

GENERAL SURGERY

Name: _____ Date: _____

PREADMISSION INSTRUCTION SHEET

PLEASE READ CAREFULLY

1. You are scheduled for surgery at Community Hospital, *(date)* _____, *(day)* _____, *(arrival time)* _____.
2. The hospital is prepared for you to have your pre-op lab work, chest x-ray and ekg done within seven (7) days of the procedure. This can be done on a walk in basis at the outpatient entrance to the facility, which can be found at the back of the building by following the signs past the emergency room.
3. Please notify the nurse if you are taking a blood thinner such as aspirin, Plavix, or Coumadin. You should stop taking most blood thinners up to five days before your procedure and you should discuss this with the nurse. It is your responsibility to check with the doctor that has put you on this medication to ensure you are medically stable to be off from it for the required time prior to surgery.
4. The hospital will instruct you on taking other medication prior to surgery.
5. **DO NOT EAT OR DRINK ANYTHING SIX (6) HOURS BEFORE YOUR SURGERY.**
6. Failure to comply with the above instructions may force cancellation of your surgery.

COMMUNITY HOSPITAL
3100 SW 89TH STREET
ON 89TH BETWEEN MAY AND I44
(405) 602-8100

DR ALVIS
724 24TH AVE NW #220
NORMAN, OK 73069
(405) 321-6347

RESTRICTIONS

1. It is not recommended that you drive for 10-14 days after surgery depending on your pain level and the amount of medication needed for pain control.
2. Walk as tolerated. You are not bed bound or home bound as a result of this surgery. You are encouraged to increase your activity as tolerated. Rest when your body indicates you need to rest. You may find that you have a good day and excel that day, and then the next day you do not feel as well. This is normal and to be expected as you heal.

WOUND CARE

1. 24 hours after surgery (if you are home from the hospital) you may remove the dressing to your neck. The incision should be left open to air as much as possible.
2. The incision may have areas of drainage or bleeding. This is normal. Please cover the area that is draining with a small dressing to protect your clothing. **DO NOT COVER THE ENTIRE INCISION WITH A DRESSING.** Change the dressing every day if necessary.
3. The incision needs to be washed daily with soap and water once the dressing is removed. This does not require special soap. The best way to do this is in the shower. Be sure to avoid the shower spray hitting the incision directly.
4. **DO NOT TAKE A TUB BATH UNTIL AFTER YOUR TWO WEEK FOLLOW UP APPOINTMENT. DO NOT SUBMURGE THE INCISION IN DISH WATER, SWIMMING POOL AND ABSOLUTELY DO NOT GET INTO POND OR LAKE WATER.**
5. You may apply ice to the incision as needed to aid with swelling.

MEDICATION

1. Take your pain medication as prescribed. The first two weeks you may have increased pain due to the swelling from surgery and you may need to take your medication on a schedule.
2. **DO NOT TAKE YOUR MEDICATION IF IT IS NOT DUE.** If your medication is not working **YOU** are responsible for contacting the prescription line at the office to request a change. You may have an increase in pain after surgery, which is to be expected, but we can make changes to help with the pain if necessary.
3. Keep your medications secure. It is your responsibility to protect your medications. Typically, if your meds are lost, stolen, or used up too soon they will not be replaced. If you have any question about this, please contact the prescription line.
4. Dr Alvis is not in the office every day and therefore we need you to give us several days notice if you are going to run out of your medication. Many of the medications that he prescribes can only be dispensed on a written prescription and will have to be picked up at the office. We need your assistance in making sure you do not run out of medication.