

LITTLE FALLS HOSPITAL

SURGICAL PROCEDURES



LITTLE FALLS
HOSPITAL

Affiliated with Bassett Healthcare

Little Falls Hospital
140 Burwell Street
Little Falls, NY 13365

To learn more, call 315-823-1000 or visit
us online at www.lfhny.org

*Great care.
At home in our community.*

*“They made us feel like the most
important people there.”*

*—Dawn and Kasey
Dolgeville, NY*

**Little Falls Hospital Surgery
Services now include:**

- Ambulatory (Same Day) Surgery
- Ear, Nose, & Throat Surgery (ENT)
- General Surgery
- Gynecologic Surgery (GYN)
- Ophthalmologic Surgery
- Orthopedic Surgery
- Plastic Surgery
- Podiatric Surgery



LITTLE FALLS
HOSPITAL

Affiliated with Bassett Healthcare

taking great care
of our community



With new energy, new technology and a renewed commitment to the community, Little Falls Hospital is raising the standard of local healthcare. A 24-hour Emergency Room, staffed by board certified physicians, cutting-edge imaging services, orthopedic services and rehabilitation, ambulatory (same day) surgery. It's all part of an ongoing effort to keep top quality care in Herkimer County.

Inpatient Services

- **25-Bed Inpatient Unit & ICU**
- **34-Bed Skilled Nursing**
- **Swing Bed/Short Term Rehab Program**

Outpatient Services

- **24/7 Emergency Room**
- **Ambulatory (Same Day) Surgery**
- **Endoscopy Unit**
Colonoscopy
Gastroscopy
- **Medical Imaging (Radiology)**
Bone Density
CT Scan
Mammography-Screening & Diagnostic
Nuclear Medicine
Ultrasound
X-Ray
- **Infusion Therapy**
- **Laboratory**
- **Nutrition Counseling**
- **Rehabilitation**
Physical Therapy
Occupational Therapy
Rehabilitation (Continued)
Pulmonary Rehabilitation
Wellness Programs

Functional Capacity

- Evaluations
- Work Conditioning
- **Respiratory Care**
Pulmonary Function Testing

Specialty Services and Surgery

- **Anesthesiology**
- **Cardiology**
Echocardiography Stress Testing
Electrocardiography (EKG)
Holter Monitor
Nuclear Stress Imaging
- **Ear, Nose, & Throat Surgery (ENT)**
- **Electroencephalography (EEG)**
- **General Surgery**
- **Gynecologic Surgery GYN)**
- **Ophthalmologic Surgery**
- **Orthopedic Surgery**
- **Plastic Surgery**
- **Podiatric Surgery**
- **Women's Health**

we're here
right where
you need us



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Introduction

Thank you for choosing Little Falls Hospital. When you need surgery, you want care you can trust. Little Falls Hospital, with its experienced staff and the latest technology, is designed to meet your needs. Our system is planned to make your surgical experience go smoothly and quickly, while making sure you receive the best possible care. Our modern equipment and technology includes high-definition video equipment for laparoscopic and endoscopic procedures. The clinical staff has been specially chosen for their commitment to provide you and your family with a positive experience before, during, and after surgery.

Ambulatory surgery, sometimes referred to as same-day surgery, means patients have surgery and are back home the same day. Advances in technology and anesthesiology mean physicians can now perform complicated procedures with greater efficiency and less invasiveness to the patient. At Little Falls Hospital ninety-six percent of all operating room procedures are now done as ambulatory surgery. There are some procedures that require an overnight stay or admission to the hospital for a few days. This booklet is designed to give you the information you will need to make your operation proceed as effectively as possible. For all our patients, we work toward offering an experience that is efficient, high quality, and as comfortable as possible.

This booklet was written especially for you, the patient, and your family. We have attempted to answer the most commonly-asked questions about your upcoming surgery in this booklet. Please feel free to call if you have any questions. A list of phone numbers is available at the end of this booklet.

We hope this is all useful information, and we are always interested in improving our processes. If you have any suggestions, comments or concerns please feel free to contact the Director of Perioperative Services at Little Falls Hospital at (315) 823-5256.

everything is correct.

The nurses and doctors may ask you to answer the same questions up to four times. Do not be alarmed by the repetition. This is how we make sure that everything is correct.

Your surgeon will place his initials with a marking pen on the site where the procedure is to be done if it is a sided procedure. The mark will not rub off easily. It is very important your doctors and nurses see that mark after you go to sleep, but before the surgery begins.

After you are asleep, and just before the surgery starts, everyone in the operating room, will stop and take a short “time-out” to check one last time that you are the correct patient and they are doing the correct procedure on the correct part of the body.

You are the most important part of the healthcare team. By becoming informed and involved in making decisions about your care, you play a vital role in making your care safe.

Final Notes

The surgical team is concerned with providing proficient, effective, and timely care to patients and their families, before, during and immediately after surgery, with a continuous awareness of the human dignity of man, and his physical, emotional, psychological, and spiritual needs. Further, we believe that the surgical team promotes knowledge, and skills of its members, as a means of meeting technological and clinical progress in the health care field.

Finally, we believe that the surgery team must continually adjust its organization and functions in accordance with the recognized and acceptable standards of the total health care field and the community it serves.

Preparing For Surgery

If you have not already met with a nurse from Pre-admissions, one will telephone you prior to your surgery (within a week of the date). They will review pre-operative instructions and provide you with an arrival time for the day of your surgery. (*This time can change due to cancellations, emergent procedures and/or surgeon requests.*) If it is necessary to change the time of your surgery, you will be contacted by telephone; therefore, it is essential we have a current daytime phone number on file with us.

Some surgeries will not require diagnostic testing (labs, x-ray, EKG) prior to the day of surgery. Your surgeon will work with your anesthesiologist to decide what pre-operative work will be required. Most of these arrangements will be made when you are scheduled for surgery.

Your surgeon will order any tests required for your surgery. Your surgeon may, however, prefer that you have a medical and/or anesthesia consult done by another physician prior to your day of surgery. If your surgeon wishes you to have a medical consult, it will be arranged through the scheduling office.

You will need a pre-operative examination (history and physical) within 30 days of your surgery to make sure you are in the best possible health for your surgery. Additional consultations may be scheduled as deemed necessary depending on your medical status.

It is always helpful for you to make a list of questions to ask the pre-admissions nurse, and the person performing the pre-operative physical exam.

In the days before surgery, report an illness such as a sore throat, severe cold, fever, flu, dental surgery, emergency room visits, or other physical changes to your surgeon.

A shower is suggested the evening before, or the morning of your surgery. You may brush your teeth and gargle the morning of surgery.

Ambulatory Surgery Unit

Whether you are going home the day of your surgery or being admitted, your care will begin in the ambulatory surgery unit. You will be asked to sign a consent form for your procedure and change into a patient gown. You may be asked to remove your glasses, contacts, dentures and hearing aids. Your nurse in ambulatory surgery will discuss what you should expect for the day. If you are going home the day of your surgery discharge instructions will be discussed with you. The morning of your surgery, we will monitor your vital signs and obtain any additional tests that are required. You will meet the anesthesia staff and the operating room nurses that will be caring for you. At this time you will have the opportunity to discuss the type of anesthesia that is recommended and any alternatives and your particular choices for anesthesia. This is also a good time to share past experiences with anesthesia and any fears you might have.

The Day of Surgery

NOTHING to eat or drink past midnight unless directed otherwise by the pre-admissions nurse. (This includes coffee, tea, gum, breath mints, and candy.) Please arrive at the registration area as scheduled. We ask that you arrive earlier than your surgery is scheduled, to allow enough time for completion of admission procedures, examinations, and consultation with the anesthesiologist. Lab tests could include a pregnancy test. Please remember to bring all of your insurance cards, any x-rays from outside physicians that your surgeon may require, and any advanced directives.

Any medications that you take everyday at home will

special things with you.

If you or your family are very anxious about your surgery, we can offer you a tour of the operating room prior to your procedure. To schedule a tour call 315-823-1000, extension 4258.

Safety

Your safety is our top priority. The doctors and nurses take many steps to make sure your surgery goes as planned. You, as a patient, can play a vital role in making your care safe by becoming an active, involved and informed member of your health care team. Within a week of your surgery you will either receive a phone call or come in and see a nurse from our hospital. The nurse will ask about your health history. This helps us plan ahead for your arrival.

On the day of your surgery before putting on your identification bracelet make sure the information on it is correct.. Check your name for correct spelling, and your birth date. Tell a hospital employee if anything is wrong; you will be issued a new, corrected bracelet.

Review all of the information on the consent before you sign it. You or your legal guardian must sign a consent form before surgery can take place. Make sure your name, and the procedures are correct. If you have any questions or concerns, please ask for clarification. If you don't understand, ask again.

Hospital employees will ask you to tell them your name, birth date, and the surgery to be performed and the location on your body of the surgery or procedure. If it is appropriate, you should point to the part of the body. Expect us to check your ID bracelet when you tell us your name and birth date. Don't be alarmed if your doctor asks you to tell him/her your name. This is how he/she makes sure

consequences.

You must be considerate of the rights of other patients, Little Falls personnel and property. If you have any questions about our rules and regulations, you may ask your nurse or other health care personnel for more information.

You are ultimately responsible for assuring all financial obligations for the health care provided are met as promptly as possible.

Pediatric Rights

You are important. We want to get to know you. We will tell you who we are. And we will call you by your name. We will take time to listen to you. We won't talk about you in your room or outside your door unless you know what is happening. We will honor your privacy.

You and your family are important. We will work together to make you as safe and comfortable as possible.

We will explain things to you and speak in ways that you can understand. You can ask what is happening to you and why. Someone from your family can be with you when people from the hospital are explaining things to you.

You will be taken care of by doctors and nurses and other people who know about children and teenagers.

You have the right to know all of the people who take care of you in the hospital.

We will work together with you and your family to make your stay in the hospital as short and comfortable as possible.

When you are in the hospital, you might feel scared, mad, lonely, or sad. You can let people know how you feel. It is okay to cry or complain. You can have your family with you as much as possible. When this is not possible the other people caring for you will explain why. You can keep your

be discussed by the pre-admission nurse and the anesthesia department. They will inform you of what medications to take the day of surgery.

You may bring a few family members or friends to wait with you prior to your surgery. Please do not bring children or a large number of visitors. We realize waiting is difficult, and we will do all we can to make this time a comfortable experience.

For visitors the cafeteria is available for food and drink.

Please leave jewelry, charge cards, and other valuables at home. DO NOT wear make-up, nail polish, or hairpins. WEAR comfortable, loose fitting clothing. ALL jewelry or body piercing must be removed. This means all rings, as swelling of the finger compromises its circulation, and we may have to cut the ring to remove it for surgery, or during surgery. If you wear contacts, glasses or hearing aids, bring their storage case.

If you are going home the same day as your surgery, you MUST have a responsible adult available to drive you home and stay with you for the first 24 hours after your surgery. Your surgery may be cancelled if you do not have someone to drive you home.

If you are going to be admitted to the hospital, you may want to bring a few personal items to make your stay more comfortable.

If your child is having surgery bring an empty baby bottle/sippy cup if he or she is still using one. A favorite toy, blanket or pacifier may be comforting and can go with your child to the operating room. (No metal objects please.)

Anesthesia

Anesthesia is an important part of your surgery. An

anesthesiologist is a physician who specializes in administering anesthesia. He/she will review your medical history before your surgery. You will also speak with the anesthesiologist in the ambulatory surgery unit before your surgery. You may also see a CRNA (Certified Nurse Anesthetist) as part of the anesthesia team caring for you.

The anesthesia team will ask specific questions regarding your previous experiences with anesthesia, and explain the recommended anesthetic method and any alternatives to you. This is a good time to ask any questions about anesthesia if you have not already had your questions answered, and to share your preferences for type of anesthesia, if there are alternatives that are equally safe for you.

The anesthesia team will also explain exactly what is going to happen to you once you are transferred to the operating room, and what to expect before and after anesthesia. For some surgical procedures you can be awake without feeling anything in the operative area, and can even choose to watch some forms of surgery that are done using a “scope”, like arthroscopy of the knee.

There will be a member of the anesthesia staff with you throughout your time in the operating room—they will never leave your side. We employ the latest, state-of-the-art monitoring methods to assure your comfort and safety throughout the duration of your anesthetic.

The kinds of anesthesia that may be used include:

General anesthesia- you will go gently to sleep at the beginning and wake up in the operating room at the end of the case, although you usually will not remember waking up there, but will remember your short stay in the post-

housekeeping, personal care, and errands.

Things Patients Need to Know

In accordance with our mission of aspiring to deliver the highest quality of care in a way that respects the value of all human life, the information in this booklet, along with the New York State booklet that is in your packet is provided to help patients become aware of their rights and responsibilities. The New York State booklet contains information about advance directives and your rights as a hospital patient as well as a variety of other pertinent information.

Your responsibilities include:
You are entitled to exercise all of your rights as a patient and citizen, however, you are also responsible for adhering to the rules of Little Falls Hospital. Your responsibility to adhere to the rules is for your protection, as well as for the protection of the other patients.

You must provide us with a complete and accurate medical history and current information relating to your health. We cannot adequately treat your illness or injury unless you tell us what is wrong and notify us of any significant changes in your condition.

If you have any questions or concerns about a contemplated course of treatment, you must ask your physician or nurse for more information. Otherwise, we assume you understand your plan of treatment and have given an informed consent.

You have the responsibility to follow the schedule of testing and treatment when possible. If you refuse to follow the plan of treatment recommended by the physician, you do so at your own risk and we are not responsible for the

discomfort, but we are committed to relieving you of as much pain as possible. You will be asked to rank your pain pre-operatively. (Cosmetic surgery-no pain, broken bone-significant pain.) We will use the same scale postoperatively to assess your pain. We use a 0-10 pain scale and medicate you appropriately to relieve you of as much discomfort as possible. Receptor nerve cells in and beneath your skin sense heat, cold touch, pressure and pain. You have thousands of these receptor cells, most sense pain and the fewest sense cold. When there is an injury to your body, in this case surgery, these tiny cells send messages along nerves into your spinal cord and then up to your brain. Pain medication blocks these messages or reduces their effect on your brain.

Sometimes pain may be a just a nuisance, like a mild headache. At other times, such as after an operation, pain that doesn't go away- even after you take pain medication- may be a signal that there is a problem. After your operation, your nurses and doctors will ask you about your pain because they want to know if something is wrong. Be sure to tell your doctors and nurses when you have pain. Ask for pain medications when pain first begins and before treatment and therapies that may cause pain. NEVER worry about being a "bother."

Help At Home

If surgery is in your future, there's a good chance you'll have it done on an outpatient basis or will have a shorter stay in the hospital than in years past. Today's surgical technology enables patients to leave the hospital sooner than before. As a result, many patients who undergo surgery recuperate at home instead of the hospital. While a shorter hospital stay is good news for many people, it also creates special needs. During recovery from surgery many patients can benefit from assistance with meals,

anesthesia recovery unit or PACU after transfer from the operating room.

Regional anesthesia-usually used for operations on the extremities and the abdomen. For lower extremities either a spinal or epidural procedure may be used, and you will feel no pain for the duration of the procedure. For upper extremity surgery a regional block in the armpit or at the base of the neck, or an intravenous block in the arm may be used to produce profound numbness in the arm and hand. Sensation and movement will gradually return in the PACU after surgery. For some major procedures, an epidural catheter may be left in for a day or two after surgery and used for pain control.

Monitored anesthesia care (MAC)-you will be made very comfortable with sedatives so that you are sleepy but arousable, and are given local anesthesia in the area of the operation. You will probably not remember much of what went on in the operating room afterwards, but will recover very quickly.

Local anesthesia-some very minor procedures can be done without any anesthesia or sedation, with the surgeon using local anesthesia in the surgical area.

Whatever type of anesthesia you and your anesthesia staff decide on, you will be monitored throughout the procedure with an electrocardiogram (ECG) consisting of three sticky pads on your chest, a blood pressure cuff, and an oxygen sensor on a finger (rather like a soft clothes pin). All of these monitors will be applied in the operating room.

The Operating Room

It is cool in the operating room to prevent germs or bacteria from spreading. You will be offered a warmed blanket for your comfort. For your protection, all persons in

the operating room will wear surgical gowns, hats masks, and gloves.

Many pieces of equipment will be in the operating room. This will include a safety strap across your legs to remind you that the bed is narrow. The surgical light overhead will be bright. You may hear music in the background.

Visitors in the Operating Room

There are times when it is appropriate to have visitors with you pre-operatively or postoperatively, or to have observers in the operating room itself. Little Falls Hospital has very strict policies assuring that you receive the best care while fulfilling a commitment to allow for the education of students in healthcare field programs affiliated with our hospital. Although uncommon there are special circumstances when “therapeutic visitors” are permitted entry in the operating room to provide emotional support.

As always, if you have questions or concerns about any of the above material, do not hesitate to discuss them with your surgeon, pre-admission nurse, or anesthesia staff.

Recovery Room

Once your surgery is completed, you will have a recovery phase. If you go to the recovery room, your stay will depend upon the type and duration of anesthesia that you have received. If you had some sedation and local anesthetic, you may return to the Ambulatory Surgery Unit directly from the operating room. The average stay in the



Recovery Room is one hour. In the Recovery Room, you will have your vital signs and oxygen level monitored continuously. You will receive medication for discomfort. You will be asked to rate any pain using a 0-10 scale. (Zero being no discomfort and 10 being an intense level of discomfort.)

Once through the recovery phase, you will return to the Ambulatory Surgery Unit for discharge or will be transported to your room in the hospital. If you are staying in the hospital overnight, your family will meet you in your hospital room. If you are going home, your family/sponsor will meet you in the Ambulatory Surgery Unit. A staff member will instruct your family where to meet you.

Following Discharge

For ambulatory surgery patients you will be going home the same day as your surgery. It is not unusual to feel slightly sleepy or dizzy after anesthesia and medications. For your safety, do not drive, drink alcohol or run machinery for 24 hours. Try to delay making any important decisions until you fully recover. A nurse will call you a day or so after your surgery to see how you are progressing. Please call your surgeon’s office if you have any questions/concerns following discharge.

As always, if there is an emergency following your surgical procedure call immediately or go to the nearest emergency room for assessment of your condition.

Pain and Pain Control

We recognize that surgical procedures are not common events for many people. We also recognize that because this may be your first experience you most likely do not know what to expect.

Usually you can expect some postoperative