



Gynecologic Oncology Preoperative Care

This information along with other educational material is available on our website at www.WatsonClinic.com/GynOnc

The following information is designed to assist you with preparing for your upcoming surgery. We are hopeful that we addressed all potential questions prior to your departure from the office, but please do not hesitate to call us if you have questions that are not addressed in this pamphlet or were not adequately addressed in the office. The date and time of your procedure, special instructions pertaining to your diet, your bowel preparation, your routine medications, a preoperative shower, and other miscellaneous items are all reviewed below.

Surgery Date

- Your procedure has been scheduled for ____/____/____.
- Because of many issues outside of the control of our office (anesthesia scheduling, operative nursing staff scheduling, insurance authorization, etc.), the exact time of your procedure will not be determined until the day before your operation. A representative from the hospital (LRH) or the surgery center (LSDC), depending on where your procedure is scheduled, will contact you in advance of your surgery and let you know what time you should arrive at the hospital or surgery center on the day of your procedure. It is very important that you arrive on time so that all appropriate paperwork and preoperative safety checklists can be completed.
- LRH Surgeries:** If you have not heard from the hospital by 7 pm on the night before your scheduled operation, you should contact the hospital at 863-284-1690. Please leave a message at this number if there is no answer. If you have still not heard back by 9 pm, please notify the GYN/ONC doctor on-call (863-687-1321) who will assist you. Monday surgeries will be contacted on the Friday before.
- LSDC Surgeries:** If you have not heard from the surgery center by the day before your scheduled surgery, please call the office before noon so that we can assist you.

Diet

- You should have only a clear liquid diet the day prior to surgery. Clear liquids include anything that remains liquid consistency while cool such as juices and broth soups, but also includes gelatin products such as Jell-O. Please avoid anything that is red as this may give the appearance of blood in your bowel movements during the bowel preparation.
- After midnight, do not take anything by mouth, but you may brush your teeth and take medications with a sip of water or apple juice the morning of surgery before leaving home. If you have eaten after midnight, your surgery will be **CANCELED**.
- Gum and candies are not allowed.

Skin Preparation

- A special type of shower on the evening prior to your surgery can decrease your risk of a surgical site infection.
- Use a chlorhexidine gluconate soap (Hibiclens) for this shower. Liquid and foam varieties are both effective, and either may be used. If you have an allergy to chlorhexidine, you may use triclosan (Aquasept). Both of these soaps can be purchased over the counter at most local pharmacies such as Walgreen's, CVS, Wal-Mart, etc.
- Wash your body thoroughly from the neck down using this soap the night before surgery.
- Do not use this soap in your vagina, ears, or mouth, and do not allow it to get into your eyes.
- You may use your normal shampoo.
- Do not shave or clip hair in the area of your surgery prior to your operation. This will be done, if needed, in the operating room after you have been put to sleep; this approach minimizes infection risk.

Blood Clot Prevention

- Surgery increases the risk of blood clots in the legs and/or pelvic veins. This is known as a deep vein thrombosis (DVT). These clots may break loose and travel to your lungs, and this is known as a pulmonary embolism (PE). These are obviously very serious conditions that we wish to minimize.
- In efforts to decrease your risk of DVT /PE, it may be recommended that you self-inject a medicine the night before surgery called enoxaparin (Lovenox). This is typically only needed in high risk patients.

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- If you are uncomfortable performing a self-injection, a family member, friend, or neighbor may be able to assist you.
 - Further instructions on self injection are attached (if applicable to your situation) and a demonstration video can be found at <https://www.lovenox.com/patient-self-injection-video>.
 - During and following your procedure, compression boots will be placed on your legs while you are hospitalized to help keep the blood flowing and lower your risk of DVT/PE. It is important to wear these at all times except when actively up walking or going to the bathroom.
 - It is very important that you move around as much as possible following surgery. You will be sore, but this should begin on the evening of surgery.
 - We recommend sitting up in a bedside chair at least 1 hour several times each day.
 - We recommend walking in the hallway at least 3 times each day. The nursing staff will assist you with this for your safety, but it is very important to walk often.
 - The more you are moving around and out of bed, the sooner you will be able to go home and your risk of DVT /PE will be less.
 - For the highest risk patients, you may also be prescribed additional enoxaparin injections to continue at home after hospital discharge. It has been shown that continuing this medication for about one month following surgery will decrease your risk of DVT/PE by 50%.

Bowel Preparation

- For some operations, it is helpful if your bowels have been cleaned out to some degree prior to your surgery. This can decrease your risk of both intraoperative and postoperative complications. Unprepped bowel may result in the need for a colostomy in some situations where it would have not otherwise been necessary.
- The clear liquid diet (see page 1) is the initial part of your bowel preparation.
- The actual “cleaning” or “prep” itself:
 - Many different “preps” are available all with their own set of side effects. There are some that may be “easier” to take than others but they also carry a risk of kidney damage or significant electrolyte abnormalities that could result in a last minute cancellation of your procedure.
 - Golytely:** This is a one gallon solution obtained by prescription. You will need to drink on the afternoon prior to your surgery. The instructions call for you to take one 8 ounce glass every 15-20 minutes. You may take this prep more slowly if you experience significant nausea or bloating. You may also try to make this solution more tolerable by mixing in some Kool-Aid, Gatorade, or Crystal Light powder if you desire (please avoid any with red coloring). Regardless, it is best for the solution to be completely ingested within a 4-6 hour time frame. We recommend that you start your “prep” no later than 12 pm (noon) on the day prior to your procedure.
 - Antibiotic** cleansing is also an important part of your Golytely bowel prep. Metronidazole and Neomycin 500 mg tablets are used. You will be instructed to take two (2) of the metronidazole tablets AND two (2) of the neomycin tablets at 5 pm, 6 pm, and 10 pm the evening prior to surgery. This is an important step in minimizing your risk of postoperative infections.
 - Magnesium citrate:** This can be purchased over the counter at your local pharmacy. Please drink one bottle on the evening prior to your procedure. You should begin taking the solution no later than 12 pm (noon).
 - Enemas:** Some patients only require a cleaning out of the lowermost portion of the bowel or the rectum. In this case, a few enemas should be adequate. We recommend two Fleets enemas the evening before your surgery around 8 pm One additional Fleets enema should also then be used prior to leaving the house on the morning of your operation.
 - No “prep” is appropriate for patients having minor procedures or for those where the risk of bowel surgery or injury is negligible.
- Be sure to start your bowel “prep” by 12 pm (noon) as noted above. If you have problems with your “prep” and do not think you will be able to complete it as recommended, please contact the office before 4 pm on the day before your procedure so that we can assist you.

Medications

- Do not take any blood thinner type products for one week prior to your procedure. If you are taking one of these types of medicines regularly (e.g. warfarin, clopidogrel, or aspirin) and we have not specifically addressed the best time to stop this medication before surgery, please call the office immediately. A list of commonly used medications that should be avoided prior to surgery is also included in this folder.
- All herbal or “natural” medicines, vitamins and non-prescription supplements should be stopped as far prior to surgery as possible. The true effects of these medications on bleeding, blood pressure, and their interaction with pain medications and anesthesia are unknown. For safety, we recommend you stop these the day you become aware of a planned surgery. You will likely be able to resume these medications once you are discharged from the hospital following your procedure or shortly thereafter.

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- Diabetic medications must be managed very carefully prior to surgery.
 - Do not take any metformin (glucophage) containing medications for 24 hours prior to surgery, or your procedure will be **CANCELED**.
 - Insulin (pump or injections) and other diabetic medications should be discussed with the doctor that manages your diabetes. They will know you and your blood sugar history best and will be able to give you the best and safest recommendations on which diabetic medications can be taken prior to surgery, and they should advise you as to what dose to take as well.
 - With the exception of medication issues discussed above, you should take all of your normal medications on the morning of surgery with a small sip of water prior to coming to the hospital or surgery center, unless instructed otherwise by your surgeon or primary care provider.
 - Please **bring all of your medications (or accurate list) with you to the hospital** so the nursing staff can be sure that all records are accurate. This will also allow us to be sure we give you the correct medication at the correct dose postoperatively. Special permission must be received from the nursing and pharmacy staff at the hospital for you to be allowed to take your very own medications while hospitalized, and we have found it simpler and safer to allow the hospital to administer medications while hospitalized.
 - Please also be aware that following surgery at the hospital, your medications may differ slightly from what you typically take at home. For example, there are some medications (ones you may not normally take) given in the postoperative period to certain patients that have been shown to decrease the risk of cardiac complications.

Miscellaneous

- Be sure you have discussed your potential financial responsibility (coinsurance, deductible, etc.) with our business office prior to your surgery. We strongly desire for everyone to be aware of all potential financial issues up front so that other arrangements can be discussed if necessary. If you have not already spoken with one of our financial counselors, please call 863-680-7206 to schedule an appointment or speak with a representative. Let them know you are calling regarding “pre-surgery counseling,” and your call will be directed to the appropriate individual.
- Be sure to bring your insurance card, a photo identification card (drivers license), and method of payment if applicable to the hospital or surgery center on the day of your surgery.
- Wear comfortable, loose fitting clothing to the hospital, and bring similar clothes to travel home in at the time of your discharge from the facility.
- Please take to the hospital on the day of your surgery any living will or advance directives if you have such. These items should not be required for procedures at the surgery center.
- Please remove all jewelry and leave at home.
- Please do not bring valuables or large sums of money to the hospital or surgery center.
- Please bring a case for dentures, glasses, contact lenses, hearing aids, etc. along with any special solutions or cleaners these items may require.
- You must have someone to drive you to and from the hospital or surgery center for your procedure. You will not be allowed to drive yourself home. Not having appropriate transportation will result in the **CANCELLATION** of your procedure.
- If you are having a procedure that does not require an overnight stay, you will need to make arrangements to have someone stay with you for 24 hours following general anesthesia.
- If you will require an overnight stay, do not forget to bring your normal toiletries such as your toothbrush, toothpaste, a brush, etc.
- If you typically use a walker, cane, crutches, or similar, please bring them with you to use postoperatively.
- If you utilize any special medical equipment such as CPAP machine, you should bring this with you. You will obviously still require these support devices postoperatively, and they may not be available at the hospital or surgery center.
- If you have a latex allergy, be sure you have alerted us to this in the office prior to surgery. This requires special preparations in the operative suite, and we will need to be aware of this allergy ahead of time. Often times pre-operative allergy testing is recommended to document the potential significance of your allergy.
- Postoperative care instructions are provided as an additional pamphlet from our office and on our website (www.WatsonClinic.com/GynOnc). Please review that information now before your procedure and again upon your arrival home from the hospital or surgery center after your procedure. Becoming familiar with these issues ahead of time will make your postoperative recovery more comfortable and easier for you and your family.

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Your Central Florida Center for Gynecologic Cancer Care

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