A Patient’s Guide to Getting Better Faster

With Enhanced Recovery After Surgery
Gynecologic Surgery

Hartford Healthcare
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, physicians, 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

- This patient guide
- A form of legal identification such as a driver’s license, state identification card or passport
- Heath 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
- Feminine pads and any other 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
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 our 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. Your physician may also have you do specific exercises that are included in this packet.

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 this office visit, your surgical provider will discuss the reasons 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

• Schedule 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

• Obtain a ring-shaped foam cushion often called a donut that will allow you to sit more comfortably after surgery, especially if you have a long ride home from the hospital

• Please discuss with your doctor about when you can expect to return to work after surgery
Pre-Operative Stretching Instructions

During the week prior to your surgery please perform the following exercises:

**Piriformis Stretch Sitting**
- Cross leg over thigh and place elbow over outside of knee
- Gently stretch buttock muscles by pushing bent knee across body
- Hold for 30 seconds
- Repeat on opposite side and hold for 30 seconds

*Repeat 5-10 times per set. Do 1 set per session. Do 1 session per day*

**Piriformis Stretch Lying Down**
- Cross one leg on top of other
- Gently pull other knee toward chest until stretch is felt in buttock/hip of top leg
- Hold for 30 seconds
- Repeat on opposite side and hold for 30 seconds
- Afterward, rotate hip out and hold for 5-10 seconds

*Repeat 5 times per set. Do 1 set per session. Do 2 sessions per day*

**Knee-to-Chest Stretch**
- With hand behind knee, pull knee into chest until a comfortable stretch is felt in lower back and buttocks — keep back relaxed
- Hold for 30 seconds
- Repeat on opposite side for 30 seconds

*Repeat 5 times per set. Do 1 set per session. Do 2 sessions per day*
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 and purchase feminine pads to use after surgery

• 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.

• If severe weather is expected on the day of surgery, please talk to your healthcare team about available extended stay accommodations.

• 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 and from the hospital
Medication Instructions

- Stop taking aspirin, Ibuprofen (Motrin or Advil) and Naproxen (Aleve) 7 days before surgery
- Stop taking vitamins supplements and/or herbal remedies 3 days before surgery
- Purchase AZO Urinary Pain Relief Maximum Strength (active ingredient - phenazopyridine) tablets. You will take this on the day of surgery to turn your urine an orange color
- 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 your primary care provider or specialist instructions for taking blood thinners and diabetes medications

Notes:

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The Day Before Your Surgery

• Do not eat solid food or milk products after midnight

• 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. If your surgery is scheduled for Monday, the nurse will call you on the Friday before your surgery is scheduled

• You will be called if your surgery is rescheduled due to severe weather
The Day of Surgery

• Take your medication(s) as instructed by your surgical provider
• Remove nail polish, makeup, jewelry, all body 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 non-red Gatorade or other clear beverages as directed. Please do not drink any more than 16 ounces of fluids*
• If instructed, please take two (2) tablets of the AZO Urinary Pain Relief Maximum Strength (active ingredient - phenazopyridine) just before leaving your home. This medication reduces bladder discomfort and turns the urine an orange color to help us examine your bladder during surgery

When You Arrive at the Hospital

• Parking is available at each hospital — fees may apply
• Once inside 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, medical history and perform a complete skin assessment
• You will receive medication in the pre-op area to help decrease your post-operative pain
• You will be seen by your surgeon and the anesthesia provider to answer any of your questions
• When it is time for you to be brought to the operating room, your loved one(s) will be directed to the waiting room
Your Surgery Begins

A team of highly trained healthcare professionals will make sure your safety and comfort are their number one priority. 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 and connected to monitoring equipment.
- Please be aware that your surgery may take place at a teaching hospital and there may be residents/medical students present to observe during your procedure.
- 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.
- A unique number will be assigned to you. This will enable your support person to track which stage of care you are in (surgery, post-surgical, and recovery).
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 a 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. You will be brought to a floor that specializes in post-surgical care of women.

Pain Control

Our goal is to minimize your post-operative discomfort. 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.

If you or your family members feel your needs aren’t being met after surgery, please speak with the nurse manager.
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.
- You will have vaginal bleeding or discharge that will require the use of a pad. Please inform your nurse if you are bleeding through a pad every hour.
- You may have vaginal packing as a result of your surgery. Your doctor will give you instructions.
- Do not insert anything into your vagina (i.e., tampons, douching) and avoid sexual intercourse.
- 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 a healthcare team member. 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.
- Eat small frequent meals which should be eaten while sitting in a chair.
- You will be encouraged to walk 4-6 times a day, if able.
- You will be seen by your surgical provider.
Complications Which May Delay Recovery

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.

Bowel Function

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.
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

- While in the hospital, wear your Sequential Compression Devices (SCD’s) on your lower legs as directed by your healthcare professional
- Medications: Blood thinners such as Heparin, Lovenox, Aspirin
- Avoid sitting or lying in one position for long periods of time
- Stretch your legs and walk
Going Home

On the day of discharge, please ensure you have arranged transportation to get home. We encourage you to ask questions.

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

*We will not release you from the hospital until we are confident that you are ready to go home. Our case coordinators can help arrange services if needed.*

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 resume 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.

Post-Operative Bowel Regimen

We recommend the following beginning the night you come home after surgery:

- Drink 4-6 glasses of fluid a day or the first two weeks after surgery

- Take one dose of Miralax at bedtime. If you have a bowel movement following one dose at bedtime, then continue taking Miralax at bedtime. If stools become loose, stop Miralax completely. Take Miralax at bedtime as needed if you do not have a bowel movement for three or more days

- If you do not have a bowel movement after the following morning, take one dose of Miralax at breakfast

- If you do not have a bowel movement in the evening, take one dose of Miralax at bedtime

- Continue taking Miralax in the morning and at bedtime if this works to keep your bowel movements regular. If you have loose stools, decrease to one dose per day

- If you have not moved your bowels by the fourth day after surgery, stop taking Miralax and buy a bottle of Citrate of Magnesia. This is usually sold in a 9 or 10 oz. bottle. If you haven’t moved your bowels before lunch on the fourth day after surgery, drink half of the bottle of Citrate of Magnesia. If you have not moved your bowels before dinner, drink the other half of the bottle.
• Please call the office at __________________________ if you have followed this protocol and still have not moved your bowels by the fifth day after surgery.

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

• Fever higher than 101.0 degrees
• Nausea with vomiting
• Redness or drainage from an incision
• Vaginal bleeding heavier than a menstrual period or using more than 1 pad an hour
• Difficulty urinating
• Increasing abdominal pain that is not controlled by pain medication
• Lower leg pain, redness and/or swelling
• Dizziness or feeling faint while standing

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

Please call our office with any questions
24 hours a day\7 days a week at ________________________________
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 24 hours a day/7 days a week at the main hospital entrance.

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
midstatememical.org
Parking: Free public parking

Backus Hospital
326 Washington Street, Norwich, CT 06360
860.823.6300
backushospital.org
Parking: Free public parking
Hartford Hospital Visiting Hours and Directions

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.

From West: (I-84) East to Hartford: Take Capitol Ave. Exit (48-B) at end of ramp turn left onto Capitol Ave. and turn right onto Washington St. (at statue of Lafayette), continuing south to 5th traffic light (CT Children’s Medical Center and public garage on left). Turn left into driveway at that light. Entrance to public garage is on the left.

From North: (I-91) South to Hartford: Take Capitol Area Exit (29A). From right lane, take first exit (Columbus Blvd./Convention Center). Turn left, crossing Columbus Blvd. Bridge. Continue through 5 lights (Columbus Blvd. becomes Wyllys St.) At 5th light, continue straight, cross Main St. onto Jefferson St. At 2nd light turn left onto Seymour St. At the front of Hartford Hospital, turn right; entrance to public garage is on the right immediately past Medical Office Building and across from CT Children’s Medical Center.

From East: (I-84) West to Hartford: Take Downtown Hartford (Exit 54) over Founders Bridge and move to the far left lane. At bottom of bridge, turn left onto Columbus Blvd. Travel past the Convention Center and across Columbus Blvd. Brdge. Continue through 5 lights (Columbus Blvd. becomes Wyllys St.) At 5th light, continue straight, cross Main St. onto Jefferson St. At 2nd light turn left onto Seymour St. At the front of Hartford Hospital, turn right; entrance to public garage is on the right immediately past Medical Office Building and across from CT Children’s Medical Center.
From South-East: (Rt. 2) West to Hartford: Take Downtown Hartford Exit to Founders Bridge. Turn left onto Columbus Blvd. Travel past the Convention Center and across Columbus Blvd. Bridge. Continue through 5 lights (Columbus Blvd. becomes Wyllys St.) At 5th light, continue straight, cross Main St. onto Jefferson St. At 2nd light turn left onto Seymour St. At the front of Hartford Hospital, turn right; entrance to public garage is on the right immediately past Medical Office Building and across from CT Children’s Medical Center.
West Hartford Surgery Center Directions

From I-84 East and West:
1. Take Exit 43 | Park Road
2. Take a left at the end of the ramp
3. Take a right at your first light | Raymond Road
4. Go through one light
5. At the next light take a left | Memorial Road
6. At the stop sign take a left | Isham Road
7. The Memorial Parking Garage will be in front of you

Directions to Designated Parking Lot:
1. Enter the Memorial Parking Garage
2. Take an immediate left
3. Follow signs suspended on the ceiling that say “Surgery Center Parking”
4. You will come to a gate. Please take a ticket
5. The gate will lift
6. Park in the Hartford Hospital Patient Parking spots
7. Bring your parking ticket with you to the 5th floor to be validated

Please make sure to go through the gate to the surgery center parking area. DO NOT PARK OUTSIDE OF THE GATE. If you park outside of the gate, we will be unable to validate your parking, and you will have to pay for the metered parking at the kiosk in the lobby.