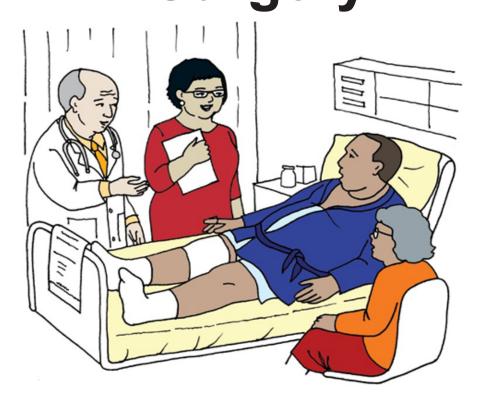
Module 7 When My Doctor Recommends Surgery

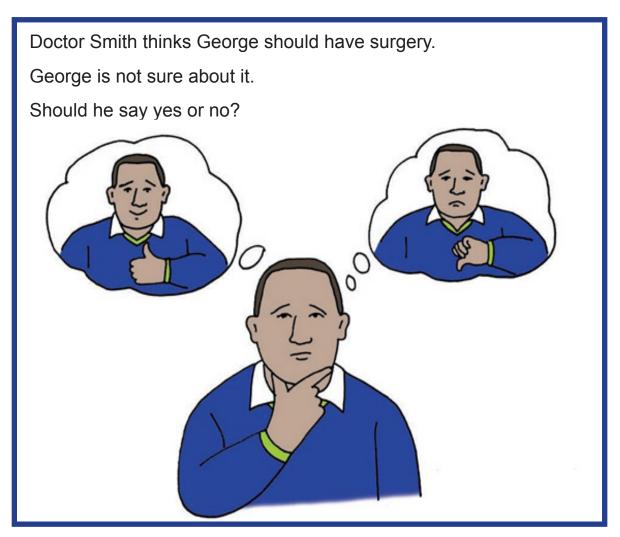


In this module, you can find information about:

- 1. BEFORE: Deciding to have surgery and then how to plan and prepare
- 2. DURING: Going to the hospital for surgery
- 3. AFTER: Planning to go home and after care
- 4. What did I learn?

1. BEFORE: Deciding to Have Surgery and How to Plan and Prepare

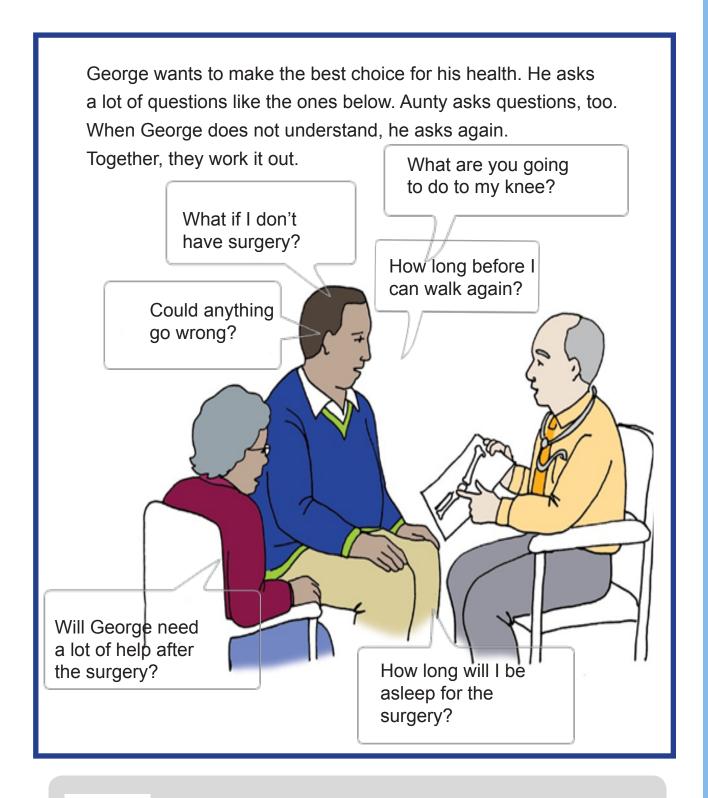
Saying Yes or No to Surgery



What to think about before saying yes to surgery:

- Will the surgery help my quality of life? Will I be healthier after I heal?
- What are the reasons for the surgery?
- Do I understand how the doctor is explaining what will happen to me before, during, and after surgery?
- How do I tell the doctor I want the surgery?
 - The doctor needs your consent to do anything to your body.
 - Part of the process means that you have a right to have the information explained clearly and using words that you understand.

George Asks His Doctor Questions About His Options





Some people choose to ask another doctor about surgery. This is called getting a second opinion. This is a good idea if the surgery may have risks. Your doctor or insurance can help find another doctor to ask.

Planning for Surgery

George decides to say yes to surgery.

Doctor Smith tells him what he needs to do.

George asks him to write it down.

- The hospital will contact you with the date and time of surgery.
- Call them to say OK to the date and time.
- Tell work that you need time off for the surgery and recovery.

Go to the hospital for the pre-operation check-up. It will usually be about 1 week before the surgery.

Work out who else you should tell about the surgery.

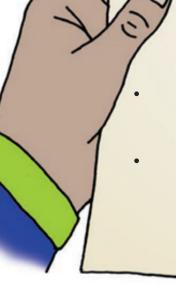
Work out how to get to and from the hospital before and after surgery.

If you have no one to help you and you would like some support, tell the doctor.

Everyone needs some support.

It helps people to get back to good health.

Ask your doctor for resources that may be able to help you find the best support.





What Else Do You Need to Know About the Surgery?

You might talk to other doctors, specialists, and nurses. You might have blood tests and other tests, like a urine (pee) sample, or an x-ray.

You might be given information about getting ready for the day of surgery like:

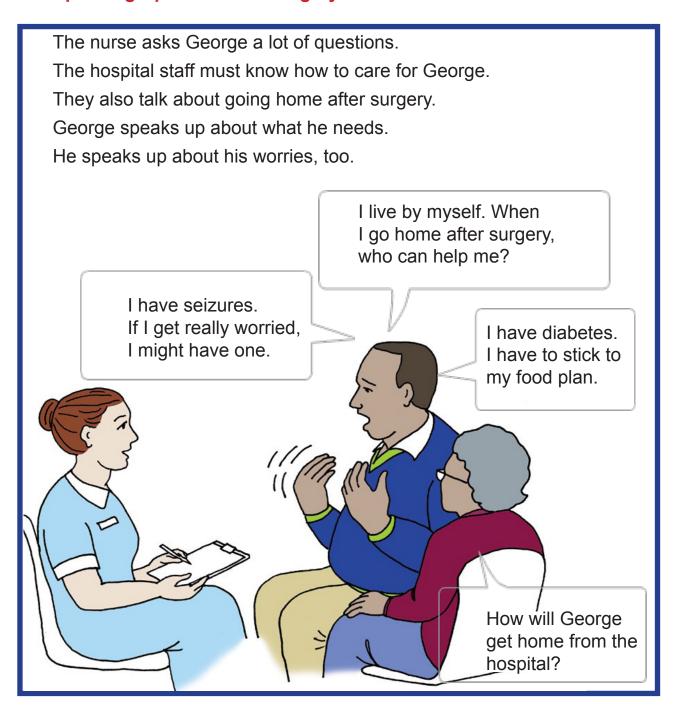
- When to stop eating and drinking before surgery.
- What to bring to the hospital on the day of surgery.
- What to do about your medications. You should ask if you need to stop taking them. If the doctor says yes, ask how long before surgery.
- What time you should get to the hospital.
- Which part of the hospital to go to.
- How long the surgery will take.
- Where you will be taken after the surgery to recover.

Say something or ask if you don't understand.

Ask to have pictures or easy words, if you need them.



Speaking Up Before the Surgery



If you are very worried, it's OK to tell the doctors and staff at the hospital. They can make a plan with you about how to cope.



This plan may include you bringing headphones and music, a favorite book, or a special item you have that helps keep you calm.

You are not the only person that gets nervous and anxious, many people do - IT IS OK!

2. DURING: Going to the Hospital and Having Surgery

The day of surgery may look something like this:

- Once you arrive at the hospital you will check in at the front desk to let them know you arrived. At this time they may check your insurance or ID and make sure they have the information they need about you.
- A nurse will call you and take you back to a room to get changed and ready for surgery. They will make sure you are doing okay. The nurse will also make sure that you followed all the doctor's orders they asked you to do prior to surgery.
- The doctor generally will come in and check on you, explain
 what will happen during surgery, how long the surgery will take,
 and how long you will be in recovery. If you want, your support
 person can be in the room as well so they learn the details of the
 surgery.
- This is a good time to ask any other questions you may have written down or that you think of.
- At this time the nurses will do their final preparation for your surgery. Your support person will go to the waiting room to wait. The doctor or nurses will provide your support person with updates from the doctor about your progress during surgery and while you are in the recovery room.
- You will be given medicine to help you fall asleep for the surgery.
 Once you have been given this medicine you will not remember anything during the surgery until you wake up.



This is not how every hospital gets patients ready for surgery, but it is a good idea of how your day may go.

Getting Ready

George and Aunty came to the hospital in a taxi.

George signed his consent form. This form says that George knows his rights and understands what is going to happen during and after surgery.

The nurse helped him change into hospital clothes.

She shaved his leg for surgery.



The doctor will put a needle in his arm for the sleep medicine. This needle is an IV.

An IV puts fluids and/or medicines in your body. When you wake up from surgery, you will still have the IV in your arm. It may hurt a bit, but not for long.

Waking Up From Surgery

Once surgery is over you will be moved to a recovery room. You may see that you are hooked up to medical equipment, this is to make sure that your body, like your heart, is working well. You may feel tired or groggy.

Examples of medical equipment that may be used:

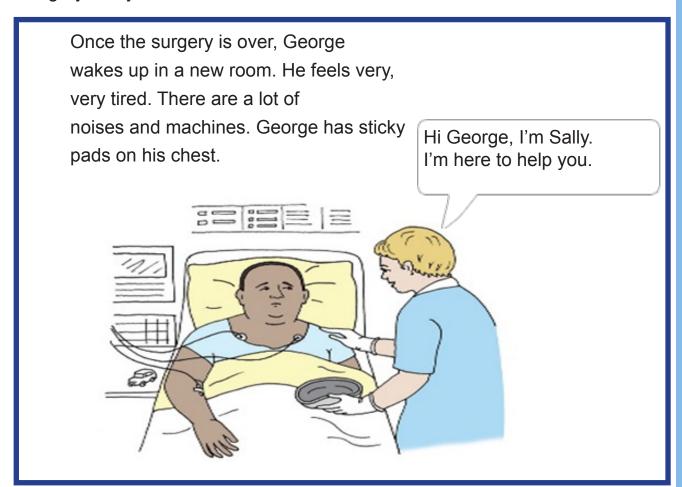
- A small tube may go in your nose.
- A small tube may go in your urethra (where your pee comes out).

These will be taken out when you do not need them anymore.

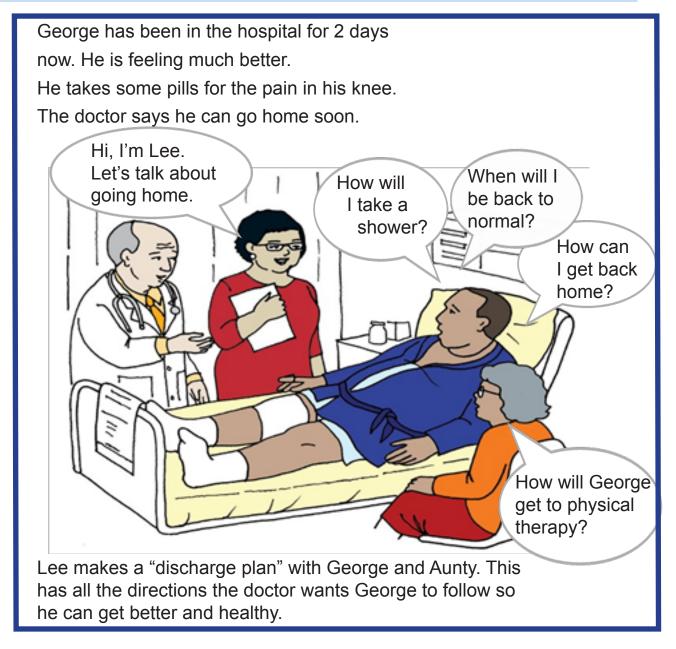
The nurse might give you a bowl in case you need to throw up. It is common to feel sick to your stomach or nauseated right after surgery.

Generally, your support person or who ever came with you will be able to come to see you once you are awake and stable after surgery.

The nurses will monitor your improvement and then release you to go home or to a hospital room where you will stay overnight. Your length of stay will vary depending on the surgery and your overall health.



3. AFTER: Planning to go home and After Care



Some directions and requests that may be on your discharge plan are:

- The type of surgery you had while at the hospital.
- · What you need to do to get better.
- Who to call if something goes wrong at home.
- Signs or symptoms that mean you need to call the doctor right away like fever, swelling, or redness.
- Any new medications you may need while you are getting better.
- When and where do you need to visit the specialist.
- Make sure you understand everything. Ask if you don't.

Getting Better at Home

Once you are home, follow the discharge plan to be sure you are staying healthy and that you get better.

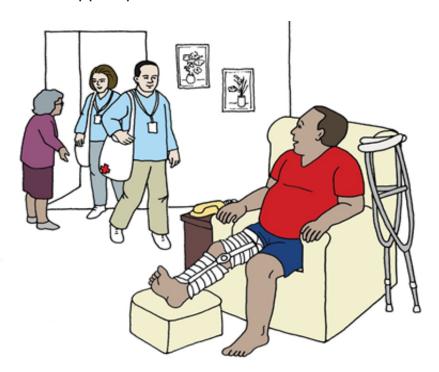
If you do experience any signs or symptoms that cause concern be sure and call the number on your discharge plan.

Sometimes it takes your body a long time to heal. Be patient.

This is a time to take it easy. Your body needs to heal so you can do all the activities that you enjoy.

The patient transport service brought George home. He feels happy to be home again.

- Aunty comes over to help with meals.
- The community nurses come to check on George's knee.
- Home health care employees help with showering.
- Home health aids, friends, or family help with the shopping.
- George needs to get to his physical therapist and the doctor.
 He may need to use public transportation or another service if his support person is unable to take him.



George looks forward to getting back on his feet again.

4. What Did I Learn?

I can take charge of my health care when I:

- Make a choice whether I should or should not have surgery.
- Know how to plan for my surgery.
- Understand what will happen to me the day of surgery.
- Follow my discharge plan so I can get better.
- Know how to take care of myself at home.
- Can ask any questions I have.

Nc	otes:				
-		 			
-					
-				 	
-					

This module was adapted from NSW Council for Intellectual Disabilities (2009), Australia.

The toolkit and its components are supported in part by Grant/Cooperative Agreement #5 U27 DD000014 from the Centers for Disease Control and Prevention, Disability and Health Branch. The contents of the toolkit are solely the responsibility of the authors and do not necessarily represent the official reviews of the CDC.





