



**PREPARING FOR SURGERY
HANDBOOK**

UVA Outpatient Surgery Center
1-888-882-4635 (Toll-Free)
434-982-3107 (Call Nurse)
434-982-6100 (Main Number)
500 Monroe Lane
Charlottesville VA 22903

I. INTRODUCTION

The University of Virginia Outpatient Surgery Center is Joint Commission accredited and Medicare approved and is committed to providing the highest level of care. We are a part of the University of Virginia Health System, located in a separate building behind the main hospital. A map is provided on the final page of this handbook. Parking is supplied for one vehicle; please obtain a parking permit from our front desk when you enter our building. The facility opens at 6:00 a.m. and surgeries start at 7:30 a.m. Monday, Tuesday, Thursday and Friday. On Wednesdays, surgery begins at 9:30 a.m. We are closed on weekends and major holidays. We work hard to maintain our schedule and appreciate your patience if there is a delay. This center specializes in ambulatory surgery, and nearly all patients leave after their surgery, but when necessary, patients can be transferred to the main hospital for an overnight stay.

II. GETTING READY FOR SURGERY

- **This booklet contains instructions that are important for patient safety and must be followed. Failure to follow instructions in this handbook may result in cancellation of surgery.**
- Two days before surgery, an outpatient surgery center nurse will call to tell you what time you need to arrive at our Outpatient Surgery Center. Please make note of your assigned arrival time and plan to arrive on time. Our nurse will also discuss health history, medications, and will review instructions on eating and drinking prior to surgery. If we have not reached you by 4:30 p.m. on the day before surgery, please call us at the phone number above.
- Patients who become ill shortly before surgery must tell their surgeon as soon as possible. Patients who are sick on the day before surgery or day of surgery and cannot reach the surgeon must call us at 434-982-3107 or 982-6100.
- All patients must have a responsible adult who will transport them home.

III. INSTRUCTIONS FOR EATING AND DRINKING PRIOR TO SURGERY

NOTE: ALL TIMES BELOW ARE BASED ON YOUR SCHEDULED ARRIVAL TIME, NOT SURGERY TIME.

- **ALL PATIENTS, Adults and Children of all ages:**
 - MUST NOT HAVE ANY SOLID FOOD AND MUST NOT CHEW GUM OR TOBACCO AFTER MIDNIGHT PRIOR TO SURGERY.
 - May have water, Gatorade, Pedialyte, apple juice OR BLACK COFFEE (SUGAR IS OK, BUT NO CREAMER OF ANY KIND allowed) until 2 hours before their scheduled arrival time at the Outpatient Surgery Center. THESE ARE THE ONLY LIQUIDS ALLOWED.

- **ALSO, CHILDREN 12 MONTHS OLD AND YOUNGER:**
 - May have breast milk until 4 hours before their scheduled arrival time at the Outpatient Surgery Center.
 - May have formula until 6 hours before their scheduled arrival time at the Outpatient Surgery Center.

IV. INSTRUCTIONS FOR TAKING MEDICATIONS PRIOR TO SURGERY

Most medications should be taken at their usual scheduled time, even on the day of surgery. Medications should be taken with a small sip of water, even if the time to take the medication falls within the restriction periods listed above. Specific instructions for the most commonly taken medications, including many that should not be taken or those that should have dosage changes, are listed below.

Please call us if you don't know whether to continue a medication that is not listed here. **Please read the following carefully!**

- Continue **medications for lung and heart conditions** including for asthma, chest pain, and heart rhythm problems.
- Continue to take all **blood pressure medications EXCEPT** for enalapril (vasotec), captopril (capoten), benazepril (lotensin) and lisinopril (prinivil, zestril), which should not be continued on the day of surgery unless you are directed to do so by our phone call nurse.
- Continue **medications for seizures (epilepsy), Parkinson's disease, and Myasthenia Gravis.**
- Continue **medications for acid reflux.**
- Continue **medications for high cholesterol.**
- Continue **medications for anxiety, depression and all psychiatric conditions.**
- Continue **narcotic medications for chronic pain control** such as methadone, fentanyl, and morphine.
- Patients who take **medications that interfere with blood clotting** such as aspirin (and other drugs in the aspirin "NSAID" family including ibuprofen

(Advil, Motrin, Nuprin), naproxen (Naprosyn), diclofenac (Voltaren, Cataflam), indomethacin (Indocin), or combination drugs that include these medications) or other “blood thinners” such as clopidogrel (Plavix), ticlopidine (Ticlid), enoxaparin (Lovenox), or warfarin (Coumadin) must discuss with the surgeon whether to discontinue these medications, and if so when to stop them. **Anti-clotting drugs taken to keep open a cardiac stent may need to be continued through the time of surgery so that the decision to stop or continue these should be made in consultation with the treating surgeon and cardiologist.**

- **Medications for Diabetes: Continue the usual doses of all diabetic medication on the day before surgery. Directions for the day of surgery for each diabetic medication (listed by generic and trade name) are as follows:**
 - **Insulin pump:** Continue using the insulin pump, but use **only the basal rate once no longer eating**. Return pump settings to normal after food intake has been resumed.
 - **Regular insulin (Novolin R®, Humulin R®), lispro (Humalog®), glulisine (Apidra®), aspart (Novolog®):** Do not take these medications on the day of surgery until normal food intake has been resumed.
 - **NPH (Novollin N®, Humulin N-NF®), zinc insulin (Lente®), extended zinc insulin (Ultralente®):** Take 1/2 of the usual morning dose on the day of surgery, and resume normal dosing once normal food intake has been resumed.
 - **Glargine (Lantus®), detemir (Levemir®):** Take the usual dose.
 - **Novolin 70/30®, Humulin 70/30®, Humulin 50/50®, Novolog 70/30®, Humalog 75/25®, Humalog 50/50®:** Do not take these medications on the day of surgery until normal food intake has been resumed.
 - **Metformin (Glucophage®), metformin extended release:** Take the usual dose.
 - **Rosiglitazone (Avandia®), pioglitazone (Actos®):** Take the usual dose.
 - **Repaglinide (Prandin®), nateglinide (Starlix®):** Do not take these medications on the day of surgery until normal food intake has been resumed.
 - **Glyburide (Diabeta®, Micronase®), glipizide (Glucator®), glimepiride (Amaryl®), gliclazide (Diamicon®), chlorpropamide (Diabenese®), tolbutamide (Orinase®):** Do not take these medications on the day of surgery until normal food intake has been resumed.
 - **Sitagliptin (Januvia®), sitagliptin plus metformin (Janumet®), saxagliptin (Onglyza®), liraglutide (Victoza®), exenatide (Byetta®), pramlintide (Symlin®):** Do not take these medications on the day of surgery until normal food intake has been resumed.
 - **Acarbose (Precose®), Miglitol (Glyset®):** Do not take these medications on the day of surgery until normal food intake has been resumed.

Monitor blood sugar before and after surgery, with a goal of keeping it between 80 to 150 mg/dl. **On the morning of surgery, if the blood sugar is low or if symptoms from low blood sugar occur, drink a clear liquid that contains sugar or ingest a sugar tablet. Continue to follow the directions on page 2 above for eating and drinking prior to surgery.**

V. THINGS TO BRING OR TO LEAVE AT HOME ON THE DAY OF SURGERY

- Bring all **medications** or a list of all medications including doses and times.
- Bring doctors' reports for recent studies (past 5 years) not performed at UVA Health System, **such as cardiac stress tests, catheterizations, blood test results, X-rays, etc.**
- Patients that have Sleep Apnea and use CPAP, should bring their CPAP machine with them into the surgery center.
- If the surgery will be performed on a minor child or other individual who has a legal guardian(s), a **legal guardian** must accompany the patient unless a surgical consent form signed by a legal guardian is already on file with the surgeon.
- Bringing a favorite stuffed animal, blanket, or other special item may comfort pediatric patients.
- Bring medical insurance cards.
- Wear **loose, comfortable clothing**, and consider bringing an extra set of clothing.
- Bring a case for glasses, contact lenses or hearing aid(s).
- **Do not wear jewelry**, including wedding rings, or body piercings.
- **Leave all valuables at home** or have them held by a friend or family member.

V. THINGS TO KNOW ABOUT OUR PRE-OPERATIVE PROCESS

- On arrival, register with our receptionist at the front desk and find a seat in our waiting area.
- As surgery time approaches, a nurse will call you back to our pre-operative suite where they will check vital signs, place an IV, review health history and answer questions. Small children often have the IV placed after they are asleep.
- If the surgical procedure takes place on just one side of the body, or involves fingers or toes, then the actual surgical site will be marked by a member of the surgical team.
- Before surgery, members of the anesthesia, surgical and operating room nursing teams will come to the preoperative area to ask and answer questions. Be prepared to provide detailed information about health

history, medications (including any herbal remedies) and diagnostic studies.

- If you have any questions or concerns about your surgery during your visit to the surgery center, please ask us!

•

VI. THINGS TO KNOW ABOUT OUR RECOVERY ROOM (POST ANESTHESIA CARE UNIT OR PACU)

- Once surgery is completed, we move patients to our recovery room where they stay until they are determined by our staff to be ready for release.
- When patients awake, we move them to the second side of our recovery room, and a nurse will bring in your family/friends to participate in reviewing post-operative instructions with our nurses and/or doctors.
- Parents of children having surgery are brought in to recovery to be with their child as soon as the child is alert.
- We depend on patients telling us if they are in pain, experience nausea, or feel cold. We use a 10-point pain rating scale to help determine pain intensity. Please familiarize yourself with that scale shown below.
- After surgery, deep breathing and coughing helps with the recovery process.
- Before leaving the recovery room, be sure you understand all instructions about medicines, diet, rest, and follow up visits.
- Once discharged, patients should go home and rest for the remainder of the day. Due to residual impairment from anesthesia and surgery, it is important not to drive, operate machinery, drink alcohol, or make important decisions for at least 24 hours after discharge.
- A responsible adult should stay with the patient the night after surgery.
- Feel free to call us with questions that arise after you have left the Outpatient Surgery Center.
- If you are dissatisfied with your care, you can call our Patient Representative Department at 434-924-8315.
- Also, you have the right to contact either agency listed below:

Office of Licensure and Certification
Virginia Department of Health
Phone: 800-955-1819 or 804-367-2106
Fax: 804-527-4503

The Joint Commission
Office of Quality Monitoring
Phone: 800-994-6610
Fax: 630-792-5636

VII. ADVANCE DIRECTIVES

Advance Directives are legal documents that allow anyone, 18 years or older, to make their health care choices known, including appointment of a person who would make decisions for you if you became unable to do so yourself. You may obtain, upon request, an Advance Directive booklet at any UVA clinic or at the Outpatient Surgery Center front desk. The booklet is titled, "Your Right to Decide," and contains an Advance Directive form with instructions for completing the form.

IMPORTANT TELEPHONE NUMBERS:

UVa Outpatient Surgery Center
434-982-3107 (Call Nurse)
434-982-6100 (Main Number)
or Toll free 1-888-882-4635

UVa Toll free number for all UVa Services
800-924-3627

UVa Page Operator to contact your
doctor
434-924-0000

UVA PAIN RATING SCALE



