



# Pre-Op Education for Colorectal Surgery

## WELCOME

┌ **NewYork-Presbyterian**  
└ Weill Cornell Medical Center

Center for  
Advanced Digestive Care

# Pre-Op Education

**The purpose of this educational document is to prepare patients scheduled for colorectal surgery, help reduce their anxiety, and maximize both patient satisfaction and outcomes.**

- Prepare the patient and family for surgery and hospitalization
  - Review the admission process and hospitalization details
  - Actively involve patients and family in the plan of care
- Familiarize patients and families with the care team and their roles
- Decrease the stress of the hospital experience
- These are general guidelines. **Any instructions from your physician take priority over material presented in this document.**
- Instructions specific to NYP/Weill Cornell Medical Center and NYP/Lower Manhattan Hospital are included in this document.

# Table of Contents

<b>Your Health Care Team</b>	<b>4</b>	<b>Day of Surgery</b>	<b>25</b>
		Day of Surgery Instructions	<b>26</b>
<b>Preparing for Surgery</b>	<b>5</b>		
Pre-op Testing and Medical Clearance	<b>6</b>	<b>Post-Surgery</b>	<b>28</b>
Bowel Prep Supplies & Directions	<b>9</b>	What to Expect after Surgery	<b>28</b>
Chlorhexidine Scrub Directions	<b>14</b>	Pain Management	<b>31</b>
		Feel Empowered	<b>32</b>
<b>Preparing to Go to Hospital</b>	<b>18</b>		
Important Paperwork	<b>19</b>	<b>Discharge</b>	<b>34</b>
Advance Directives	<b>20</b>	Discharge Readiness Checklist	<b>34</b>
Packing	<b>21</b>	Going Home	<b>35</b>
What to Consider	<b>22</b>	Home Instructions	<b>36</b>
The Day Before Surgery	<b>23</b>		
		<b>Once You Are Home</b>	<b>38</b>

# Your Health Care Team



Your health care team is comprised of many people that will work directly with your physician to care for you.

- Medical Secretary
- Surgeon
- Practice Nurse
- Nurse Practitioner
- Floor Nurses
- Nursing Assistants
- Surgical Fellows and Residents
- Medical Students
- Social Worker
- Dietitian
- Medical Consultants
- Others - Housekeeping, Lab Techs, Food Service Workers

# Preparing for Your Surgery

# Pre-Op Testing



- Pre-testing at NYP/Weill Cornell Medical Center is located on Greenberg 3 West
  - No appointment is necessary
  - Walk-in basis only
- Your doctor's office will order your required testing and any additional tests (CT/MRI scans) needed **PRIOR** to surgery

# Pre-Op Testing

## Pre-op testing at NYP/Lower Manhattan Hospital

### **Pre-admission testing (PAT) unit is located at:**

NYPLMH Pre-Admission Testing

170 William Street, 2<sup>nd</sup> floor, room 296

Open Monday through Friday from 9-4pm

Please call (212) 238-0180 to schedule an appointment

### **For patients only in need of an EKG for pre-operation testing:**

Wellness Center

170 William Street on the 1<sup>st</sup> floor

Open Monday through Friday from 9-3pm

Please call (646) 588-2551 to verify that they will be able to do the EKG

# Medical Clearance

## Medical clearance may be required for patients with:

- Diabetes
  - Cardiac or pulmonary disease
  - Other medical problems
- 
- Check with your doctor to make sure you know which home medications to adjust or not take during the bowel prep process
    - Make sure your doctor knows you are taking these medications



# Bowel Prep: Supplies to Purchase

**Supplies can be purchased over the counter.  
Prescriptions are not necessary.**

- 64 ozs of GATORADE
- 238 grams of MIRALAX powder
- 4 DULCOLAX tablets



**Some patients will require an alternate bowel prep, i.e. those with diabetes, kidney or other chronic diseases, or those who are unable to tolerate this solution. Please confirm with your physician to ensure proper preparation.**

# The Day Before Surgery

- No solid foods after midnight the day before surgery.  
When you wake up, begin a CLEAR LIQUID DIET.

**For example: If you are scheduled for surgery on Wednesday, your last solid food should be before midnight on Monday. Begin a clear liquid diet on Tuesday.**

- Drink plenty of clear, non-carbonated liquids to prevent dehydration and to ensure bowel is thoroughly cleaned out

## **Examples of clear liquids:**

- Water
- Fruit juices without pulp (e.g. apple juice, white grape juice)
- Clear broth or any flavor bouillon
- Gatorade, Powerade, Kool-Aid, or Crystal Light
- Jello
- Popsicles, ices, or sorbet
- Tea or black coffee (no milk, cream, or non-dairy creamers. Sugar is OK)

# Bowel Preparation (Part 1)

## The Day Before Surgery

- At 3:00 PM, take 4 Dulcolax tablets by mouth with a large glass of water
- At 5:00 PM, mix the 238 gm bottle of Miralax powder into the 64oz of Gatorade. Shake the solution until the Miralax is dissolved.
- Once mixed, drink an 8 oz. glass of Miralax/Gatorade solution every 10-15 minutes until the solution is gone.

# Bowel Preparation (Part 2)

## The Day Before Surgery

- **YOUR STOOL SHOULD BE CLEAR**  
once the prep is finished. If not, call the answering service and speak to the covering physician for the next step.
- Continue drinking clear liquids **AS TOLERATED** until you go to sleep. This will keep you from becoming dehydrated.
- **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT**  
(Including chewing gum or lozenges)

# Bowel Prep Tips

- The laxatives will cause diarrhea to clean out the colon
- Plan to be near a bathroom right after you take the laxatives and for the remainder of the evening

## **Individual response to laxatives may vary:**

- They may start to work as early as 30 minutes or take as long as 3 hours.
- It is not unusual for the solution to cause nausea.
- If you vomit, please call physician's office to speak with the physician on call.

# Chlorhexidine Scrub (CHG)

- Used before surgery as an extra measure to remove bacteria
- CHG scrub is also known as Hibiclens or Bactoshield
- Can be purchased at most large pharmacies
- Available in liquid form or scrub brush applicator; either form is OK to use



# Chlorhexidine Scrub (CHG)

## Starting 3 days before surgery:

- Shower daily with CHG for 3 consecutive showers before surgery & the morning of surgery (4 times in total).

## Patient Activity

Write down the day of your surgery: \_\_\_\_\_

Now, write down the day to start CHG prep: \_\_\_\_\_

**For example: If your surgery is scheduled for Wednesday, please start using your CHG scrub on Sunday then continue to use Monday, Tuesday, and Wednesday morning prior to surgery.**

# How to Use CHG

## Showering Process

- Shower as usual and be sure to rinse body thoroughly to remove any residue.

## Towards the end of your shower

- Turn off water
- Apply the CHG soap to your torso (area where surgery will be performed), avoiding genital area as well as your eyes, ears, and face. Pay particular attention to abdominal area.
- Leave CHG on skin for 5 minutes.
- Turn the water back on & rinse your body thoroughly. (Do not use your regular soap after using CHG soap.)
- Do not shave area where the surgery will be performed.
- Pat yourself dry with a clean, soft towel.

**If you moisturize your body, wait a few hours before applying lotion after using CHG scrub.**



# How to Use CHG

**Where should you apply the CHG soap?**



**Please scrub the abdominal area only.**

# Preparing to Go to the Hospital

# What to Bring to the Hospital

## Important Paperwork

- Medical insurance information
  - On day of admission & for pre-operative testing as well
  - **Please bring all of your insurance cards (or copies of your cards front and back) with you on the day of admission.** For example: If you have Medicare please bring your Medicare card as well as your secondary insurance card.
- A **LIST** of all your current medications, i.e.,
  - Prescriptions and over-the-counter medications
  - Vitamins
  - Herbal supplements
  - Dosage and frequency of all medications
- List of allergies (medications, latex, food, etc)
- A photo ID, such as a driver's license or passport
- List of telephone numbers for your contacts

# Other Important Paperwork

## Advance Directives

### What They Are:

- Documents that plan in advance your wishes about treatment if you become unable – for a short or long period – to decide for yourself. If you do not have, you can complete one the morning of surgery

### Types:

- Health Care Agent/Proxy – A person appointed by you who will protect your treatment wishes
- Living Will – A document with written instructions given by you about your specific treatment desires

## Taking Action:

- If you have received a red handbook from your physician's office, please reference it for more specific information regarding Advanced Directives.
- If you have specific questions, please contact your social worker for assistance or for a copy of the form.
- The Health Care Proxy form can be found online by visiting the "For Patients" section of [nyp.org/cadc](http://nyp.org/cadc).

# What to Bring: Packing

## Do Bring

- Personal toiletries (toothbrush, comb, soap etc.)
- Slippers & Bathrobe
- Reading glasses
- Magazines/Books
- Loose fitting clothing for going home
- Notebook & pen to write questions or information

## Do Not Bring

- Jewelry or other valuables
- Your medications from home
- Electrical appliances (i.e., hairdryers, other plug-in items)

You may wish to bring a phone charger and/or a music device with earphones.

**Refer to the NewYork-Presbyterian Preparing for Your Stay Guide for full list.**

# What to Consider

- Visiting hours: Our visiting hours are 24 hours. However, rest is a priority for you and your neighbors. Please limit the number of visitors and be considerate about noise levels.
- Parking validation is available for day of discharge only.
- Private Duty Nursing: Call 212-746-4091
- Private Room: Call Admitting Department at 212-746-4250
- Guest Facility at Helmsley Medical Tower: Call 212-472-8400

# The Day Before Surgery



## **NYP/Weill Cornell Medical Center:**

- Call 1 business day prior to surgery. For Monday surgeries, call on Friday.
- Call between 4 p.m. and 7 p.m. to find out when to arrive and where
- For overnight (inpatient) surgery: 212-746-5299
- For ambulatory (same-day) surgery: 212-746-5111

# The Day Before Surgery

## **NYP/Lower Manhattan Hospital:**

- Patients receive phone calls from the NYP/Lower Manhattan Hospital operating room on the day before their scheduled surgery between 4:30 p.m. and 7 p.m.
- If your surgery is on a Monday, you will be notified on the Friday prior to their surgery.
- If you don't receive a phone call, you can contact the ambulatory surgery unit between the hours of 3-7 p.m. at 212-312-5546. After 7 p.m., you can contact the operating room desk directly at 212-312-5212.



# The Day of Surgery

# The Day of Surgery

**At your scheduled time, report to (in most cases):**

NYP/Weill Cornell Medical Center  
525 East 68th Street  
Greenberg 3 West, Same Day Surgery Center

- Personal belongings will be collected at 3 West and then taken to your room once it is assigned
- A Family Waiting Room is on the same floor as OR
- It's comforting to have family or friends with you while waiting. They may stay with you until you go to the operating room, at which time they will be directed to the Family Waiting Room.
- The Liaison Nurse will provide updates to families during the surgery
- The surgeon will speak to your family after surgery

# The Day of Surgery

## **NYP/Lower Manhattan Hospital**

**At your scheduled time, please report to:**

NYP/Lower Manhattan Hospital  
170 William Street or 83 Gold Street - 2<sup>nd</sup> floor.  
(There are two entrances to the hospital)

# What to Expect After Surgery

# What to Expect After Surgery

- Immediately after surgery, you will not be allowed to eat or drink anything by mouth (NPO).
- Liquids and solids will be introduced to your diet as you recover.
- After anesthesia, deep breathing is an important part of your recovery. You will be given an incentive spirometer to encourage deep breathing. It is recommended to use this 10 times per hour when you are awake.
  - Sitting up and walking (as tolerated) is recommended.



# What to Expect After Surgery

- You are expected to get out of bed with assistance within 12 hours after surgery.
- Slowly increasing activity (as your pain allows) is important for your recovery. If you are experiencing difficulty sitting up in a chair, getting out of bed independently, or walking, please notify your medical team.
- The team recommends that you plan activities in coordination with pain medication administration. For example, wait to take a walk around the floor until after receiving pain medication if pain is a limitation.
- Your vital signs will be checked multiple times after surgery to make sure you are recovering safely.
- You will be seen twice daily by members of the colorectal team.
- Your surgeon will ultimately approve all care provided, decides when you are ready to be discharged, and if you require any home care services.

# Pain Management

- Following surgery, you may have an epidural PCA (Patient Controlled Anesthesia) machine that delivers pain medication into the epidural space.
- You will be able to control when the medication is delivered, but not give yourself more than is safely allowed.
- If you decide not to have an epidural PCA, then pain can be managed with intravenous PCA as needed.
- Notify your nurse if you are not getting adequate pain relief.

Feel Empowered



# Feel Empowered



- You are an important part of the medical process. Do not hesitate write down your questions and ask them to the medical team.
- All personnel should identify themselves. If they do not, ASK
- All personnel should wash their hands with soap or Purell upon entering your room.
- Before any testing and administration of medications, your identity should be confirmed.
- If you require additional emotional support during your hospital stay or are concerned about managing post-surgery, please ask to speak with your social worker.
- Please notify your team if you would like to have pastoral services for supportive prayer, Sabbath candles or Communion.

# Discharge

## **In Most Cases, You are Ready for Discharge When:**

- Your vital signs are stable, including blood pressure, heart rate, and temperature
- Your pain is controlled with oral pain medication
- You are able to eat
- You are passing gas or have a bowel movement (or your stoma is functioning)
- You are able to get in and out of bed with minimal assistance

**Even though many team members will speak to you about preparing for hospital discharge, it is your doctor who will make the final decision regarding when you are ready for discharge.**

# Going Home

**Your unit's social worker will review the following with you and address any concerns:**

- Do I require home or rehabilitation services?
- Will my insurance pay for these services?
- How will I get my prescriptions filled?
- If you are known to a home care agency prior to admission, please provide the name and contact information.

**Other things to consider:**

- Ask your physician if you will be on a special diet.
- Call your doctor's office the day after you get home to schedule a follow-up appointment
- The hospital does not pay for discharge transportation services. Please arrange your transportation in advance.

# Home Instructions

- No heavy lifting (10 pound limit)
- Climbing stairs is allowed
- No gym workouts – only walking until cleared by your surgeon
- No driving until cleared by your surgeon
- Low fiber diet until advised by your surgeon
- If you are allowed to shower, pat surgical area dry
- No baths, no swimming

# Home Instructions

Call your surgeon's office if you experience any of the following symptoms:

- Fever > 101.5° F
- Nausea / vomiting
- Worsening pain
- Diarrhea with abdominal cramps
- Constipation
- Pain / drainage from your incision

# Once You Are Home

If you have any questions  
or concerns once you return home

**Please call your doctor's office or 212-746-6030**

If you require outpatient nutrition or social work services

**Please call 877-902-2232**

**Remember:**

Your surgeon's instructions supersede any  
material discussed in this document.



# Thank You

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