

Pre-Surgical Instructions/FAQs

When should I stop eating and drinking?

- Stop solid food after midnight or at least **8 hours** before surgery. (includes candy, gum, milk)
- You may have clear liquids up to **4 hours** before surgery.
 - *Clear Liquids Include the Following:*
 - ✓ Water
 - ✓ Sprite / 7-Up / Pedialyte
 - ✓ Apple or Cranberry Juice
 - ✓ Coffee/Tea without cream or sugar
 - ✓ **NO** Jell-O or Pudding is allowed.
- Why is this important?
 - Prevention of serious anesthesia complication such as *Aspiration Pneumonia* (inhaling stomach contents into the lungs).
 - *If you violate the above, the anesthesiologist will cancel your surgery.*

Should I take my usual medications the day of surgery?

- Day of surgery, you may continue to take oral medication pills as usual with a small sip of water **except for the medications listed below:**
 - Do not take medicines that instruct you to: "Take with food or milk".
 - "Bulk medications" such as psyllium (Metamucil, Citrucel, etc).
 - Diuretics ("water pills"): Should not be taken the morning of surgery except when using for hypertension (high blood pressure).
 - Inhalers for asthma or emphysema: Use as scheduled and bring these to the hospital for use during your hospitalization.
 - **Anticoagulants**
 - ✓ *Aspirin*: Stop 14 days before surgery (includes cardiac protection dose of 80-325mg/day).
 - ✓ *NSAIDs*: (**N**on-**S**teroidal-**A**nti-**I**nflammatory-**D**rugs) Stop 10 days before surgery. (Motrin/Advil//Alleve/Relafen/Vioxx/Celebrex/Bextra//ibuprofen/naproxen/diclofenac **plus** many more!)
 - ✓ *Vitamin E* and herbal remedies such as *Garlic*, *Ginseng*, *Ginko*: Stop 10 days before.
 - These agents promote bleeding.
 - ✓ *Warfarin* (Coumadin): Prescribed "blood-thinning" agents.
 - Stop 5 days prior to surgery
 - Have prescribing physician lower dose and monitor until INR is lower than 1.3.
 - This must occur before surgery.
 - Surgery will be canceled if blood is still too thin (INR>1.3)

- Oral hypoglycemic agents (oral diabetic medicines such as Glucophage, sulphonylureas, etc).
 - Do not want to decrease blood sugar too much, since you have stopped eating.
- Insulin: your dose the day of surgery may be determined by your anesthesiologist, primary physician or surgeon. If you have not received specific instructions regarding your insulin by the morning of your surgery, then take one half your usual dose and monitor your blood sugars closely.
- Controlled substances: Narcotic pain medications and/or sedatives may not be brought into the hospital. This is a violation of Federal and State laws.
- Transdermal systems: Skin patches may be worn into the hospital. Includes narcotic fentanyl (Duragesic) patches as well as hormonal, cardiac and nicotine systems.
 - ✓ Please notify surgical team and floor nursing staff so this medication can be ordered.

What are some standard medications that people usually take up to the time of surgery?

- Pain medications, which contain no aspirin.
- Acetaminophen (Tylenol).
- Muscle relaxers.
- Hormone therapy, anti-depressant/anxiety/seizure/Parkinson medicines
- Cardiac/blood pressure/cholesterol medications (discontinue cardiac protective aspirin).
- Nutrient Supplements: iron, calcium, multivitamin, vitamin A, B, C, D; but excludes vit. E.
- Herbal remedies: Only those approved by the anesthesiologist.

What else can I do to make the pre-surgical process easier?

- If you become ill within 7 days from surgery (fever, flu, cough, "colds") contact your physician.
- Have an updated list of current *allergies* and *medications* with proper dose/frequency available for the surgical and hospital teams.
- Update your medical history.
 - Your medical history and surgical experiences will be discussed with the anesthesiologist when you arrive at the hospital prior to your surgery.
 - Important medical history such as high blood pressure, asthma, diabetes, or any other serious conditions effecting brain, heart, lung, liver, kidney, gastrointestinal, skin and other organ/systems must be discussed with the surgical team.
- Smokers: No smoking in hospital. May want to consider nicotine replacement therapies prior to surgery
- Address any further medical questions to the surgical clinic, anesthesiologist, or primary care physician.
 - Contact the following for further pre-surgical information:
 - Colorado Comprehensive Spine Institute at: www.coloradospineinstitute.com
 - South Denver Anesthesiologists, PC at: 303-761-5646 or www.sdapc.com
 - Health One Swedish Medical Center at: 303-788-6009 or www.swedish.org
 - Centura Porter Adventist Hospital at: 303-778-5678 or www.porterhosp.org

❖ **Remember – if you disregard the above, your surgery may need to be canceled** ❖

Preparing for the hospital admission

- | | |
|--|--|
| <ul style="list-style-type: none"> * Bring all forms from your surgeon's office. * Bring Insurance Card & Photo ID the day of surgery * Bring storage case for glasses, contacts, hearing aids, dentures, etc * Visits by family and friends are limited to the Pre-op Holding area * Leave luggage/personal items in car. Family to retrieve after surgery | <ul style="list-style-type: none"> * No mascara or body lotion: make up at a minimum * Leave all valuables at home (money, credit cards, jewelry) * Wear loose, comfortable clothing; easy wear after surgery * Visitors are not allowed in the recovery room area |
|--|--|