Harrogate and District NHS Foundation Trust

What You Need to Know When Coming into Hospital for Surgery

Introduction

We understand that having surgery can be a worrying time for you and your family.

Harrogate and District NHS Foundation Trust (HDFT) aim to provide safe, high-quality, patient-centred care. We have therefore produced a leaflet to prepare you for surgery including what to expect on admission.

Preparing for surgery

Once listed by your surgeon for an operation, you will be entered onto the waiting list. You will be invited to complete a Patient Knows Best questionnaire which helps us determine your health needs and what preoperative assessment you require.

Please follow the link below to read **'Fitter Better Sooner'** for information on how to optimize your health in preparation for surgery, and local organizations to help with improving your health.

www.hdft.nhs.uk/patients/preparing-for-surgery

Pre-assessment

Some patients who are fit and well will not require a pre assessment however may need to attend for investigations based on the procedure being undertaken.

Tests such as ECG, blood tests, MRSA screening or X-rays may be required.

Alternatively, you may be invited to have an assessment without a date, so we know you are Fit to List when a date becomes available. It is vitally important that you inform us of any changes to your health which could affect your availability for surgery.

To optimize you for surgery, you may require further tests and investigations, which could cause a delay in going ahead with your procedure.

What to bring

For In Patient stay:

- Medications (Not controlled drugs),
- Hearing aids and or glasses

- Comfortable change of clothes,
- Toiletries,
- Mobility aids,
- Book or magazine,
- Mobile phone if you have one (please keep on silent so it doesn't disturb other patients)
- Emergency contact details.

For Day case procedures

- Dressing gown
- Slippers or flat enclosed shoes
- Mobility aids
- Hearing aids and or glasses
- Book or magazine
- Mobile phone if you have one (please keep on silent so it doesn't disturb other patients)
- Emergency contact details

PLEASE NOTE HDFT VALUABLES DISCLAIMER

You are advised not to keep a large amount of money or property with you in the hospital. Harrogate District NHS Foundation Trust does not accept responsibility for loss or damage to money or property unless handed in for safekeeping. This applies throughout your stay in hospital on any ward. If you need items such as glasses, hearing aids or clothing with you, the Trust does not accept responsibility for them.

Admission and fasting

If you become unwell or have an admission to hospital, please inform the Pre assessment unit 01423 554500 as this may affect your admission.

Follow specific instructions for fasting on your appointment letter or Information given by your Preassessment nurse to avoid cancellation.

Depending on your admission time Fasting instructions as follows:

0700 to 0730 am – Do not eat food after midnight before the morning of your surgery. Clear fluids like water tea coffee (no milk) are allowed up until surgery

1200 admission you can eat a light breakfast e.g. bowl of cereal or 2 slices of toast with tea or coffee before 0730 am and then clear fluids up until your surgery

Stop all supplements / over the counter herbal remedies or vitamins 1 week before surgery

Day of admission

Prior to Elective Surgery, your admission will be to Day Surgery / Rowan Ward / Discharge Centre / Ward 1 Wharfedale hospital, Otley.

Contact details as follows:

Harrogate Hospital, Day Surgery Unit B010 - 01423 555400

Harrogate Hospital, Rowan ward D108 - 01423 557389

Harrogate Hospital, Discharge Centre D106 – 01423 553008

Wharfedale Hospital, please report to ward 1 at Wharfedale hospital, Newall Carr Road, Otley LS21 2LY (Tel 0113 3921713) at the specified time in your admission letter. The Ward is located on the first floor of the hospital and can be accessed by lifts through the North Entrance from the car park. It is not possible for relatives to stay with you.

In the unlikely event that you need to be unexpectedly admitted to hospital following day case surgery, you will be transferred to an inpatient bed at one of the main site hospitals at Leeds.

Have a bath or shower on the morning of your admission

Remove piercings particularly in the nose or tongue

Remove Contact lenses - bring glasses if needed

Ensure rings are removed if undergoing upper limb surgery

Remove all make up. If your surgery is on your arm or leg, please remove nail varnish from that limb, including acrylic nails.

There is little space for relatives to wait with you, so unless there are exceptional circumstances, they will be asked to leave.

You will be greeted on your arrival by a nurse before you are seen by the surgeon, anaesthetist and have an opportunity to ask any questions at this point.

Once seen you may be able to sit and sip water whilst waiting to go to the operating theatre.

The nurses will ask you to put a theatre gown on and if appropriate antiembolic stockings or flowtron devices (inflatable sleeves around your legs - these will inflate automatically and provide pressure at regular intervals), Both systems increasing blood flow out of your legs thereby reducing the risk of blood clots.

Please visit www.nhs.uk/conditions/deep-vein-thrombosis-dvt for information on reducing your risk of hospital acquired blood clots

Anaesthesia

Anaesthetists are doctors with specialist training who are responsible for giving your anaesthetic and for monitoring your wellbeing and safety throughout your surgery.

The choice of anaesthetic depends on:

- Your operation and any medical problems
- Your individual risks
- Your preference and the reasons for them
- The recommendation and skill of your anaesthetist
- The equipment staff and resources within the hospital setting your surgery is taking place

Options include local, regional, and general anaesthesia depending on the procedure.

Additional resources available online from the Royal College of Anaesthetists

■ Caring for someone who has had a general anaesthetic or sedation https://rcoa.ac.uk/patients/patient-information-resources/leaflets-video-resources/caring-for-someone-recovering-from-ga.

■ Risks associated with your anaesthetic (https://rcoa.ac.uk/patients/patient-information-resources/anaesthesia-risk).

■ Patient information series (https://rcoa.ac.uk/patients/patient-information-resources/patient-information-leaflets-video-resources)

Operating department

Most patients walk to the Operating Theatre; if you cannot walk far a wheelchair or trolley may be used.

It is usually brightly lit with no natural light. Air conditioning may make it feel quite cold.

You will be asked to lie on a theatre trolley.

The team will go through some compulsory safety checks.

Your details will be checked against your name band, any allergies confirmed, and whether your surgery if relevant is on the left or right of your body marked with an arrow to indicate the correct site.

A member of staff will attach a blood pressure cuff; oxygen probe and ECG leads stuck to your chest to measure heart rate blood pressure and oxygen levels.

A small plastic tube (cannula) is inserted into a vein in your hand or arm using a needle. This allows us to give you anaesthetic drugs, fluids and other medicines during your operation.

If you are having a general anaesthetic, you may receive the anaesthetic through the cannula. You may also breathe oxygen and anaesthetic gases through a face mask.

If you are having a spinal anaesthetic, a local anaesthetic is injected into your lower back. This numbs the lower half of your body, so you do not feel pain during the operation. You will usually remain awake, but sedation can be considered to help you feel relaxed.

If you are having a regional anaesthetic, local anaesthetic is injected around the nerves supplying the part of the body where you are having surgery, such as your arm or leg. This numbs the area and provides excellent pain relief during and after your operation. Regional anaesthesia may be used on its own, with sedation, or together with a general anaesthetic.

Whichever type of anaesthetic you have, your anaesthetist will stay with you and monitor you continuously throughout the procedure to keep you safe.

Recovery

Your recovery nurse is specially trained to care for you for the first hour or so after surgery. You will recover in a monitored area before returning to the ward.

Depending on what type of anaesthetic you have had, you will be provided with refreshments and something to eat.

Risks

Modern Anaesthesia is safe but is never without risks; most side effects are minor and temporary. Your anaesthetist will discuss these risks with you on the day of surgery.

Pain relief

Pain will be managed with medications and other techniques. Although you may be supplied with painkillers when you leave hospital, it is sensible to buy some over-the-counter painkillers to have in stock at home.

You may go home on Morphine type painkillers. It is important to reduce and stop these medications as soon as possible following the advice of your team.

Visit www.britishpainsociety.org/whocares/patient-publications/#managing-pain-after-your-surgery.

Going home

The team looking after you will aim to discharge you when you are clinically ready.

Following General Anaesthetic /Sedation/Spinal/Regional Block and Local Anaesthetic you must be collected by a responsible adult over the age of 18 and they must stay with you for the first 24 hours following surgery.

If you have a Local Anaesthetic, it is not necessary to have someone overnight. We advise you go straight home and rest for the remainder of the day.

You must not use public transport or drive yourself within 24 hours of having a General Anaesthetic.

If you require hospital transport? Please be aware that hospital transport is limited and must be reserved for people who require specialist mobility care.

It is essential you have a conversation with family members /friends/neighbours to plan prior to your surgery regarding transport and any additional help you may require.

Discharge Centre

Some patients will be admitted to the Discharge Centre before planned surgery. Your instructions will be in your admission letter.

The Discharge Centre at Harrogate Hospital is available for patients awaiting discharge home when treatment has finished. By moving to the Discharge Centre, we can make hospital beds available as early as possible to reduce waiting times and improve flow through the hospital.

It is equipped with a seating area with TV magazines and games. Sandwiches, soups, biscuits, and hot and cold beverages are provided.

The discharge staff will ensure you have everything you need before you are discharged. They will talk you through your discharge letter, medications and any education where necessary for example wound care or injections

At home

Follow discharge advice and specific procedure information given to you by your surgeon in clinic and seek help if concerned instructions for where to contact will be on your discharge letter.

Contact details

HDFT Switchboard: 01423 885959 (ask for person or department you wish to speak to

Pre assessment Unit E102 - 01423 554500

If you are not happy with the care you receive, we want to know so we can put things right and improve our service. In the first instance please talk to the ward or department staff if you have any concerns. However, if your concern is not resolved please contact the Patient Experience Team

Patient experience Team – 01423 555499

Email: hdft.patientexperience@nhs.net

Link to HDFT website for further information

www.hdft.nhs.uk/patients