How Can I Prepare for My Surgery?

Medical Clearance

If you will be staying in the hospital after surgery or have multiple medical problems, you will need to see our pre-operative clinic for a physical and lab work for clearance within 30 days of surgery. Don't wait until the last minute as this process may take time and this can delay your surgery. The pre-operative clinic may want additional tests. If you see a cardiologist for your heart or a pulmonologist for your lungs, you may also need to see these doctors for clearance. For questions regarding pre-operative medical clearance, please contact Kristey McHenry, RN at (801) 213-7060.

Education

An important step to prepare for surgery is to make sure you understand the surgery. Do you understand the procedure and why it can help you? Do you understand the potential risks? Do you understand the alternatives and what is likely to happen if you do not have surgery? Do you understand the plan for anesthesia during the surgery? Do you understand the plan for pain management after surgery? Do you understand the instructions for after surgery? Do you understand the recommended limitations after surgery during the healing period? Do you understand when you will be able to return to work and school? Dr. Chalmers wants all of your questions to be answered before surgery.

Smoking

To most improve the healing environment, Dr. Chalmers recommends stopping use of all tobacco products in the period before, during, and after surgery.

Support

Find a family member or friend who can bring you to the hospital/surgery center the day of your surgery, stay at the hospital/surgery center during your procedure, and transport you home. You also will need someone to stay with you the first day and night.

Post-Operative Instructions

Notify your place of work or school about your anticipated recovery time. <u>Your work may require</u> <u>specific disability paperwork, please provide this to Dr. Chalmers before surgery and not the day of</u> <u>surgery.</u> Adjust your travel and social schedule. You will not be able to drive while wearing a sling or taking narcotic pain medications and you may need help with transportation. Plan ahead for transportation to a follow-up visit with Dr. Chalmers 2 and 6 weeks after surgery. If therapy is planned for after surgery, identify a physical therapist, make an appointment, and make a plan for transportation to therapy. If you have children, you may need to identify child care alternatives. If you have pets you may want to find someone to assist in caring for them. If you live alone, plan ahead for daily activities that commonly require both hands, such as cooking, cleaning, and laundry.

Staying in the hospital

Some patients undergoing surgery may have to stay in the hospital after surgery. If this is planned, pack a bag with everything you would like to have with you during your stay. Plan ahead for transportation home on the day of discharge. Most patients undergoing shoulder or elbow surgery go home the day of surgery.

The day before surgery

The surgical team will call you the day before surgery to notify you of the time of your surgery and to tell you when to arrive at the hospital/surgery center. If you have not heard from them by 5 PM, call 801-587-5373. Surgery is not always predictable, so the surgical time is an estimate and your surgery may take place later or earlier than scheduled.

The evening before surgery

Remember, do not eat or drink anything after midnight on the evening prior to surgery, aside from sips of water with medications. You may brush your teeth but do not swallow the water. If you take semiglutide, dulaglutide, or trizepatide, you may have to fast for longer prior to surgery.

The day of surgery

Bring your photo ID and insurance card. Also, bring your medications in their original bottles, a list of medications, allergies, surgeries, and medical problems for the anesthesiologist. Bring any advance directives and the co-pay/deductible amount if you have one. If you reside in a nursing facility, please bring the name, address, and phone number of the facility. If you usually wear contact lenses, wear glasses the day of surgery or be prepared to remove them. Wear comfortable, loose fitting clothing. A zip-up or button down shirt is often easier to put back on with a dressing and sling on the arm. Do not bring jewelry, money, or valuables with you to the hospital/surgery center. Remove all jewelry including rings before coming to the hospital. Once you are checked-in, you will change into a hospital gown. An IV will be placed in your non-operative arm. You will meet the anesthesiologist and they will tell you about the regional block. The block involves the injection of a long-acting local anesthestic near the nerves at the base of the neck while using an ultrasound machine to ensure that the medicine is being injected into the correct location without the needle damaging the nerves. With or without the regional block, all shoulder and elbow surgeries are performed under a general anesthestic, which means you will be completely asleep with a breathing tube during the procedure. General anesthestic can cause nausea, drowsiness, and a sore throat.

After surgery

Immediately after surgery, Dr. Chalmers will speak with any family members waiting during surgery, so they should remain in or near the waiting area. After surgery, patients will wake up in the post-operative recovery room. Unfortunately, because there are many patients and nurses in the recovery room, family members cannot be present there until the patient is awake. So it may be some time after surgery ends until you will be able to see your family member again.

Contact Info

- Primary Clinical Assistant Bri Arsenault: (801) 587 0063
- Surgery Scheduler Adriana Golden: (801) 585-7158
- After Hours Emergency Contact: (801) 581-2121 (Ask to speak with the orthopaedic resident on call)
- Practice e-mail: chalmerspractice@hsc.utah.edu