What can I expect during the few hours before my surgery?

On the day of surgery, you may be asked to come to the facility several hours before your procedure is scheduled to begin. This allows the staff to complete any tests that cannot be performed until the day of surgery. You will be taken to an area, sometimes called the preoperative holding area, where you will be asked to take off your jewelry and clothing, and you will be given a hospital gown to wear. The staff will put all your belongings in a safe spot, or have you give the clothes to your family or friend.

You may then sit in a big recliner chair or wait on the stretcher. A nurse may have you sign some important paperwork. He or she will take your temperature, blood pressure and pulse, do a nursing assessment, review your medications and then answer any questions you may have. An intravenous (IV) line will be put in a vein in your hand or arm. The purpose of the IV is to provide fluids and medications during the surgery. You must remove all hairpins, dentures, hearing aids, piercings, contact lenses, and glasses unless you are told by the staff that you keep those items.

Will I be able to talk to my anesthesiologist before surgery?

Yes. You will meet your anesthesia provider, and other staff members of the team, before you go into the operating room. The anesthesia provider will examine you, review your medical and anesthesia history and the results of any tests you may have done. The anesthesiologist will explain to you the type of anesthesia you will receive and will answer any further questions you may have. Depending on your health, the type of surgery and your personal wishes, the anesthesia provider and your surgeon will determine the type of anesthetic that is best for you.

Will I be asleep for my procedure?

There are several different types of anesthesia techniques that are available for your surgery.

- **General Anesthesia:** medication that is injected in your IV. You may also be given a mixture of gases with oxygen to breath. You will not know what is going on in the operating room or what is around you. A breathing tube may be placed into your windpipe to help you breathe during your procedure. If you have a breathing tube, you
may have a little bit of a sore throat after surgery.

- **Regional or Spinal Anesthesia**: an injection that creates numbness around the nerves near the area where you are having surgery. Epidural or spinal blocks help numb the abdomen and both lower extremities. Other nerve blocks may be done with the nerves in arms or legs to numb them. With regional anesthesia, you should feel no pain. You may be awake or be given IV sedation to maintain your comfort level.

- **Local Anesthesia**: numbing medicine is injected around the incision site. It creates a lack of feeling, or numbness in that area only. The rest of the body is not affected. You will be awake, but will not feel pain. The surgeon often administers this type of anesthetic since it is used on smaller areas of the body.

- **Monitored Anesthesia Care**: uses both local anesthetic at the incision site and medicine injected into your IV. This type of anesthetic does not require a breathing tube. You will be awake after surgery is completed.

### Will I get to speak with my surgeon?

Your surgeon will visit you before starting the surgery to ask if you have any questions and will use a special pen to mark on your body the correct surgery site.

### How does the staff keep me safe?

The operating room nurse will verify the following before taking you to the operating room:

- Your name and birth date
- Allergies
- The name of your surgeon
- What type of surgery you are having
- Where you are having your surgery

All the team members will be communicating specific information about your clinical status, including your current condition and recent treatments. The communication among team members is to help ensure a strong link for your patient care and your safety. This is called a “time out.”

### After I am checked in, how long do I wait for surgery?

Delays may occur when a hospital emergency case is put ahead of yours or a patient before you has a procedure that lasts longer than planned. It is never easy to wait, so try to keep yourself busy by reading, watching television or using relaxing techniques. If there is a delay, your patience and understanding is greatly appreciated.