemir. Take only half of your usual morning dose of any other insulin. You should take long-acting insulin and only half of your dose of short-acting insulin. Call the surgery center if you have any questions.
- Withhold any type of "water pills." Examples are Hydrochlorothiazide (HCTZ) and Furosemide (Lasix).
- Take your blood pressure, anti-anxiety, and heart medications (excluding blood thinners) with only a small sip of water.
- Shower with antibacterial soap (most liquid hand soaps are antibacterial).
 Do not use any lotions, creams, or deodorants.
- Brush your teeth but do not swallow any water or mouth rinse.
- Wear large loose fitting comfortable clothes. Do not wear tight jeans or other tight-fitting clothing because you will have a bandage, wrap, splint, cast, and/or sling on after your surgery.
- Remove any contact lenses.
- Leave your valuables at home, including all jewelry, rings, watches, etc.
- Bring a list of your current medications, dosages, and time/date last taken with you to Lakewood Surgery Center
- If you have asthma, emphysema, and/or COPD, bring your inhalers with you to the surgery center.
- Bring your current photo ID (driver's license, military ID, or state ID) and insurance card with you to the surgery center.
- Due to patient safety and HIPAA regulations, we are not able to allow family members or friends to go back into the surgery center for the preoperative process. We do apologize for any inconvenience this may cause. Your caregiver will be able to go back into the surgery center once you are ready to be discharged.

- Do not bring children under the age of 15 to the surgery center. We are unable to provide supervision for children in the waiting room and the recovery unit does not allow anyone under 15 years of age to ensure the privacy of all patients.
- If you have an Advance Directive, please bring it with you. In the case of an emergency, we will resuscitate and transfer you to a facility that can implement your Advance Directive.
- If you have any questions or need any help understanding these instructions, call our office immediately at 253.584.5252

Your surgical experience: what to expect on the day of surgery

CHECK IN

When you arrive at Lakewood Surgery Center, check in with the receptionist at the front desk and complete the admission process. At this time you will need to leave all personal belongings with your caregiver in the waiting room.

PREOPERATIVE CARE

Once you have checked in at the surgery center front desk, you will be brought back to the admitting area where a registered nurse will prepare you for your surgery. Preoperative care includes changing into a surgical gown, reviewing your medical history and medications with the RN, having an IV started, and meeting with your anesthesiologist and surgeon.

IN SURGERY

Members of your care team will be with you in the OR during your surgery, including your orthopaedic surgeon, physician assistant, anesthesiologist, registered nurse, and surgical technician.

POSTOPERATIVE CARE

You will then be taken to the Post Anesthesia Care Unit (PACU) for your recovery. The nurse will monitor your blood pressure, heart rate, oxygen Page 11

saturation level, and pain level and will have you use an incentive spirometer to encourage deep breaths and coughs. Once you are able to drink juice/water and eat soft foods, you will be discharged with your caregiver.

You and your caregiver are encouraged to ask questions at any time during your stay at Lakewood Surgery Center.

What to expect after surgery: common concerns

PAIN MANAGEMENT MEDICATION SUPPLIES

- Prescription pain medicine will be ordered for you by your surgeon or physician assistant.
- When you need a prescription refill or a new prescription, contact your surgeon/physician assistant at 253.582.7257. Allow for a 24-hour turnaround time for all prescription refills.

INSTRUCTIONS

- Follow prescription instructions carefully.
- Read the pain management information that you will receive when you are discharged from Lakewood Surgery Center.
- Read the information about side effects that are included with each prescription.
- Avoid taking pain medicine on an empty stomach.
- Take your pain medication at least 30 (thirty) minutes before you plan to do your home exercises or start your physical therapy appointment.
- Avoid letting the pain get out of control during the first few days

WHAT IS NORMAL

- Pain relief from your pain medications that allows for rest, sleep, home exercises as instructed, planned activity, and physical therapy.
- For the first few weeks, it is normal to feel "more" pain in the afternoon and evening when feeling more tired due to physical fatigue and when you begin increasing your physical activity.
- Pain should noticeably decrease ("feel better") each week during the first 4-6 weeks thereafter.
- If you use a CPAP machine, continue to use it.

WHAT IS NOT NORMAL

- Pain that increases or is not relieved with prescribed medications, when they are taken as prescribed.
- If any unwanted side effects or allergic reactions occur (as described in the printed medication information from the pharmacy), call your surgeon/physician assistant at 253.582.7257 to have your pain medication prescription changed.

What to expect after surgery: common concerns

CONSTIPATION: MEDICATION/SUPPLIES

Take a stool softener daily until you are no longer taking prescription pain medication. If you do not have a bowel movement at least every other day, you may need a mild laxative such as prune juice or an over-the-counter laxative. Consult with your surgeon, physician assistant, or pharmacist for laxative recommendations.

INSTRUCTIONS

Taking fiber supplements, eating high-fiber foods, and drinking plenty of fluids during the day are helpful when used with a stool softener. Gradually increasing your walking every few hours a day is helpful as well.

WHAT IS NORMAL

- Less frequent bowel movements than normal due to the general anesthesia during surgery and prescription pain medication.
- Bowel movements should return to normal after prescription pain medication is no longer needed daily.

WHAT IS NOT NORMAL

- No bowel movements for 3 days or more increasing abdominal pain, nausea, or vomiting. Notify your surgeon/physician assistant at 253.582.7257 if these concerns are present.
- If you experience difficulty breathing, shortness of breath, or chest pain, immediately call 911 or go to an emergency room.

What to expect after surgery: common concerns

PREVENTING INFECTION

Antibiotics will be given to you on the day of surgery.

INSTRUCTIONS

Call your surgeon/physician assistant at **253.582.7257** if you develop a fever of 100.5° or higher, or new/increased incision drainage or redness.

Read the surgical site infection information sheet that you will be given when you are discharged from Lakewood Surgery Center.

Always call your surgeon/physician assistant promptly if you are concerned about any possible signs of infection.

WHAT IS NORMAL

The incision should look healed and closed without redness around it by 2-3 weeks after surgery.

WHAT IS NOT NORMAL

Increasing redness, pain, or drainage at the incision, increasing and constant joint pain, fever more than 100.5°, any other health change with fever, Page 14

especially the within first 1-3 months of surgery. Any redness/drainage from stitches under the skin that 'pop out' as the incision heals.

* Most fevers occur due to inactivity during recovery. It is important to stay mobile and frequently breathe deeply throughout your recovery.

What to expect after surgery: common concerns

APPETITE CHANGES: MEDICATION/SUPPLIES

No diet restrictions. Stay hydrated by keeping fluids within reach throughout the day.

INSTRUCTIONS

Drink fluids frequently and eat small frequent meals/snacks until your appetite returns to normal.

WHAT IS NORMAL

It is normal to not have much of an appetite for 1-2 weeks, but your appetite will gradually increase during the first few weeks. Some weight loss (<5-10 lbs.) can occur in the first 1-2 weeks until your appetite returns to normal.

WHAT IS NOT NORMAL

Persistent nausea, vomiting, diarrhea at any time, or unexplained weight loss after the first 1-2 weeks. Notify your surgeon at **253.582.7257** if any of these symptoms develop.

Stay hydrated. Decreased appetite is normal.



