THE DAY BEFORE SURGERY

DO:
- Follow any dietary instructions you have been given by your surgeon. If you have not been given any instructions, you may eat normally the day before surgery. Please eat small light meals (that won't give you heartburn) and drink plenty of water. Drinking plenty of water will usually make your intravenous (IV) access easier.
- Follow any bowel preparation instructions you have been given by the surgeon.
- Take any new medications or antibiotics given to you by your surgeon or research team.

-DO NOT eat or drink anything after midnight.
-DO NOT drink alcohol.

THE DAY OF SURGERY

DO:
- If you have sleep apnea, bring your CPAP or BiPAP mask and machine for overnight stays.
- Wear glasses and/or remove contact lenses.
- Feel free to bathe, and wear deodorant or antiperspirant, unless directed not to by the surgeon.
- Remove all jewelry, including body piercings. Failure to remove jewelry can result in severe injury, including burns.
- Bring one person (if you would like) to accompany you in the preoperative holding area; this person must be over 12 years of age.
- Take your medications as you were instructed by your surgeon or by the Nurse Practitioner in VPEC. You may have a couple sips of water to swallow each pill.

-DO NOT eat or drink anything, including candy, gum, mints, ice chips, sips of water, soda, coffee, or chewing tobacco or snuff
-DO NOT wear lotions, creams, hairspray, nail polish or make-up
-DO NOT wear jewelry or bring money or valuables

(over)
MEDICATION INSTRUCTIONS:

Sometimes surgeons request that patients follow only their instructions about how to manage medications prior to surgery. In this case, please contact the surgeon about how to manage the dosing of medications prior to the day of surgery.

If you take insulin, or if you have an insulin pump, contact the provider that prescribes your insulin for instructions on how to manage insulin dosing the day before and the day of surgery. The morning of surgery, if your blood sugar becomes low, follow your normal emergency protocol, such as taking glucose tablets or gel, or drink a small amount of clear apple juice. Please notify the anesthesia staff if you have done this. This may result in surgery delay due to risk of aspiration.

If you take medications that affect your blood’s ability to clot (blood thinners, etc.) please contact the provider that prescribes the drug, or follow the surgeon’s instructions on how to handle these medications prior to and the day of surgery. Please note these medications include, but are not limited to: Aspirin, NSAIDS (non-steroidal anti-inflammatory drugs); Heparin (Calciparine), Lovenox (Enoxaparin), Coumadin (Warfarin), Plavix (Clopidogrel Bisulfate), Aggrenox, and Pletal (Cilostazol).

Please stop all non-prescribed over the counter vitamins and supplements as soon as possible.

The morning of surgery TAKE your usual morning medications except for the following:

OUTPATIENT SURGERY, ADDITIONAL INFORMATION

- For most procedures, plan to stay from one to several hours after surgery to allow for adequate recovery time.
- You will be given discharge and self-care instructions before you leave the surgery center.
- You must have a responsible adult to drive you home and spend the night with you.
- For Ambulatory Surgery Center patients, please arrange for a responsible caregiver to be present during the time of your surgery and to drive you home. Your surgery may not be performed if there is not a responsible caregiver available in the waiting area. If you have any questions about this, please contact your surgeon.
- Admission to the hospital may be required if the physician needs to monitor you overnight. If you are admitted to the hospital following surgery, the visitor coordinator in the waiting area will inform your family of your room assignment.
- Patients with obstructive sleep apnea (OSA) are more likely to stop breathing during their sleep when taking pain medications. If you are supposed to use a CPAP or BiPAP at home, you should use it consistently after your surgery while taking pain medication.

ISSUES TO DISCUSS WITH THE SURGEON OR SURGEON’S STAFF

The surgeon or surgeon’s staff will answer questions about your diagnosis, treatment, and surgical procedure. They are uniquely qualified to discuss risks, benefits, and outcomes related to the procedures they perform. Additionally, they will provide you the following information:

- Where or when you should arrive for your procedure
- What time your procedure will be performed
- How long the procedure will take
- Whether or not you will spend the night or go home the same day of surgery
- If you get sick, begin vomiting, or run a fever prior to surgery, please see your primary care provider as soon as possible; also notify the surgeon of your medical status, new medications, etc.