

My Surgery

An Information Guide and Personal-Care Tool

Use this as a guide and personal tool during your surgical journey at University Health Network.



Patient Education



UHN Toronto General
Toronto Western
Princess Margaret
Toronto Rehab
Michener Institute



Important dates and times to remember

Your surgeon's office will call you with your Pre-Admission Clinic appointment and surgery dates and times.

My Pre-Admission Clinic visit:

Date: _____

Time: _____

Phone number: _____

Location of clinic: _____

My surgery day:

Date: _____

Time: _____

Time I need to be at hospital: _____

Where I go the day of my surgery:

Phone Number: _____

Where I will go after my surgery:

Nursing unit: _____ Phone number: _____

How long I will probably stay overnight in hospital: _____

About this Guide and Personal Tool

This guide was created by a team of health care professionals who provide care as you and your family or caregivers prepare for your surgery. Most of the important information you will need has been included in this guide.



Information about University Health Network (UHN) surgical services, hospital news, directions and other important information may be downloaded from www.uhn.ca/PatientsFamilies/Visit_UHN/Surgery_Patients

About my surgery

Name: _____

Hospital: _____

My surgeon: _____

My doctor(s): _____

Phone: _____

Surgery date(s): _____

Time(s): _____

Medical Record Number (MRN): _____

Need help?

Automated Surgery Helpline **Toronto Western Hospital:**

Phone: 416 603 5211

For **Toronto General Hospital** or **Princess Margaret** patients:

Phone your surgeon's office

INTRODUCTION

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Welcome to University Health Network

UHN is a University of Toronto teaching hospital affiliated with University of Toronto, including 4 sites: The Princess Margaret Cancer Centre (PM), Toronto General Hospital (TGH), Toronto Western Hospital (TWH), and Toronto Rehabilitation Institute (TR).

You will have your surgery at either TGH, TWH or PM. Your Pre-Admission Clinic visit may be at a different location than your surgery.

How to use this guide

This guide is for you and your caregivers to use before, during and after your surgery. You and your surgeon can add to this information at any time. **Please bring this guide with you to the hospital for your Pre-Admission Clinic visit and on the day of your surgery.**

You can use it to:

- learn more about what to expect
- keep track of your questions
- communicate with your health care team
- find resources to meet your needs

The health care team at UHN will work very hard to get you back home as soon as possible. You, your family or support person are an important part of the team. Please talk to any member of your health care team if you have questions.

We welcome your feedback. Please fill out the evaluation form at the end of the guide. Your comments and suggestions can help us improve this surgery guide.



Throughout this guide you will find this symbol.

The information beside this symbol is important and something you need to remember.



You will also see this symbol.

It means you can find videos on the UHN Patient Education and Engagement YouTube channel:

1. Go to www.youtube.com
2. In the search bar, type in “UHN my surgery guide playlist”
3. Choose the top result in the list – “My Surgery Guide: Videos for UHN Surgery Patients”

You may be able to watch these videos on your mobile device, smartphone or tablet. Please know that some smartphones and devices may have limitations.

Dear Patient:

You are scheduled to have surgery at one of the University Health Network hospital sites. Thank you for allowing us to provide your care. Our primary value is the needs of patients come first – and we consider it our privilege to serve you throughout your health journey.

We recognize that facing surgery can be stressful and that you may wish to organize a number of things in advance. We want to assure you that your care team at University Health Network will do everything they can to make sure that your surgery is performed at the scheduled time.

While we do our very best to maintain the surgical schedule, sometimes things occur that are beyond our control, often at the last moment. For example, your surgery might be delayed or cancelled because another patient might require emergency surgery. We sincerely and deeply apologize in advance should such a regrettable cancellation be necessary. Unfortunately, this situation is impossible to predict and if it does occur, we hope you will understand. In the unlikely event that your procedure must be postponed, we will contact you as soon as possible to reschedule it at the earliest date that is convenient for you and your family.

Thank you for your understanding.

Dr. Kevin Smith
President & CEO

Dr. Shaf Keshavjee
Surgeon-in-Chief

Terri Stuart-McEwan
Executive Director,
Surgical Services

Providing you with the right care, at the right time

Dear Patient:

At University Health Network, we are committed to providing you with the highest quality and safest health care to meet your needs. If you have to be admitted to the hospital, it is our job to make sure that you get a bed in the area of the hospital that best meets your care needs.

To make sure that we can provide you with an inpatient bed as soon as possible, we may ask to place you in a mixed gender room.

The use of mixed gender rooms helps us reduce the amount of time you have to spend waiting for a bed and helps us to reduce the number of times that we might need to move you from one area to another while you are receiving care at University Health Network. If you cannot receive care in a mixed gender room, please let us know. We will keep looking for a bed that best meets your needs but this may mean that you will have to wait longer before we can move you to a more appropriate unit within the hospital.

At University Health Network, we take seriously the values of dignity, compassion and respect. We aim to ensure that your privacy will be protected by every member of our health care team.

Thank you,
University Health Network, Toronto

Part 1

My Surgery

Information that is right for you helps you make decisions about your health.

This part of the guide has specific information about your surgery including:

- Preparing for my surgery
- Important things to remember

Your surgeon may give you more information. Please add it to this part of your guide.

Preparing for my surgery

What can I do to get ready for my surgery?

Here are ways to take care of both your body and your mind so you are ready for your surgery:

- Stay as active as you are able to.
- A balanced diet is important. Try to eat healthy foods before your surgery.
- Call your family doctor or surgeon if you have medical concerns.
- Your health care team wants to make sure you have the right medications and treatment before and after your surgery.
 - Let your surgeon know if you drink alcohol or use any recreational tobacco (smoking or vaping). The reason we ask if you smoke or drink is because it could affect your recovery. We want to support you to have a safe and successful recovery.
 - If you feel safe disclosing this information to the team, we can provide information on how to safely manage these substances while recovering from surgery. If you're interested in smoking cessation programs, the team can suggest some.
- Tell your medical team if you are taking blood thinners, herbal medicines or other substances.
 - Examples of blood thinners are Coumadin® (Warfarin), Aspirin® or Plavix® and Vitamin E.
 - Some over-the-counter medications may cause side effects. Let your medical team know about anything you are taking.
- Keep taking all your usual medications unless your health care team tells you otherwise.
- Shower or bathe the night before and the morning of surgery to help clean your skin and lower your risk of infection after surgery.



Planning after your surgery — Start early!

It is important to plan ahead for when you leave the hospital (also known as being “discharged”), even before your surgery day. Planning early for your discharge can help you feel less worried and anxious.

You may be told the same day that you will be discharged. Whenever possible, we will let you know you are going to be discharged before the actual date, but sometimes we might not know until the same day. If you have any questions, talk to a member of your health care team.

Here's what you can do before coming to the hospital for your surgery:

Arrange for someone to help you leave the hospital or help you transition to your next location or place of residence. The health care team will contact that person when you are ready to be picked up.

1. Arrange for someone to help you at your residence after your surgery. Depending on your surgery, you may need help for a few days or a few weeks. You will need help with things like laundry, cleaning, cooking and grocery shopping.
2. Ask someone to help you look after the people or pets in your care. Try to plan this before coming to the hospital for surgery.
3. Make your meals ahead of time.
4. Ask your surgeon or other health care provider:
 - When can I return to my usual activities, such as cooking, driving, cleaning, exercising or doing yard work?

How can I help the health care team plan for my discharge?

Talk to your health care team (surgeon, nurse or social worker) about your needs and worries. We will try to help with any concerns you have about leaving the hospital.

How can my caregivers be involved in my care?

UHN is limiting who can enter the hospital or visit on hospital property to lower the risk of spreading COVID-19 to patients and the staff who care for them.

We know that family, friends and others who support you are important for your recovery. Although we are not able to let them join you at the hospital at this time, we will do our best to include them in your care.

Only approved **Essential Care Partners** can enter the hospital or visit on hospital property at this time. An Essential Care Partner is a support person who is very important to the safety and well-being of a patient while they are in the hospital. An Essential Care Partner might be a family member, friend, neighbour, paid private caregiver or someone else.

Your Essential Care Partner can, with your permission:

- Share information with your health care team that will help us meet your needs. At UHN, many nursing teams give reports to each other at the patient's bedside. See page 41 for information about how you and your caregivers can take part.
- Help you and your health care team make decisions about your care.
- Help with your care at the hospital and after surgery.
- Bring you food from home, but please check with your nurse or dietitian first. You may have special needs after surgery.
- Help prevent the spread of germs by washing hands before entering and leaving the hospital, and when entering and leaving a patient room. Hand sanitizer can be found in all areas of the hospital.



For more information about our visitor policy during the COVID-19 pandemic please speak with a member of your health care team or see the [UHN COVID-19 page](https://www.uhn.ca/covid19#) (<https://www.uhn.ca/covid19#>).

Please note: Patient and visitor lounges on inpatient units are closed during COVID-19.

Essential Care Partners must check themselves for signs of illness before coming to visit. If they are sick, they should stay at home and visit you when they feel better. See page 9 for more information.



Where can my Essential Care Partner and I stay near the hospital?

To get a list of nearby places to stay, check the UHN website:

- Go to www.uhn.ca
- Click "Patients & Families"
- Click "Visiting patients" under "Quick Links"
- Click "Places to Stay" and then "Accommodations and Places to Stay"

Some hotels may offer a reduced rate for patients of the hospital and their families. Ask the Pre-Admission Clinic for a letter to give to the hotel to qualify for possible discounted rates.

UHN cares about patient safety

Protecting yourself and your Essential Care Partner from spreading infections when at our hospital

It is important that you and your Essential Care Partner feel well before coming to the hospital. If you or your Essential Care Partner experience any of the symptoms below, you may make other patients or health care workers in the hospital sick.

Self-screening

Before coming to the hospital, check for any of these symptoms in the past 24 hours:



- A new cough or a cough that is getting worse
- A fever (above 38 °C or 100 °F), or chills, or both
- Diarrhea
- Shortness of breath (worse than usual)
- Severe headache (worse than usual)
- Muscle aches
- Extreme fatigue or feeling very tired
- Vomiting (throwing up)
- Sore throat
- New rash

If you have any of these symptoms and you are having surgery soon, call your surgeon's office right away. Your surgeon will give you more instructions.

If your visitors have any of these symptoms, ask them not come to the hospital to visit you. Your visitors can come to see you when they feel better.

When you arrive at the hospital, you will be screened again for symptoms

All patients and Essential Care Partners must wear an approved medical mask at all times while in the hospital.

- Entrance screening staff will give you a mask and explain how to put it on properly. They will only give 1 mask per day.
- If you are wearing a mask from home, staff will give you a medical mask to wear instead. Always put your reusable mask in a bag after removing it.
- Make sure the mask covers **both your nose and mouth** at all times.
- You may remove your mask to eat or drink. Clean your hands first and remove it carefully. Do not touch your face. Always use clean hands when putting on or taking off your mask.
- Continue to maintain physical distancing (2 metres) inside the hospital.
- If you are a patient who has a legitimate medical condition that prevents you from wearing a mask, contact your UHN doctor or nurse practitioner's office before your appointment. If your exemption is approved, you will receive a Face Mask Exemption Form. You must show this form to the entrance screeners when you come to the hospital. You will be given a face shield to wear instead.



Important things to remember

My surgery

- Call your surgeon right away if you feel sick before coming for your surgery.
- Know that your Essential Care Partner can be with you and help in your care while you are at UHN.
- Ask for a list of hotels where your Essential Care Partner can stay while you are in hospital. Or, go to www.uhn.ca.
- Check with the nursing unit staff about the visiting policy on the unit or see the [UHN COVID-19 page](https://www.uhn.ca/covid19#) (<https://www.uhn.ca/covid19#>).
- Plan early for when you leave the hospital.
- Someone **must** take you to your place of residence after your surgery.
- Arrange for someone to help you once you leave the hospital.

Part 2

About the Hospital

There are things you need to know about our hospital before you arrive for your surgery.

This part will help you learn more about:

- Your health care team
- Your privacy while in the hospital
- Services we offer

UHN is a scent-free hospital.

Please do not wear perfumes, colognes or other scented products. Other patients and staff may have serious allergies.

For more information about UHN, visit www.uhn.ca

Your health care team at UHN

UHN is a teaching and research hospital affiliated with the University of Toronto.

What is a teaching hospital?

A teaching hospital trains new doctors, nurses and other health care professionals. We have health care students from across Canada and from around the world who work with your health care team and qualified supervisors.

UHN uses a team approach to your care

You will be cared for by a team of medical professionals who may include:

- doctors – staff surgeons, anesthesiologists, surgical fellows, medical residents, clinical associates and medical students
- nurses – registered nurses, registered practical nurses, nurse practitioners, advance practice nurses, clinical nurse specialists, nursing coordinators and nursing students
- anesthetists
- dietitians
- Indigenous cancer navigator
- occupational therapists
- patient care assistants
- pharmacists
- physiotherapists
- respiratory therapists
- social workers
- speech language pathologists
- technologists
- many other professionals



Please speak to any member of your team, at any time, if you have any questions or concerns.

Keeping your personal information private

At UHN your health information is kept private. It's shared only with:

- professionals involved in your care
- your next of kin or someone close to you who you agree may have your information
- other hospitals through shared systems, if you agree (give consent)
- public authorities or government agencies

To learn more, visit the Privacy page on our UHN website at:

www.uhn.ca/PatientsFamilies/Patient_Safety_Advocacy/Privacy.

Or, phone the Privacy Office at 416 340 4800 ext. 6937.

What services are available while I am in the hospital?

- Gift shops at some sites
- Pharmacy
- Bank machines
- Food court and coffee shops
- Wireless (Wi-Fi) Internet



Please bring your cell phone, tablet or laptop to communicate with family and friends and view content while you are in the hospital. UHN has free patient Wi-Fi.

Wireless devices, such as cellular phones, may be used in most waiting rooms, common areas and lobbies. But, in some special areas of the hospital you can't use your device.

Do not use your wireless device to take pictures or audio or video recordings of any UHN patients or staff.

Indigenous spiritual practice of smudging

UHN acknowledges the importance of the traditional use of tobacco, sage, cedar or sweet grass as part of Indigenous culture and spirituality. If you would like to smudge while in the hospital, please let a member of your health care team know this. A member of your team will be able to accommodate your request.

Semi-private or private room

Semi-private and private rooms may be available at an extra cost per night unless you have insurance coverage.

If you have semi-private insurance coverage, you may upgrade to a private room by paying the difference in cost. Call your insurance company before you come to the hospital. Some policies may have a daily maximum coverage for semi-private and private rooms. **Please note:** Room upgrades are not always available. Talk to your team about your needs.

UHN Patient Learning & Experience Centres

Patient and Family Learning Centres

Our Patient and Family Learning Centres are temporarily closed until further notice. For health information research requests or other Library services, please call 416 603 6277 or Email: tgpen@uhn.ca.

Check out a list of COVID-19 Information Resources for Patients and Families (<https://guides.hsict.library.utoronto.ca/covid19patientlibrary>).

UHN Patient & Family Libraries offer reliable and up-to-date health information to patients, their families, community members, and staff. They have resources in different languages and can connect you with hospital and community services, such as Indigenous cancer care resources.

Learn more about UHN Patient & Family Libraries at www.uhnpatienteducation.ca

Part 3

Before and During My Surgery

Whether you need to go to the Pre-Admission Clinic before your surgery or not, this part helps you understand how we prepare you for surgery. It includes:

- My Pre-Admission Clinic visit
- Helpful checklists for before my surgery
- Day of my surgery
- Important things to remember

Keep any new information that your health care team gives to you.



The UHN Patient Education & Engagement Program YouTube Channel has helpful videos for you to watch before and during your recovery:

1. Go to www.youtube.com
2. In the search bar, type in “UHN my surgery guide playlist”
3. Choose the top result in the list – “My Surgery Guide: Videos for UHN Surgery Patients”

Suggested videos that can help you recover from your surgery:

- Deep breathing and coughing
- Incentive spirometry
- Pain management, parts 1 and 2
- Leg exercises
- Planning your return home, parts 1 and 2

You can also watch these videos at any of our Patient and Family Learning Centres. See page 18 for more information.

My Pre-Admission Clinic visit

- Your visit to the Pre-Admission Clinic is a very important part of preparing you for surgery.
- Come with a friend or family member. They can help you remember information or ask questions during your Pre-Admission Clinic visit.

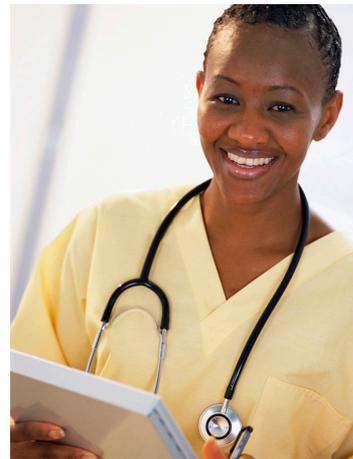


You must come to your Pre-Admission visit. If you do not have your Pre-Admission visit, we cannot do your surgery.

Please call the Pre-Admission Clinic office if you have any questions or you have to cancel your appointment: **TGH: 416 340 3529 TWH: 416 603 5379**

What can I expect during my Pre-Admission Clinic visit?

1. Your Pre-Admission Clinic visit will be completed over the phone with the Toronto General Hospital or Toronto Western Hospital. Your visit may last up to 3 hours or longer if you have several medical conditions, or need other tests.
2. As a first step, a registered nurse will do a complete check of your health over the phone. Depending on your health history, other health care professionals may also see you or call you.



3. After your initial assessment, you may have to come to the hospital for tests such as:

- Blood work
- ECG (Electrocardiogram or a recording of your heartbeat)
- Chest x-ray
- Swab for COVID-19 Screening

These tests may also be done in the community at a local blood lab if your doctors request this.

We will screen you for:

COVID-19

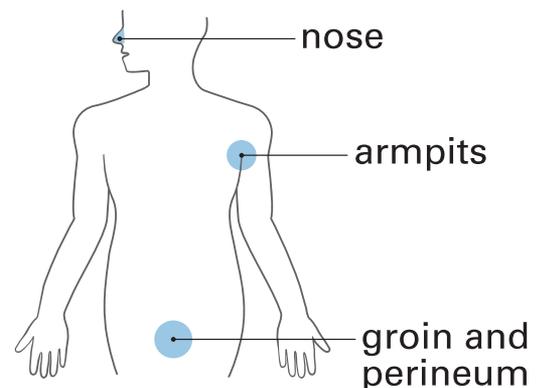
COVID-19 is a new coronavirus that can cause severe respiratory illness. You need to self-isolate at home until your surgery day. We will screen you for any symptoms or risk factors and test you for COVID-19 before your surgery, even if you don't have any symptoms. If you test positive for COVID-19, your surgery may be postponed until you have recovered or can safely be around others without spreading the virus.

MRSA

MRSA stands for Methicillin-resistant Staphylococcus Aureus. It is a bacterium (germ) normally found on the skin and in the nose of healthy people. The bacteria have become resistant to some antibiotics used to treat infections.

To find out if you have MRSA, we will take swabs (wipe with a cotton-tipped applicator) from the following areas:

- Nose
- Axilla (armpits)
- Groin
- Perineum (genital area)
- Open wound, if needed



We will let you know if you have a positive MRSA result. This may not happen until you return for your surgery, but this will not affect the date of your surgery. Once you are admitted to hospital, we will take steps to treat and manage your MRSA.

Please ask your doctor or nurse for more information about MRSA.

You can also visit the UHN Patient Education and Engagement website at www.uhnpatienteducation.ca.

CPO

CPO stands for Carbapenaemase-producing organisms. CPO are bacteria that live in the gut and are resistant to the antibiotics we use to treat infections. Because the bacteria have become resistant to antibiotics, CPO can cause infections that are very difficult to treat. This is why we must take extra care to prevent the spread of CPO within the hospital.

We may need to take a rectal swab from you in the Pre-Admission Clinic if:

- you have travelled and received any health care outside of Canada in the past 5 years (CPO is found to be more common in particular areas)
- you were hospitalized in the Greater Toronto Area in the past 12 months
- you travelled to the Indian subcontinent (India, Sri Lanka, Bangladesh, Pakistan) in the past 12 months
- you previously tested positive for CPO, or had contact with someone known to have CPO

Sleep Apnea

Sleep apnea can be a serious sleep problem. Sleep apnea means you stop breathing many times during your sleep. It happens because your throat muscles relax, you stop breathing, and then you wake up from your sleep to start breathing again. This waking and sleeping cycle happens many times when you are trying to sleep. People with sleep apnea may feel very tired and sleepy during the day because they cannot fully rest.

Please tell your doctor if you have sleep apnea or make sure you use your breathing machine (PAP machine), if you have one. It is very important for the doctors and nurses to know that you have sleep apnea so they can watch you closely and plan the best and safest care for you.

What else happens in the Pre-Admission Clinic?

We speak with you about:

- Preparing for your hospital stay and coming to the hospital (we may ask you to join a Pre-Admission class or watch a video).
- Reviewing your medications and tell you what medications to take or not to take before your surgery.
- What happens during your surgery.
- What kind of help you may need as you recover from surgery.
- How to manage your pain and other symptoms.
- Exercises and activities you must do after your surgery and after you leave the hospital.
- How to plan for your recovery after surgery.



Please watch our exercise videos:

1. Go to www.youtube.com
2. In the search bar, type in "UHN my surgery guide playlist"
3. Choose the top result in the list – "My Surgery Guide: Videos for UHN Surgery Patients"

Doing the exercises in the videos can help you prepare for your recovery.

Patient Blood Management Program

You may or may not need a blood transfusion during or after your surgery. Your surgical team will discuss this with you. The Patient Blood Management Program aims to reduce or avoid the need for a blood transfusion during or after your surgery.

Your surgeon may order a blood test called a complete blood count (CBC). This test will determine the level of red blood cells and hemoglobin in your blood. If your blood test shows that your hemoglobin levels are low, this is called anemia. People with anemia before surgery may have a higher chance of receiving a blood transfusion during their hospital stay.

Your doctor and Patient Blood Management Team will assess your anemia and decide if you need more testing and treatment.

If you have any questions about the UHN Patient Blood Management Program, please call the Patient Blood Management Coordinator:

- For patients at TGH or PM, call 416 340 4800 ext. 6102
- For patients at TWH, call 416 603-5164

You can also talk with a member of your health care team.

Your medications and your Pre-Admission Clinic visit

It is important for your health care team to know about any medications you have been taking. A doctor, nurse or pharmacist will review your medications with you during your Pre-Admission Clinic visit and during your hospital stay.



Please have a complete list of **all your medications** for your Pre-Admission Clinic visit.

Medications include:

- Prescription medications such as antibiotics, water pills (Lasix™) and others
- Non-prescription medications such as acetaminophen (Tylenol™), (Aspirin™) and other over-the-counter medications
- Vitamins and minerals, such as Vitamin D and calcium
- Herbal medicines
- Homeopathic and home remedies
- Supplements such as Glucosamine, Coenzyme Q10
- Medications that we do not have in the hospital

Remember to bring these items if you use them:

- Eye or ear drops
- Inhalers or nasal sprays
- Medicated patches or creams
- Injectable medications (like Insulin)
- Medication samples from your doctor
- Any medications you have stopped taking recently (such as blood thinners or anticoagulants and antibiotics)

Also, bring your pharmacy and family doctor's contact information.

Tell your health care team about any allergies or reactions you have had, including any reactions to:

- anesthetic medications
- injectable contrast dye
- latex
- food
- antibiotics

While at your Pre-Admission Clinic visit, you may get special instructions about stopping certain medications before your surgery. This will be written down for you so you will not forget. You may also get special instructions about which medication(s) you should bring with you to the hospital on the day of surgery.

Is it possible that the date of my surgery will change?

Yes. The operating rooms may be needed for life-threatening emergencies. We will tell you as soon as possible if your surgery is going to be postponed. You may already be at the hospital when this happens. Your surgery date or time might be changed for other reasons too.



If your surgery is postponed to another day, your surgeon's office will call you with a new date. We will do everything we can to not change the date of your surgery. We thank you for your understanding and cooperation.

Advance Care Plan

If you were unable to speak for yourself, an “Advance Care Plan” can help us know your health care wishes and who you trust to act on them.

Power of Attorney for Personal Care

This document tells us who you trust to make decisions on your behalf if you are incapable of doing so. If you have a Power of Attorney for Personal Care, please bring a copy and give it to the Pre-Admission nurse for our records.

- If you don't have a Power of Attorney, you can get more information at: www.attorneygeneral.jus.gov.on.ca/english/family/pgt/incapacity/poa.php

Advance Directive or Living Wills

You can use these documents to tell us about values and preferences that you would want known if you were not able to make treatment decisions yourself. If you have one of these documents, please bring a copy of this the morning of your surgery and give it to the POCU nurse for our records.

- You can get more information at www.advancecareplanning.ca or ask your Pre-Admission nurse for an “Advance Care Planning Workbook” to help you in this process.



My checklist #1

What should I have ready for my Pre-Admission Clinic appointment?

- This guide** – you can use it to remember the details of your surgery or keep new information you get during your visit.
- Your health card (OHIP card). If you do not have an OHIP card, please bring another form of government-issued photo ID (such as a driver's license, passport, or other provincial health card).
- Information on coverage from your extended health insurance plan such as policy numbers. Please tell us if you have private or semi-private coverage.
- Name and contact information for an emergency contact.
- Copy of Power of Attorney for Personal Care (POA), Advance Directives or both, if you have them.
- A complete medication list. This includes prescription medications and over-the-counter medications, herbal remedies and vitamins. You may want to label these and put them in a plastic bag.
- Name and contact number for your pharmacy.
- A history and physical form from your family doctor about your general health. Make sure that you have enough time to make an appointment with your family doctor and get any tests done before your family doctor signs the form for your surgeon. Your surgeon may also fill this out instead of your family doctor.
- All recent reports (past 6 months) and consult notes from your specialists.
- All tests results from your family doctor or specialist such as cardiology reports, cardiac stress test, Echocardiogram, ECG, CT scan, MRI scan, pulmonary function test or sleep study results.
- Name and contact information for your family doctor.
- Something to do while you wait (such as read a book or magazine or knit).

What should I do before my Pre-Admission Clinic appointment?

- If you have MRSA, CPO or C. difficile, please call the Pre-Admission Clinic before your appointment. This will help us to plan for your care during your surgery and hospital stay.
- If you have any symptoms of a respiratory illness, please call the Pre-Admission Clinic before your appointment. See page 9 for a list of what signs to look for.
- Eat as you normally would before you come to the Clinic.
- Take all your medications as you normally would before you come to the Clinic.
- Think about advance care planning before your surgery and bring copies of any Power of Attorney or Advance Directive documents to your Pre-Admission visit.

Please tell us if there are changes to the information on your health card (OHIP card) at your Pre-Admission Clinic visit (for example, change of name).

If you have questions or you have to cancel your Pre-Admission Clinic appointment, call the Pre-Admission office at TGH: 416 340 3529 or TWH: 416 603 5379.



My checklist #2

What instructions do I follow before my surgery?

When to get to the hospital

Please come to the hospital about 2 hours before your scheduled surgery time. The surgeon's office will inform you of the exact time you should arrive. For example, if your surgery is scheduled at 8:00 am, you need to be at the hospital at 6:00 am.

Eating and drinking

Do not eat solid foods after midnight (12:00 am) the night before your surgery.

You can drink clear fluids up to 5 hours before your surgery time. Clear fluids include clear, non-alcoholic beverages such as any juice without pulp, broth, tea or coffee without milk, ginger ale or Jell-O.

You may receive different instructions. Your Pre-Admission Clinic team will talk to you about when to stop eating and drinking before your surgery.

Other important instructions

- Do not smoke or drink alcohol for 24 hours before your surgery day.
- Do not use any recreational drugs (such as marijuana or cocaine) for 3 days before your surgery.
- If you have been told by the anesthetist, nurse or pharmacist to take a medication on the morning of surgery, take it at home with a sip of water.
- Remove all nail polish, acrylic and shellac nails, jewelry, contact lenses and body piercings at home before your surgery.
- Brush your teeth or rinse out your mouth, but do not swallow any water.

- Shower and shampoo your hair on the night before your surgery.
- Wash your skin the night before surgery and the morning of your surgery. If your surgeon asked you to use a specific cleaning solution or protocol when bathing (such as soap and water or chlorohexidine) make sure to follow the instructions.
- Do not use lotions, moisturizers or make-up on the day of your surgery.
- UHN is a scent-free hospital. Do not wear perfumes, colognes or other scented products. Other patients and staff may have severe allergic reactions.**
- Follow all special instructions and preparations explained to you during your Pre-Admission Clinic visit. Your surgery could be cancelled if you do not follow the instructions. Please call your surgeon if you have questions.

What if I feel sick?

Call your surgeon's office as soon as possible if there is a change in your health before your surgery. See page 9 for a complete list of symptoms.

Need more information?

Automated Surgery Helpline **Toronto Western Hospital:**
Phone 416 603 5211

For **Toronto General Hospital** or **Princess Margaret** patients:
Phone your surgeon's office.



My checklist #3

What should I bring to the hospital on the day of my surgery?

On the day of your surgery bring these items in one small bag with your name on it:

- This guide** – you can use it to remember the details of your surgery or keep new information you get during your hospital stay.
- Toiletries (such as tissues, toothbrush, toothpaste, comb, brush, soap, shampoo and shaving kit).
- Socks and comfortable shoes with rubber, non-skid soles (such as running shoes).
- Hearing aids, dentures and eyeglasses in their protective cases (all labeled with your name and phone number).
- Any walking aids such as canes or walkers (all labeled with your name and phone number).
- Your Ontario Health Card (OHIP), and your health benefits card and drug plan card, if you have one. If you do not have an OHIP card, please bring another form of government-issued photo ID (such as a driver's license, passport, or other provincial health card).
- Medications you were asked to bring during your visit to the Pre-Admission Clinic. Please bring only these medications with you in their original bottles.
- Any new medications you started since your Pre-Admission Clinic visit. If there have been any changes in how you take any of your medications, please let the pharmacist, nurse or doctor know when you are admitted to the hospital.
- If your Pre-Admission assessment was done by phone and not in the Clinic, please bring in all of your medications in their original bottles.
- Personal cell phone, tablet or laptop for use during your stay.

Any items you may need, like a bath robe, clothes or other belongings can be brought to you by your family or friends after your surgery.

My money and valuables

The hospital is not responsible for your money or valuables.



We know that you will have your personal items with you such as clothing, medications and personal support aids (for example, eyeglasses, contact lenses, dentures, hearing aids, mobility aids such as a cane, walker, prostheses or wheelchair). The hospital cannot be responsible for these items if they are damaged or go missing. We will give you a copy of our valuables form when you are admitted.



Important things to remember

- If you do not attend your Pre-Admission Clinic visit, your surgery will be cancelled unless other arrangements have been made.
- Please tell us if there are changes to the information on your health card during your Pre-Admission Clinic appointment (for example, change of name). Also please call the Admitting Department at:
 - PM: Call your surgeon. TGH: 416 340 3921
 - TWH: Call your surgeon.
- If you have questions or have to cancel your appointment, call the Pre-Admission Clinic office.
 - TGH: 416 340 3529 TWH: 416 603 5379
- If an emergency does happen, the time or date of your surgery may change.
- If there is a change in your health before your surgery (for example, you get a cold or fever), tell your surgeon as soon as possible.
- Please do not bring money or valuables into the hospital.

The day of my surgery

When is my surgery?

Your surgeon's office will confirm the date and time of your surgery.

Where and when do I go to check in on the day of my surgery?

You must arrive 2 to 3 hours before your surgery **or** at the time your surgeon gives you. Please go to the Pre-Operative Care Unit (POCU).

Toronto General Hospital POCU – Take the Munk Elevators to the 2nd Floor

Toronto Western Hospital POCU – Take the Fell Elevators to the 2nd Floor

Princess Margaret – please go to 18B Surgical Admission Unit

We ask that you and your Essential Care Partner follow the visitor guidelines at the time of your surgery. Ask the health care team for more information about the UHN visitor policy during COVID-19 or visit the [COVID-19 webpage](https://www.uhn.ca/covid19) (<https://www.uhn.ca/covid19>).

What happens when I arrive in the Pre-Operative Care Unit (POCU)?

1. The ward clerk checks you in.
2. Your nurse double checks your name, date of birth and chart information.
3. You change into a hospital gown, and remove your underwear and socks. A nurse will give you a warm blanket or an electric heating blanket will be placed on you to keep you warm before surgery. Being warm before and during surgery helps to reduce the risk of infection. You may also be given a disposable hair cap. You will need to place all your hair inside this cap.

4. If needed, some of your body hair is removed in the hospital just before your procedure. Do not shave or clip your body hair in the area of your surgery at home before your surgery. This can increase your chance of getting an infection.
5. In the POCU, members of your surgical team review your health.
6. An intravenous (IV) may be started in your arm and, you may be given medication to help you relax.
7. If you are admitted as an inpatient after surgery, you will have your blood sugar tested in POCU and PACU so we can monitor your blood sugar levels.
8. We may also give you an antibiotic before surgery, depending on the surgeon and type of surgery you are having.
9. Your surgeon marks the area of your body where you will have your surgery with a special marker.
10. You will be placed in either a recliner or on a stretcher (depending on your surgery). The nurse will place a warming blanket on you to help keep you warm before and during your surgery. This helps lower the chance of infection.
11. You are taken to the operating room.

Caring for you in the operating room

Having surgery may make you feel afraid or uncomfortable. It can be hard because during surgery, you can't take part in your own care.



At UHN, we want to give you and your family the best possible care before, during and after your surgery. The operating room always has a team of people with you to make sure you are safe.

Who is part of my operating room team?

While you are in our care, a team works together with you to make sure your surgery is a success. Your team may include:

- surgeons, surgical fellows and residents
- nurses
- anesthesiologists (doctors who give you medication to put you to sleep so you feel no discomfort or pain during surgery)
- anesthesia assistants
- respiratory therapists (monitors your breathing)
- respiratory technologists (helps the respiratory therapists)
- evoked potential technologist (professional trained to measure electrical responses in your brain)
- perfusionist (professional trained to use heart-lung machines)
- support staff

What happens in the operating room?

1. A member of the health care team helps you onto the operating room table and gives you a blanket to keep warm.
2. We place monitors on your body for your safety and clean the area of skin around where the surgery will take place.
3. We give you oxygen to help with your breathing.
4. On the morning of your surgery, both you and your anesthesiologist talk about the anesthetic option that is right for you. There are different types of anesthesia available. The type that is best for you will depend on your surgery.
5. We give you medication through an intravenous (IV) line. This makes you go to sleep. If you are getting general anesthesia, we put a breathing tube into your mouth once you are asleep.



6. If you are having regional anesthesia, we freeze the area of your body where you will have surgery. We give you oxygen and intravenous medications to make you sleepy and comfortable.

For more information about regional anesthesia instead of general anesthetic, please go to the UHN Patient Education and Engagement website at www.uhnpatienteducation.ca.

What does UHN do to keep me safe?

There are very important steps we follow before and after your surgery to make sure it is safe and successful.

1. We make sure that we have the right patient and the right site (area on your body).

Before your surgery, your surgeon confirms with you the area on your body where the surgery will happen. They use a marker to mark the area. We won't take you to the operating room until the site is marked. Please don't mark your body yourself before your surgery.

We also make sure that you have a wristband that has your name. If you have allergies or you are at risk of falling while in hospital, we will give you separate allergy or falls risk armbands. We check your armbands before you go for your surgery.

If you are having a regional block:

If you are having a regional block or medication that freezes an area of your body before your surgery, the anesthetist marks the site where they give you the block. We take you to a different room to do the regional block. We give you some medication to make you relax while the anesthesia team gives you the block.



After you get the regional block, your surgeon comes to the room, confirms with you the site where your surgery will happen and marks the site. When the operating room team is ready for you, we take you to the operating room.

2. We review all of your information.

Before your surgery begins, we review all of the important information about you out loud. This is called a **briefing session**. This makes sure that the operating room team understands and agrees with what they will do.

Before the surgeon starts your surgery, we talk about:

- the important steps in your surgery
- your medications
- your allergies
- any special needs you may have during your surgery

3. We review one more time before surgery.

Before we make any incisions (cuts) the team reviews one more time that you are the right patient. This is called a **time out**. The side of your body and site of your surgery is talked about out loud and everyone agrees on what they will do.

4. We review when your surgery is over.

Before you leave the operating room, we talk about what happened during your surgery. We also make sure we agree where you will go after surgery (for example, the recovery room). This is called the **debriefing**.

How does the operating room team keep me safe during my surgery?

The operating room may be cold and bright. You may hear some alarms and bells. These safety alarms help us with our work and keep you safe. We also watch you closely in the operating room. There are some important safety checks we use to keep you safe during your surgery. For example:

- **We make sure all the instruments have been sterilized.**

We follow special instructions to wash and sterilize all the tools we use during your surgery before we begin. This makes sure they are clean and germ-free. We won't use any instruments until we are sure they are sterile.

- **We position your body properly.**

When you enter the operating room, we help you onto a narrow bed. Then we place a safety strap around your body to make sure you don't fall off.

While you are lying on the operating room bed, we put pads and cushions under your bony areas (elbows, ankles). This prevents any pain and discomfort during your surgery.

We support all parts of your body when you are on the table and keep you warm. We also check your skin before and after your surgery.

- **We keep track of all the instruments we use.**

We use many different items when we do your surgery. To keep track of them, we carefully count any sponges, tools and instruments we use before and after your surgery.

If the count doesn't match, we will x-ray the area on your body where you had surgery. A surgeon will read your x-ray to make sure we have all the items we used.

Who can I call if I have questions?

If you have any questions about your surgery, please call your surgeon's office.

Where can my Essential Care Partner wait while I am in surgery?

Please review UHN's COVID-19 page (<https://www.uhn.ca/COVID19>) for the most up-to-date and important information about UHN's visitor policy and what to expect when coming to the hospital.

For up-to-date information about what your Essential Care Partner can expect at UHN see "What essential care partners need to know before coming to UHN" (https://www.uhn.ca/PatientsFamilies/Health_Information/Health_Topics/Documents/Essential_Care_Partners_Quick_Guide.pdf).



Essential Care Partners are not allowed in the operating room.



How do my family and friends get information about me after my surgery?

Choose 1 person to call the hospital to find out how you are doing. This person can share the information with your family and friends. Please give us the name of this person, their phone number and what type of information you would be comfortable with them knowing. We will write this information down in your chart.

For more information or to download a copy of this guide, please visit: www.uhn.ca/PatientsFamilies/Visit_UHN/Surgery_Patients



Important things to remember

Before and during my surgery

- Your surgeon's office will tell you the date of your surgery and the time to arrive at the hospital (see front cover of this guide).
- You must arrive 2 to 3 hours before your surgery **or** at the time your surgeon gives to you.
- On your day of surgery, go to the Pre-Operative Care Unit (POCU) (see page 28 in this guide).
- Family and friends may be able to visit in the POCU. Ask the health care team how many visitors are allowed for each patient.
- Essential Care Partners are not allowed in the operating room. They may ask the waiting room volunteers to call for information. A member of the operating room team may come out to speak to them about how you are doing.
- Choose 1 person to call the hospital to find out how you are doing. This person can share the information with your family and friends.

Part 4

After My Surgery

You have now had your surgery. This part of the guide has more information about your care while in hospital, including:

- What happens after my surgery
- What I need to know about my recovery in hospital
- Taking my medications
- Taking care of myself
 - Managing my pain
 - Exercises and activity after my surgery
 - Other things I can do
 - Caring for my incision
 - Taking care of my skin and preventing pressure ulcers
 - Rest and sleep
- Important things to remember

Keep any new information that your health care team gives you during your recovery period.

What happens after my surgery?

After your surgery, we will take you to the Post-Anesthetic Care Unit (PACU). It is also called the Recovery Room. This room has other patients and may be busy and noisy.

Your nurse checks your pulse and blood pressure often. You may have an oxygen mask that covers your nose and mouth. The nurse calls you by your first name as you wake up and may show you how to do deep breathing and coughing exercises. A member of the operating room team will update your family.

Everyone experiences pain differently after surgery. It is important to tell your nurse if you are having pain. Please see page 42 of this guide for more information about how we help you manage your pain and how you can also help yourself.

How long do I stay in PACU?

How long you stay in PACU depends on the care you need, your health and how you recover from the anesthetic. When your condition is stable, we will take you to the nursing unit.

My recovery in the hospital

What happens when I leave PACU and go to the inpatient nursing unit?

While you are on the nursing unit, a team of health care professionals will look after you. You may see different team members depending on your needs.

Your opinion is very important to us. We want you to be as comfortable as possible. Please talk to a member of your health care team about your plan of care each day, or about any questions or concerns you may have.

Taking part in my care: bedside shift report

At shift change, nurses share important information about your care in your room as one nurse is handing over your care to another nurse. This is a time for you to learn more about your plan of care and share important concerns you may have with your nurse. You are encouraged to ask any questions or share your concerns before the shift report begins or ends.

What will I eat and drink?

If needed, you will have an intravenous (IV) line in your hand or arm. This is to give you fluids and medications until you are drinking well.

- You will start drinking liquids as soon as it is safe for you to do so, and if it's right for you.
- Depending on the results of your assessment by your health care team, you may be given solid food to eat.
- Some patients may need a special diet, special meals or a feeding tube after surgery. If you need any of these, your health care team will talk to you about this.



We know that we are not always able to meet the personal food choices of all our patients. We understand that a familiar food brought from home may give you comfort during your hospital stay. Before bringing food from home, talk with your nurse or dietitian first about the kinds of foods that you will be able to have after your surgery.

How will my recovery be monitored?

A member of your health care team will see you every day. If at any time you want to speak with your surgeon or another member of the health care team, please let your nurse know.

The health care team will tell you how you are doing and answer your questions. We check your vital signs (heart rate, blood pressure, temperature, breathing rate and pain score) throughout your hospital stay.

You may have blood tests and diagnostics tests such as CT scan, MRI, x-rays and ultrasounds after your surgery.

You may need blood tests done every day to monitor a special condition (such as blood sugar levels).

My medications

It is important for you to know as much as possible about the medications you will be taking after your surgery, including:

- The name of the medication
- Why you need it
- How much you take
- When you take it
- Any side effects or things you need to know when taking this medication.



When you are ready to your place of residence, we will give you a prescription for any new medications. The nurse or pharmacist will review your medications with you.

Taking care of myself after my surgery



Managing my pain

Review what you learned from the videos on pain management found on our website:

1. Go to www.youtube.com
2. In the search bar, type in “UHN my surgery guide playlist”
3. Choose the top result in the list – “My Surgery Guide: Videos for UHN Surgery Patients”

How much pain can I expect after my surgery?

Everyone experiences pain and discomfort differently after surgery. At UHN, we take a holistic (whole body) approach to treating your pain. Our goal is to make sure that you have as little pain as possible after your surgery.

Why is managing my pain important?

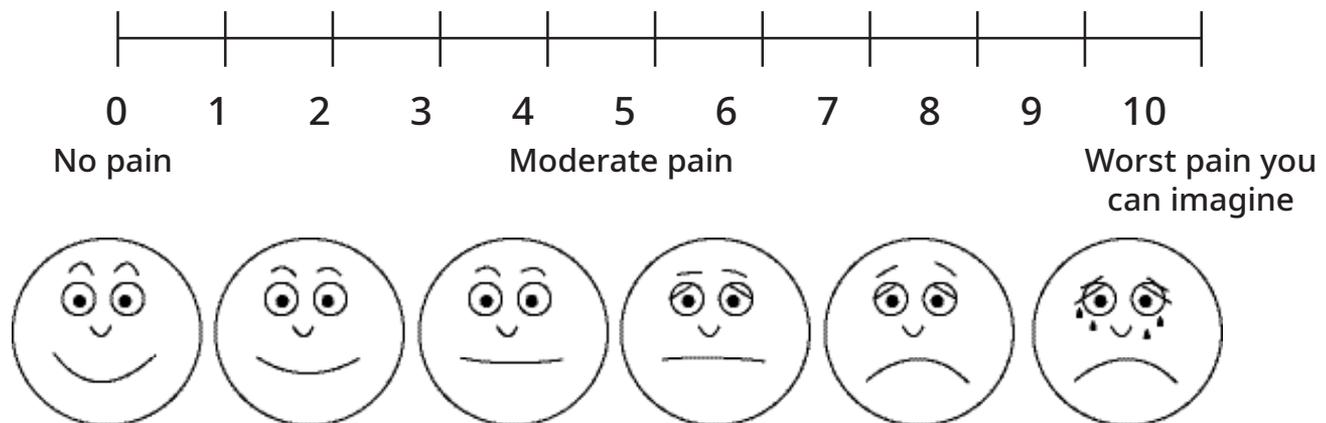
It is important to manage your pain because it means you will have less stress on your body. It will:

- help with healing
- decrease complications
- prevent chronic or long-term pain from developing

Managing your pain early helps you to return to your everyday activities much sooner.

How can I tell my health care team about my pain?

At UHN, we use a number scale to measure your pain. We will often ask you to “rate” your pain, when you are moving and when you are resting, using a scale of 0 to 10.



May be duplicated for use in clinical practice. As appears in McCaffery M, Pasero C: Pain: Clinical manual. pp. 68-73, 1999, Mosby, Inc.

You can use words like **mild, moderate or severe** to describe your pain. You can also describe the type of pain you are having. For example, words like sharp, achy and throbbing may help the staff understand and treat your pain better.

Tips for managing my pain

- Keep your pain at a level you can manage (at a rating of 3 or lower on the pain scale). Do not wait until your pain gets worse to ask for pain medication.
- Take your pain medication regularly so you are ready to take part in all activities (such as walking, changing dressing (bandages) or going to the bathroom).
- Depending on the pain medication you are taking, it can take up to 30 minutes to start working. Talk to your health care team about when to take your medication.

Who can help me?

Many members of the health care team can help you manage your pain, including a UHN team of specially trained nurse practitioners and anesthesiologists called the Acute Pain Service (APS). Also, your Essential Care Partner can help you to be as comfortable as possible after your surgery. Talk about your pain with everyone involved in your care. Your health care team will help you find what works best to manage with your pain.

Exercises to help me recover from my surgery

You may feel sleepy, and have nausea or be sick to your stomach after your surgery. You may also feel stiff and sore.

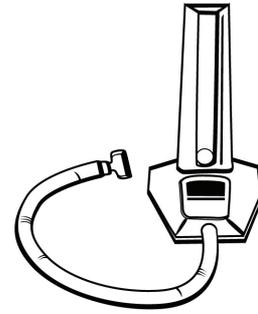
These exercises will help you recover from your surgery. **Your health care team will let you know if you need to do these exercises once every hour.**

Some of these exercises may be uncomfortable for you. Talk to your nurse about managing your pain before starting. This will help you to do these exercises.

1. Breathing with an incentive spirometer 10 times

Depending on your surgery and medical history, an incentive spirometer may help you to breathe in as deeply as possible. Breathing deeply helps your lungs work better.

- Breathe in deeply to move the ball to the top.
- Keep the ball at the top for 3 seconds.
- Breathe out.



2. Deep breathing exercises 10 times

These exercises help to clear mucus and keep your lungs well expanded.

- Relax your shoulders. Put your hand on your stomach.
- Breathe in while pushing out your stomach.
- Feel your chest expanding.
- Hold your breath for 3 seconds.
- Breathe out slowly.



3. Splinted cough 3 times

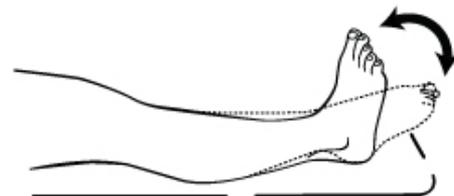
- Position pillow tightly against your incision (if you have had surgery in that area).
- Cough twice in a row and rest in between.



4. Ankle pumping 10 times

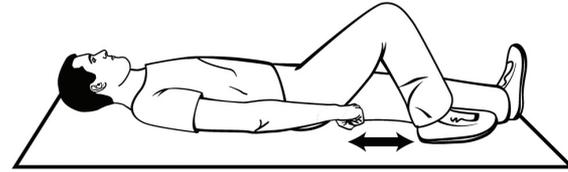
It is important to keep the blood moving in your legs. Depending on your surgery, ankle pumping will help prevent blood clots in your veins.

- Lying on your back or sitting in a chair, bend your feet up and down.



5. Leg slides 5-10 times

Depending on your surgery, you may learn how to do leg slides during your Pre-Admission visit.



- Lying on your back, slide your legs up and down by bending your knees.
- Repeat one leg at a time, with your heel slightly off the bed.

When will I be able to do my usual activities again?

You will be able to do more and more activities as time passes, like walking and sitting in a chair for longer periods. Remember that some days you will feel better than others.

You can expect to get up and walk the day of your surgery with help from your nurse or physiotherapist. Each day, we will assess your activity level and help you become more independent.

Other ways I can help myself after my surgery

Handwashing: a simple way to stay safe

Washing your hands well and often during your stay in hospital can help you stay safe by removing germs from your hands before they can make you sick.

How to Wash Your Hands

Comment se laver
les mains
(FRENCH)

怎樣洗手
(CHINESE)

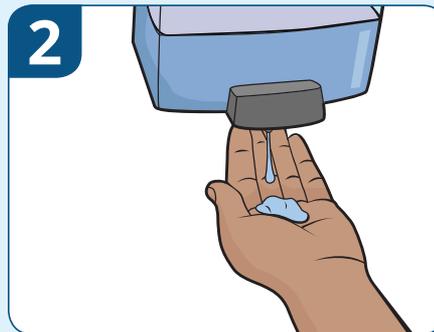
Como lavar as
suas mãos
(PORTUGUESE)

Cómo lavarse
las manos
(SPANISH)



Wet hands

Se mouiller les mains
弄濕雙手
Umedeça as mãos
Mójese las manos



Apply soap

Prendre du savon
塗肥皂
Ensaboe
Aplíquese jabón en las manos



Wash hands for 15 seconds

Se frotter les mains pendant 15 secondes
洗手15秒
Lave as mãos por 15 segundos
Enjabónese las manos por 15 segundos



Rinse hands

Se rincer les mains
沖洗雙手
Enxague as mãos
Enjuáguese las manos



Dry hands

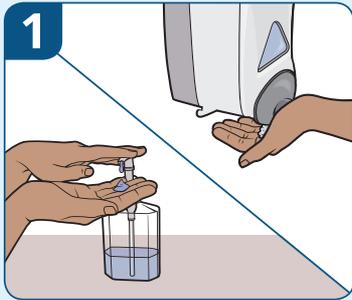
Se sécher les mains
抹乾雙手
Seque as mãos
Séquese las manos



Turn taps off with paper towel

Fermer les robinets à l'aide d'une serviette de papier
用抹手紙關閉水龍頭
Feche as torneiras usando o papel toalha
Cierre la llave de agua con una toalla de papel

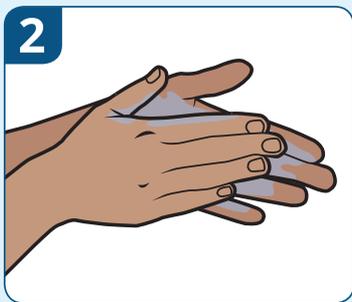
How to use hand sanitizer



Rub hand sanitizer between fingers and over both sides of your hands for 15 seconds

FRENCH **Comment utiliser du désinfectant pour les mains**
Frotter les paumes, le dos des mains et entre les doigts pendant 15 secondes

CHINESE **怎樣使用洗手液**
雙手互相摩擦15秒，把洗手液搓勻手指之間、手掌和手背



PORTUGUESE **Como usar o desinfetante para as mãos**
Esfregue o desinfetante para as mãos entre os dedos e em ambos os lados das mãos por 15 segundos

SPANISH **Cómo usar el desinfectante de manos**
Distribuya el desinfectante sobándolo entre los dedos y por ambos lados de las manos durante 15 segundos

4U10

 Patient Education

 **UHN** Toronto General
Toronto Western
Princess Margaret
Toronto Rehab
Michener Institute

How is my incision cared for in hospital?

After your surgery, you will have an incision (the cut from your surgery) that has been closed with staples or stitches. Your nurse or surgeon may check your incision every day.

- If you have a dressing, your health care team will decide when to remove it.
- You may notice some redness, swelling and oozing of fluid or blood around your incision. Do not be worried. This is normal.

How do I care for my incision after surgery?

Your health care team will show you how to care for your incision before your discharge.

Watch for these symptoms. If you have any of these, call your health care team right away:

- Fever (more than 38 °C or 100 °F)
- New, increasing or worsening redness or swelling at or near your surgery incision
- Pain that suddenly gets worse and is no longer relieved when you take pain medication
- Yellow or green fluid leaking from your incision or more drainage or fluid than before
- Bad smell coming from the incision

Follow these instructions:

1. Do not touch your incision.
2. Do not remove the scab or paper strips from your incision.
3. Do not put lotion, powder or any type of ointment on your incision.

Depending on your surgery, we will decide whether to remove your staples or stitches before you leave the hospital. If you leave with staples still in place, we may give you a staple remover and your family doctor or staff at a walk-in clinic can remove them. If you have questions, ask your nurse or surgeon.

How can I take care of my skin and prevent pressure ulcers?

What is a pressure ulcer?

A pressure ulcer is an area of skin that has been damaged because of pressure from a surface (like a mattress or chair).

You can get a pressure ulcer when this pressure stays for long periods of time over a bony area like your elbow, heel, hips or tailbone.

Your skin protects you from infection.

You need to protect your skin to protect yourself.

How do I know I have a pressure ulcer?

Your skin may have different colours at first such as red, purple or blue. The colour does not go away when pressure is removed. This is an important sign from your body that something is causing too much pressure over this area. More skin damage will happen if this pressure continues.

Check your skin every day.

If you think you are getting skin breakdown, talk to your health care team.

These red, purple or blue areas may become open ulcers, involving your muscles, tendons and bones.

What causes skin breakdown?

There are many reasons that increase the chances of your skin breaking down and leading to pressure ulcers:

- You can't move, you're not moving enough or you're not able to change positions by yourself
- Direct pressure from your bed, chair, wheelchair, or any contact between the equipment and your body
- Friction that happens when you can't lift your body as you change positions in your bed, chair or wheelchair
- Friction that happens when you use your elbows or heels to help yourself move
- Scars from a healed pressure ulcer
- Urine or stool being in contact with your skin often
- Not eating the right kinds of food
- Smoking
- Certain medications
- Certain health conditions
- Aging

What can my Essential Care Partner do to help me?

Have your caregiver look at your skin, paying special attention to areas you can't see or feel well, such as your back, bottom, hips, legs and feet. Watch for any rashes, redness, or open areas.

1. Remember your backside!

Moisture from urine, stool and sweat can cause skin breakdown and infections. If your skin is always wet it makes it harder for your skin to protect you. Your skin needs to be cleaned and protected with a barrier cream after each soiling.

2. Pressure sores begin over bony areas.

Remember to check these areas:

- back
- tailbone
- bottom
- hips
- elbows
- ankles
- heels
- shoulder

Tell your health care team about any areas on your skin that are red, purple or blue, painful or open.

3. Check your feet every day.

Check your feet for red areas, blisters and calluses. Make sure your shoes fit well and are not causing any pressure or friction.

How can I help prevent skin breakdown?

- Change your body position every 2 hours while you are in bed, and every 15 minutes when up in your chair or wheelchair. Your health care team will help you as needed.
- Put a pillow between your legs to prevent your ankles and knees from touching when you are lying sideways in bed. Check with your nurse first to make sure this is right for you.
- Try not to lie directly on your hip bone.
- Make sure your clothes and bed linens are not wrinkled under you.

- Raise your heels off the bed by using 1 or 2 pillows under your lower legs. Or, wear special heel boots.
- Keep the head of your bed as flat as possible so you do not slide down in the bed. Check with your nurse first to make sure this is right for you.
- Have your caregiver use a lift sheet to move you up in bed if you need this type of help.
- Do not use doughnut shaped cushions because they may cause other areas of pressure.
- You may be seen by an Occupational Therapist (OT) who will give you tips on how to best position yourself in your bed or wheelchair. OTs can assess if a pressure reducing cushion or mattress and other assistive devices might help you.

What other tips would help me?

Skin care tips

- Clean your skin with soap and water, or a special skin cleanser that your health care team recommends. Be sure to pat your skin dry.
- Speak to your health care team about products that keep your skin dry.
- Use a moisturizer on dry skin.
- Put on a barrier cream so that your skin doesn't feel irritated and pressure ulcers don't form.
- Don't rub or massage skin over bony areas. This may cause more skin damage.

Healthy eating tips

- Try to eat and drink regularly if possible.
 - You may not be able to eat normally after your surgery. Check with your nurse or doctor to find out what is right for you.
- If you can have regular meals, try to focus on healthy foods. Aim for a variety of foods from each food group (vegetables and fruit, grains, milk and alternatives, meat and alternatives). Refer to Canada's Food Guide for more information (<https://food-guide.canada.ca/en>).
- Protein is important after surgery to help with healing.
 - Meat, chicken, fish, eggs, milk and yogurt are good sources of protein.

- Make sure to drink regularly to stay hydrated. Aim for 6 to 8 cups of fluid through the day, unless your doctor has instructed you differently.
- If you are having trouble eating and drinking or if you have questions about your diet after surgery, ask your nurse or doctor if you can speak to a dietitian.

Activity and exercise tips

Keeping active speeds up your recovery and prevents other health problems.

- Try to get up as soon as possible with help from the staff.
- A Physiotherapist may give you an exercise plan to help you.
- Ask family or a caregiver to help you with exercises.

Other information and resources

Please talk with your health care team for more information.

What about rest and sleep?

It is important for your recovery to get as much sleep and rest as you can after surgery. Have several rest periods during the day.



It is common not to sleep well after surgery. Your sleep will improve as you recover. If you find it hard to sleep at night or you have strange dreams, please let your health care team know, or call your family doctor. Your medications might need to be changed.

Review what you learned from the videos on exercises found on this website:



1. Go to www.youtube.com
2. In the search bar, type in “UHN my surgery guide playlist”
3. Choose the top result in the list – “My Surgery Guide: Videos for UHN Surgery Patients”

For reliable health information that may help you recover from your surgery, visit www.uhnpatienteducation.ca

For more information or to download a copy of this guide, visit www.uhn.ca/PatientsFamilies/Visit_UHN/Surgery_Patients



Important things to remember

After my surgery

- After your surgery, we will take you to the Post Anesthetic Care Unit (PACU) where you will stay until your condition is stable. Then, you will go to the nursing unit.
- Your health care team will monitor your recovery. Ask questions any time (you can use page 60 of this guide to write these down).
- We will give you fluids after your surgery, if right for you and safe to do so.
- We may ask you to do deep breathing and coughing exercises, leg exercises, and incentive spirometry after your surgery.
- Keeping active speeds up your recovery and prevents other health problems. Try to get up as soon as possible with help from the staff.
- We will work with you to make sure you can manage your pain.
- Your health care team has a plan for your care. Nurses will talk to you about this during reporting at the change of shift. You can talk to your nurse about your plan each day.
- Talk to your health care team about when you can start your usual activities.
- Wash your hands well and often while in hospital.
- We will care for your incision and we will show you how to do this.
- Check your skin every day. If you think you are getting skin breakdown, talk with your health care team.
- A balance of rest and activity will help you recover.

Part 5

Planning to Leave the Hospital

You are now ready to go leave the hospital after your surgery. There are many things you may be thinking about. This part of the guide gives you information that you can use to plan your discharge including:

- How to prepare
- How to take care of myself after leaving the hospital
- Who can help me at home
- Where to find support
- My follow-up visit

Going home

Review what you learned from the videos on planning to go home after being in hospital by visiting our YouTube website:

1. Go to www.youtube.com
2. In the search bar, type in “UHN my surgery guide playlist”
3. Choose the top result in the list – “My Surgery Guide: Videos for UHN Surgery Patients”



Preparing to leave the hospital

Your health care team will let you know when you can leave the hospital.

You will leave the hospital between 9:00 am and 11:00 am. **You must arrange for someone to take you to your next location or residence.** If you have any questions, talk with your surgeon, nurse or social worker before you go.

Before you leave the hospital, the nurse will give you instructions about:

- your recovery from your surgery
- your medications
- your follow-up appointment

If you are not given a follow-up appointment, please call your surgeon's office.

We will give you a prescription for any medications you need. There is a retail pharmacy at each of our hospitals. Talk to the pharmacist on your unit for more information.



Remember:

You might not be able to drive or take part in your usual activities for a while after your surgery. Talk to your surgeon about this.

Taking care of myself after the hospital

What do I need to do?

Your health care team will go over everything you need to know or do when you leave the hospital. They will write this information down for you or give you a special sheet with your instructions before you leave.

They may also ask you to show them that you are able to do new skills, like caring for your incision. This is a good time to ask any questions that you may have and to tell your health care team about your worries and needs.

We will do everything we can to help you find the right services and supports that will help you manage after your surgery.

Who can help me?

You may need help after your surgery. If you qualify, your nurse will call the Home and Community Care Coordinator to arrange services like nursing care, physiotherapy, or a social worker if you need them. This will be done before you go home.



Resources for you

- 211 Guide to Social Services in the City of Toronto – home support, child care, and links to many health services
Phone: 211 or go to the website: www.211Toronto.ca or www.211ontario.ca
- Or visit the UHN website for more information: www.uhn.ca
- You may also search for more resources on the UHN Patient Education website at www.uhnpatienteducation.ca



My follow-up visit: Dates and times to remember

It is important that you come back to your surgeon's office for your follow-up visit, if needed. We want to make sure that:

- You are recovering well from your surgery
- Your incision is healing
- You are managing your pain
- You have the support you need to continue to get better

My first follow-up visit:

Date: _____

Time: _____

Place: _____

Phone number: _____

My second follow-up visit (if needed):

Date: _____

Time: _____

Place: _____

Phone number: _____

Part 6

My Tests and My Questions

This part of the guide includes:

- My Tests and Test Results
- My Questions

While you are in hospital, you may have several tests to help you get ready for or recover from your surgery. You can use the “My Tests and Test Results” part to record some of this information.

You can also see your test results on myUHN as soon as they are ready. myUHN is a secure website for patients of University Health Network. You can access myUHN anytime on a computer, smartphone or tablet. Ask for a registration code when you check in for your next appointment or call myUHN Support at 416 340 3777.



You will probably also have many questions to ask your health care team. Write these questions down so you have them ready for your doctor, nurse or other team member. Please use the “My Questions” part of the guide to help you.

To find reliable health information, visit www.uhnpatienteducation.ca.

My Tests and Test Results

Date of test	Name of test	Reason I needed this test	Result of test	Notes

Questions

At time of publication, this guide was up to date. However, changes can happen from time to time, so please talk to your health care team if you have any questions or concerns.

Surgery Patient Education Guide Evaluation Form

Please take 5 minutes to tell us what you think about this guide. When you are done, please send your form to: Attn: Patient Education Program, Patient & Family Library, Toronto Western Hospital, 1st Floor, West Wing, 399 Bathurst St, Toronto, ON, M5T 2S8

Part 1: About you

These questions will help us gather information to better serve the needs of our patients.

You can answer some or all the questions.

1. You are: Female Male Other

2. What is your age?

Under 25 25 to 30 30 to 39 40 to 49 50 to 59 60 to 69 70 to 79 80 or over

3. What is the highest level of education you have completed?

Grade school High school College/University

4. How confident do you feel when filling out medical forms by yourself?

Very Quite a bit Somewhat A little bit Not at all

5. What language do you prefer to speak? English Other (Which one?):

6. What is your marital status?

Single, Never Married Married Separated Divorced Widowed

Other: _____

Part 2: How you used this guide

These questions are about your surgery and the surgery guide.

1. What surgery did you have? _____

2. Where did you have your surgery?

Toronto General Hospital Toronto Western Hospital Princess Margaret Cancer Centre

3. Where did you get your guide?

In my surgeon's clinic In the Pre-Admission Clinic

On the nursing unit after my surgery From the surgery guide website

Other: _____

4. Which do you prefer?

I prefer this guide with the plastic cover and all pages (hard copy)

I prefer this guide in an electronic format that can be downloaded from a website

5. Did someone from your health care team (for example, a surgeon or a nurse) talk to you about reading the information in your guide?

Yes No Not sure

6. Did you read the information in your guide to help you prepare for your surgery and, to help yourself after your surgery?

Read the whole guide Read part of the guide Did not read at all

If you did not use your guide, please tell us what stopped you from using it?

7. Did your health care team add more information about your care into your guide during your hospital stay (for example, brochures or information sheets)?

Yes No Not sure

8. Did your health care team use the guide with you during your hospital stay (for example, to go over what to expect during your surgery and recovery time, or to help you learn more about your exercises, medications, or your discharge plan etc.)?

Yes No Not sure

Part 3: Did you get any extra education?

These questions are about other information you may have been given.

1. Did you get any extra education about your surgery from other sources?

Yes No Not sure

If yes, which source? Check all that apply:

My health
care team
members

Internet

Books

Brochures
and
pamphlets

Videos

A support
group

I visited the
Patient & Family
library

Other:

2. Was there any information that you would have liked that was not in your guide?

Yes No Not sure

If yes, please tell us what you would have liked to see in your guide:

Part 4: How did the guide help you?

Please answer all these questions by circling one number:

1. The language in the guide was simple to understand.

I strongly disagree
0

I disagree
1

Not sure
2

I agree
3

I strongly agree
4

2. The information in the guide helped me understand what to expect during and after my surgery.

I strongly disagree
0

I disagree
1

Not sure
2

I agree
3

I strongly agree
4

3. The guide helped me to prepare for my clinic and hospital visits and to ask good questions.

I strongly disagree
0

I disagree
1

Not sure
2

I agree
3

I strongly agree
4

4. The information in my guide helped me feel less anxious about my surgery.

I strongly disagree
0

I disagree
1

Not sure
2

I agree
3

I strongly agree
4

5. The guide helped me to care for myself when I went home after my surgery.

I strongly disagree
0

I disagree
1

Not sure
2

I agree
3

I strongly agree
4

If you agree or strongly agree to question 5, please tell us how the guide helped you at home:

Other comments:

Thank you for filling out this evaluation.