

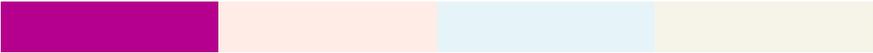
A Patient's Guide to
**Getting Better
Faster**



With Enhanced Recovery After Surgery

Hartford
HealthCare
Connect to healthier.™





Enhanced Recovery After Surgery

This handbook was created as part of Hartford HealthCare's Enhanced Recovery After Surgery (ERAS) initiative. ERAS is a pathway meant to help you prepare for surgery and recover more quickly. ERAS focuses on making you an active participant in your recovery because you are the most important member of your healthcare team. Your team also includes your surgeon, residents, nurse practitioners (APRNs), physician assistants (PAs), nurses, patient care technicians, anesthesiologists, nurse anesthetists (CRNAs), surgical technicians, physical therapists, occupational therapists, dieticians, social workers, care coordinators and environmental services technicians. Together, your health care team will work closely with you to provide a safe and comfortable experience.

IMPORTANT: Please Read!

The information in this guide is for patient educational purposes only. This guide is not meant to replace the advice or instruction of a professional healthcare provider, or substitute for medical care. Please contact your surgical provider with any questions or concerns regarding your care.

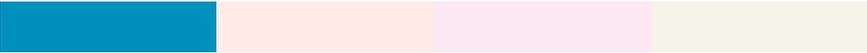


Surgical Checklist

- Get fit and stay active
- Quit smoking
- Stay informed
- Eat a healthy diet
- Limit alcohol consumption
- Know your surgery date/time

Bring to the Hospital

- A form of legal identification, such as a driver's license, state identification card or passport
- Health insurance card(s)
- A list of your medications, including over the counter and herbal supplements that you take daily
- Any paperwork given to you by your surgical or other health providers
- A copy of your advanced directives, if any
- A copy of your living will and healthcare representative form, if any
- A pack of chewing gum to be chewed after surgery
- A book to read or something you like to do while you are in the hospital
- Any toiletries you may need
- Eyeglasses/hearing aid(s) with case, and an extra battery
- Dentures
- Your CPAP or BiPAP mask and settings. It is not necessary to bring the machine and if you do, it will be checked before use
- This patient guide



Before Your Surgery

Just like an athlete trains for an event, you are in “training” for your surgery. Our goal is to help you improve your overall health before you have surgery so that you can recover more quickly. Together, we can do this by addressing your physical activity, nutrition, and habits such as tobacco use and alcohol consumption ahead of time.

Get fit and stay active

Improved outcomes after surgery are directly influenced by your level of physical activity before surgery. To minimize the loss of strength and endurance that often occurs during recovery, you want to be as strong as you can be before your surgery. Walking is an easy way to increase activity. Try using a pedometer or fitness tracker, such as a Fitbit or Apple Watch, to keep track of how many steps you take a day.

Easy ways to increase your daily activity

- Walk up the stairs instead of taking the elevator
- Park as far away from the store as you can
- Get off the bus one stop earlier
- Take an extra lap around the store before stopping at the check-out

Eat a healthy diet

A balanced diet with fruits, vegetables, and protein will help your body heal faster, regain strength and energy more quickly and improve your ability to fight infection.



Here are a few tips for healthy eating

- Eat a variety of fruits and vegetables; they should make up at least half of your plate
- Choose plant-based sources of protein, such as beans
- Choose whole grains. Try substituting brown, black or wild rice for white; whole wheat bread for white bread; and whole oats or barley for cream of wheat
- Choose heart healthy fats high in Omega-3 fatty acids. Try substituting olive oil for butter; and eating fish such as tuna, salmon and sardines instead of meat
- Limit sodium intake by seasoning with fresh herbs and spices rather than salt rubs
- Limit intake of processed foods and refined sugars

Stay hydrated

It is important that you stay hydrated. Beginning three days before your surgery try to drink at least six (6) eight ounce glasses of water a day unless you are given different instructions by your surgical provider.

Practice deep breathing

Healthy lungs can speed up your recovery time and decrease your risk of pneumonia after surgery. To reduce your risk, you will be given a breathing tool called an incentive spirometer and instructions for how to use it. **Use your incentive spirometer 10 times an hour while you are awake.**



Quit smoking

You must stop smoking at least 4 weeks before your surgery or at the very least cut back. See your primary care provider if you require medications to help you break the habit.

Limit alcohol use

Drinking less alcohol before surgery will help you recover more quickly. If you use alcohol frequently, be sure to discuss this with your surgical provider prior to your surgery.

Stay positive

Surgery can be a stressful time for you and your loved ones. The more relaxed and confident you are before your surgery, the better your chances are for an easier recovery.

Stay informed

Speak with your health care providers so that you can make informed decisions about surgery. If there is anything that you do not understand, please ask!

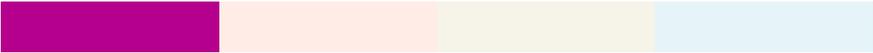


Your Pre-Surgical Office Visit

During your office visit, your surgical provider will discuss the reason(s) for considering surgery, surgical options, potential risks and complications and the alternatives to surgical intervention, if any.

During this visit you may be asked to:

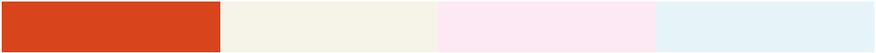
- Answer questions about your medical history and past surgical history
- Review your current medications
- Complete a physical exam within 30 days of surgery
- Have an EKG
- Sign the informed surgical consent
- Confirm with your surgical provider where your incision will be made
- Learn what you need to do to prepare for your surgery
- Schedule an appointment with one of your specialists, if applicable (cardiologist, pulmonologist, endocrinologist or other specialist)



Getting Ready For Surgery

There are a few things you can do before coming to the hospital to make it easier after your surgery:

- Choose a coach (18 years of age or older) to go with you to the hospital
- Fill your routine prescriptions in advance
- Prepare meals that can be frozen ahead of time
- Remove any objects from your home that might cause you to trip (scatter rugs, low hanging bedspreads, pet toys, etc.)
- Place things that you use often at waist height to avoid reaching after your surgery
- Make sure that you have a pair of well-fitting shoes or slippers with non-skid rubber soles
- If you are the caregiver of a loved one, arrange for his/her care prior to coming to the hospital
- Make arrangements for walking pets; bringing in the mail
- Have easy access to a landline or wireless phone with emergency numbers
- Plan to sit in chairs with arms after surgery, as this will make it easier for you to get up
- Arrange transportation to the hospital



Medication Instructions

- Stop taking vitamins, supplements and/or herbal remedies 3 days before surgery
- Stop taking aspirin, Ibuprofen (Motrin® or Advil®) and Naproxen (Aleve®) 7 days before surgery
- If you are taking prescription pain medications routinely, please let your surgical provider know so that we can have a special plan in place for your pain control during your stay in the hospital and when you go home
- If you are receiving medication-assisted treatment (i.e. Suboxone), you will need to contact your provider
- Do not use recreational drugs 10 days before your surgery
- Check with primary care provider or specialist instructions for taking blood thinners and diabetes medications



The Day Before Your Surgery

- Do not eat solid food or milk products after midnight. You may drink clear fluids such as broth, water or pulp-free juice up until one hour before your arrival time.
- If you have diabetes, your glucose levels may vary more than usual as you prepare for surgery.
- A nurse will call you the day before your surgery to tell you what time to arrive at the hospital on the day of your surgery. If your surgery is scheduled for Monday, the nurse will call you on the Friday before your surgery is scheduled.
- **If a bowel prep is required:** Follow your surgical provider's instructions.



The Day of Surgery

- Take your medication(s) as instructed by your surgical provider
- Remove nail polish, makeup, jewelry, piercings and contact lenses
- Leave valuables at home (do not bring large sums of money, credit cards or jewelry to the hospital)
- One hour before your arrival to the hospital, drink 16 ounces of apple juice or other beverage as directed. Please do not drink any more fluids

When You Arrive at the Hospital

- You will be directed to the pre-operative area
- You will be weighed, your blood pressure, heart rate and temperature will be checked and you will be asked to change into a hospital gown
- The nurse will review your allergies, medications and medical history
- A complete skin assessment will be performed by the nurse
- You will be seen by your surgeon and the anesthesia provider
- When it is time for you to be brought to the operating room, your loved one(s) will be directed to the waiting room

Throughout your hospital stay, you will be asked repeatedly by the members of your health care team to state your name and date of birth to keep you safe!

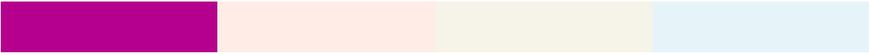


Your Surgery Begins

From the pre-operative area you will be taken to the operating room for surgery.

In the operating room:

- We will confirm your identity and the surgical procedure to be done
- You will be moved to the operating room bed
- You will be connected to monitoring equipment
- Compression devices will be placed on your lower legs to help prevent blood clots
- You will get antibiotics through your IV to decrease your risk of developing a surgical site infection
- The anesthesia provider will help you to fall asleep with medicine given through your IV, which works in about 30 seconds
- Once you are asleep, a plastic breathing tube may be placed into your mouth to help you breathe during surgery
- A urinary catheter may be placed in your bladder after you are asleep to measure the amount of urine you are making during surgery
- Just before starting your surgery, the surgical team will pause to do a “TIME-OUT” to confirm your name, date of birth, and the exact part of your body they will be operating on
- Surgery will then begin



After Surgery

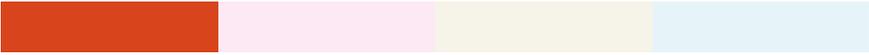
After the surgery is complete, you will be taken to the recovery area (PACU) where specially trained nurses will care for you as you wake up from anesthesia. Once you are awake, you may be given ice chips to moisten your mouth. You may also start the mobility exercises described in this handbook. Early movement encourages your bowel function to return sooner, leading to faster recovery. Once your surgery is done, a member of the health care team will contact your loved one(s). Once you are ready to be brought to your room, the nurse will notify your loved one(s) so they may accompany you to your room.

Pain Control

You will be asked to rate your pain level on a scale of 0 to 10; 0 is no pain and 10 is severe pain. Using a combination of medications to help control your post-operative pain will enable you to get up earlier and recover more quickly.

Coughing, Sneezing, Laughing

Coughing, sneezing and laughter are not as easy when you are recovering after surgery. When you feel the urge, you should brace your incision with your hands or a pillow and hug your incision, applying gentle, but firm pressure. This bracing action will help support your incision and reduce tension on the site.



Your Recovery

- A urinary catheter may remain in place after your surgery. Your catheter will be removed as soon as your surgical providers feel it is appropriate.
- It is not uncommon to have pink-tinged urine or a burning sensation with urination. This will go away in a day or so.
- Nursing staff will check your blood pressure, heart rate and temperature often.
- While in bed, compression devices will be placed on your legs to help prevent blood clots.
- As further blood clot prevention, you may also receive a blood thinner by an injection as a scheduled medication.
- Your nurse will give you an incentive spirometer and instructions for how to use it. Use your incentive spirometer 10 times an hour while you are awake.
- You will be asked to get out of bed and sit in the chair or go for a short walk with your nurse. Lying in bed without moving may cause many problems such as pneumonia, blood clots, muscle weakness, slowed bowel function and skin breakdown. The sooner you get out of bed and start walking, the better you will feel and the faster you will recover.
- You will be encouraged to walk 4-6 times a day, if able
- You will be seen by your surgical provider.
- All meals including breakfast should be eaten while sitting in a chair.
- It is not uncommon to have bleeding with your first few bowel movements following your surgery. If this happens, notify your surgical provider.

Bed Mobility After Surgery: Exercises

Get up and move. If you don't move it, you lose it

To prevent complications such as pneumonia, blood clots and muscle weakness after surgery, use your muscles. Try these exercises as soon as you wake up and all through your stay.

Ankle Pumps and Ankle Circles

Move your ankle up and down slowly. Move your ankle clockwise and counterclockwise slowly.



Quad Sets

Tighten the muscle on the front of your thigh by pressing the back of your knee into the bed. Hold 5 seconds.



Glute Sets

With your legs straight, squeeze your buttocks together. Hold 5 seconds.



Heel Slides

Slowly bend your knee, hold 5 seconds and lower slowly.



Tips for Getting In and Out of Bed

Following these guidelines will minimize the amount of pressure on your incisions and avoid increasing your pain. Remember, it's important to breathe. Avoid holding your breath.

Getting out of bed-log roll method: 3 steps

- 1) Roll onto your side;
knees bent



- 2) Move feet off bed;
push up to sit



- 3) Sit on side of bed
before standing



Reverse for getting into bed: 3 steps

- 1) Sit on bed, towards the top; sit deep into the mattress; calves should touch bed

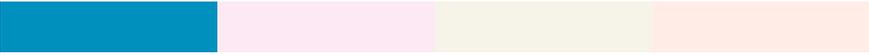


- 2) Lower down to elbow; then shoulder; lift legs with knees bent



- 3) Roll to back with knees bent





Complications Which May Delay Recovery

Prevention of Nausea and Vomiting

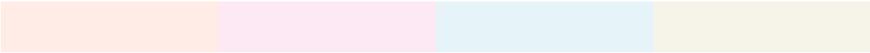
Some patients may experience nausea after surgery. If you feel queasy, please notify your nurse right away so that medication may be given to control this.

Postoperative Ileus

After surgery your bowel may temporarily stop working. This is called an ileus. You may feel bloated and may have nausea and vomiting. Some pain medications (narcotics/opioids) increase your chance of an ileus. Walking soon after surgery will often help to prevent an ileus and allow you to recover more quickly.

Wound Infection

Wound infections may occur after surgery. Washing your hands with soap and water or an alcohol-based product/hand sanitizer is the best way to help prevent infections.



Preventing Blood Clots

Deep Venous Thrombosis (DVT) is a blood clot in a vein. The biggest danger is a clot that breaks off and travels to the lungs. This is called a Pulmonary Embolism (PE) and it can be life threatening.

Know the signs

- DVT: A clot in the arms or legs. You may have pain, swelling, redness, warmth or numbness/tingling
- PE: A clot in the lungs. You may have difficulty breathing, chest pain, or fast heart rate

Prevention

- Avoid sitting or lying in one position for long periods of time
- Stretch your legs and walk
- While in the hospital, wear your Sequential Compression Devices (SCD)
- Medications: Blood thinners such as Heparin, Lovenox, Aspirin



Going Home

Before you leave the hospital, you will be given:

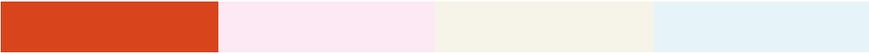
- A copy of your home instructions. Your coach should be with you to hear about your home instructions. Together, you will learn what to do during your recovery
- A list of medications that you will need to take
- Prescriptions you will need following your discharge from the hospital
- Instructions on when to follow up with your surgical provider
- If you have sutures or staples they are usually removed 10-14 days after surgery at the surgical provider's office

Our case care coordinators can help with your home needs, if any.

We will not release you from the hospital until we are confident that you are ready to go home.

Be sure to collect all of your belongings that may have been stored in your hospital room.

Expect to have a follow up appointment with your surgical provider after you go home. If a follow-up appointment is not made before you leave the hospital, please call your surgical provider as soon as possible to schedule this appointment. At your follow-up appointment you will discuss when you may return to driving, work and usual activities and hobbies.



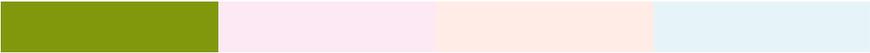
Welcome Home

Now that you are home, it is important that you continue to participate in your recovery by eating small, high-protein meals, staying hydrated, walking 3-4 times daily, and taking your medications as prescribed. Although complications do not happen very often, it is important for you to know what to look for if you do not feel well.

After you leave the hospital, you should call your surgical provider if you have:

- Fever higher than 101.5 degrees
- Vomiting and cannot keep liquids or food down
- Redness or drainage from your incision
- Increasing abdominal pain that is not controlled by pain medication
- No passage of gas for more than 48 hours
- Lower leg pain, redness and/or swelling
- Dizziness or feeling faint while standing
- Frequent, watery diarrhea

**If you have sudden shortness of breath
or chest pain, DIAL 911**



Hospital Information

Hartford Hospital

80 Seymour Street, Hartford, CT 06102

860.545.5000

hartfordhospital.org

Parking: Public parking on 85 Seymour Street. Major credit cards and cash accepted. Valet parking is available.

The Hospital of Central Connecticut

New Britain General Campus

100 Grand Street, New Britain, CT 06050

860.224.5011

thocc.org

Parking: Public parking garage. Cash only. Valet parking is available.

MidState Medical Center

435 Lewis Avenue, Meriden, CT 06451

203.694.8200

midstatemedical.org

Parking: Free public parking

Backus Hospital

326 Washington Street, Norwich, CT 06360

860.823.6300

backushospital.org

Parking: Free public parking



Visiting Hours

Hartford HealthCare welcomes visitors 24/7 at our hospitals to provide healing and comfort to patients. Some exceptions apply.

Please speak with the nursing staff on the unit to get the most up-to-date information.

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