





Instructions for Your Gynecological Surgery

Scheduling and Getting Ready for Surgery

When and where will I have my surgery?

Surgeries are performed at the **Robert Wood Johnson University Hospital** (RWJUH) in New Brunswick.

A surgical scheduler will call and help you to:

- Book a date for your surgery. Please allow 2 business days for the surgical schedulers to confirm the date with the hospital.
- Schedule pre-admission testing (PAT).
- Obtain your doctors medical clearances if requested by your surgeon.
- Provide a date for your post-operative visit in the surgeon's office.
- Provide details of surgery and other appointments you need.
- Call surgical scheduling with any questions at either 732-235-7817 or 732-235-9865.

You will receive a call from Robert Wood Johnson University Hospital on the evening before your surgery giving you the time you will need to arrive at the hospital and where to go. (Please Note: If your surgery is scheduled for a Monday, you will receive a phone call on the Friday evening before).

Do I need to obtain insurance authorization?

No. Once your surgery date is confirmed, we will work with your insurance company to obtain authorization. We will work with your healthcare team to get all the information about your surgery to your insurance company for approval.

What is a medical clearance?

Medical clearance is a physical exam to make sure that you do not have any medical problems that put you at risk from having safe surgery. Not every patient needs a medical clearance. Your surgeon will let you know if you need medical clearance(s) based on your medical history and/or the result of your pre-admission testing.

If you need medical clearance(s):

- You will need to schedule your clearance appointment(s) the same day you are seen in our office. It is important to schedule your appointment(s) as soon as possible in order to avoid any delays in having your surgery.
- Call us with your clearance appointment(s) as soon as they are scheduled. Your surgery may be postponed if the surgeon does not have the medical clearance at least 5 days before surgery.
- Medical clearance notes can be faxed to 732-235-8828.

Pre-Admission Testing (PAT)

What is pre-admission testing (PAT)?

Pre-admission testing is REQUIRED for all patients before surgery. You will require:

- Bloodwork
- Chest x-ray
- Electrocardiogram (EKG) and
- A meet with a member of the anesthesia department within 4 weeks before your surgery.

You will be given a special soap (Hibiclens® Antiseptic/Antimicrobial Skin Cleanser) to wash with the night before and the morning of your surgery.

- A surgical scheduler will give you an appointment for your PAT.
- We will send the results of your PAT to your doctor(s) prior to your appointment for medical clearance.

Pre-Admission Testing is completed at: 10 Plum Street, 3rd Floor New Brunswick, NJ 08901 732-937-8746 Parking is available on-site

Will I need disability/FMLA paperwork?

Your surgeon will talk with you about what to expect during your recovery after surgery. Let your healthcare team know if you need disability or FMLA paperwork filled out for your job.

- Disability and FMLA forms are available through your employer.
- Complete the demographic section (name, age, address) before giving the paperwork to the healthcare team to fill out.
- Forms will be filled out after surgery. It can take up to 1 week for your healthcare team to complete the forms.
- Completed forms will be given to you or your employer.
- You can bring your disability/FMLA forms to:
 - o The Rutgers Cancer Institute Reception Desk (at the main entrance)
 - OR fax them to 732-448-7894 to the attention of the GYN department.

Do I need to donate blood?

Talk with your surgeon if you have any questions about donating blood.

RWJUH Blood Services is located at the Rutgers Clinical Academic Building on 125 Paterson Street, New Brunswick, NJ 08901. The phone number is 732-235-8100.

The Days Before and the Day of Surgery

How do I prepare for my surgery?

- Do not make drastic changes in your lifestyle (diet, exercise) unless instructed by your surgeon or primary doctors.
- Stop smoking 3-4 weeks before your surgery. Smoking increases the risk of wound and breathing complications.
 - Let us know if you need help to stop smoking or call the Tobacco Dependence Program at 732-235-8222.
- Stop drinking alcohol. Please speak with your healthcare team if you need help.

Should I continue taking my medicines before surgery?

- Do not stop taking any prescribed medicines without talking to your healthcare team. Talk with your surgeon about the medicines you take. Some medicines may need to be stopped 2-7 days before surgery.
- Stop all herbal supplements and vitamins 7 days before surgery.
- Review the attached Medicine Checklist Before Your Procedure with your surgeon.

Can I eat or drink before my surgery?

- Do not eat after midnight the day before your surgery. (For example, if your surgery is on Monday, stop eating on Sunday at 11:59 p.m.)
- You will need to drink the Ensure® Pre-Surgery Clear Carbohydrate the night before surgery and 2-3 hours before surgery. You will get the drink and instructions during your PAT visit.
- The morning of your surgery, take medicines as directed with a small sip of water.

What do I do before I come to the hospital for surgery?

- Read and follow the Hibiclens® Antiseptic/Antimicrobial Skin Cleanser instructions for use when showering the morning of your surgery.
- Remove all jewelry including your wedding ring and leave them at home.
- Remove all nail polish, contact lenses and makeup prior to admission for surgery.
- Bring glasses and hearing devices with you to the hospital.

How will my day be on the day of surgery?

- Go to the Same Day Surgical Waiting Area when you get to the hospital.
- Valuables (glasses, phone) can be left with your family member, support person or security team in same day surgery.
- After surgery, your surgeon will update your family member or support person.
- You will be in the recovery room for about 2 hours.
- The recovery room nurses will let your family member or support person know when you can have visitors.
- After you recover, you will either be discharged home with written instructions or admitted to your room in the hospital.

After Surgery While in the Hospital

Can I eat after surgery?

Yes. Your surgeon will order a diet for you based on your recovery and any health issues.

- You will have a menu and a phone in your room to order each meal.
- You should eat in a chair and not your bed. Ask the hospital staff for help before getting out of bed.

Can I get out of bed after surgery?

Yes. Getting out of bed and walking the day after surgery will help your recovery and avoid complications.

- Ask the hospital staff for help to get out of bed.
- Plan to walk after each meal.
- Physical therapy may come and help if you need it.

Will I have pain after surgery?

Yes, you will likely have pain after surgery. Managing your pain will help you to walk comfortably, take deep breaths and rest easily. Your surgeon will decide the best way to manage pain after surgery. Some of the ways to manage pain are:

- Oral pain medicines
- Intravenous (IV) pain medicines
 - IV medicines can be given as needed or continuously. The type and frequency will be determined by your clinical team
- Regional blocks
 - This is a long-lasting injection (up to 3 days) given either before surgery or immediately after.

When can I be discharged?

There are 3 main goals for you to be discharged:

- <u>Safety</u>: We will make sure you are safe to either go home or to a rehabilitation center if needed.
- <u>Bowel function</u>: We will make sure you can eat and that you have good bowel sounds, passing gas, or passing stool.
- <u>Pain control</u>: We will make sure that your pain is controlled prior to being discharged. You will be given prescription(s) for medicine (pills or patch that you put on your skin) that can be taken at home if needed to control pain.

After Surgery While Out of the Hospital

How will I feel after surgery?

It is normal to have:

- Decreased appetite for 2 to 3 weeks after surgery.
- Discomfort from the surgery.
- Vaginal spotting or bleeding at any time up to 6 weeks after surgery. You may use sanitary pads for vaginal bleeding and discharge.
- Reduced bowel movements. Take stool softeners as directed to avoid constipation.

Will I need homecare?

- If you need home care, it will be arranged prior to your discharge from the hospital by the case manager. You will be given the name and contact information from the case manager.
- The home care agency will call you within 24-48 hours after getting home.

What can I eat?

You can go back to your regular diet from before surgery, but do not force yourself if you don't feel like it. It may take at least 2 to 3 weeks for your appetite and bowel habits to return to normal. Do not make drastic changes in your diet during the first 6 weeks after surgery.

Can I exercise after surgery?

In general, we will ask you to remain active and not spend the day in bed. You can take naps if needed. Depending on your surgery, your surgeon will give you some restrictions and let you know when you can resume normal physical activity.

- Do not lift anything greater than 5 lbs. (a standard bag of flour) until cleared by your surgeon.
- You may climb stairs. Hold onto the railing and climb them carefully.

- Refrain from hard activity (running, weightlifting, yoga, golfing, bicycling) until you are cleared by your surgeon (usually 6-8 weeks).
- Continue to do your incentive spirometry (breathing machine).

When can I have sexual intercourse after surgery?

- If you were told to have pelvic rest, do not have sex for 6 to 8 weeks or until cleared by your surgeon.
- Do not use tampons or douche for 6 to 8 weeks or until cleared by your surgeon.

When can I start driving again?

- If you had a laparoscopic or robotic procedure, you should not drive for at least 3 weeks. You may be the passenger in the car, but not the driver.
- Do not resume driving if you are still having significant abdominal pain and are still taking pain medicines.
- When you do return to driving, someone should drive with you for the first time.
- If you have had an open procedure, do not drive until you are cleared by the doctor. It will be a minimum of 6 weeks before you will be cleared to drive.

What pain medicine will I need at home?

- You will be prescribed pain medicine like you were given in the hospital to keep you comfortable at home. You will receive instructions on how to take these medicines.
- The goal is that you can be comfortable to move around (even if slowly), take deep breaths and rest when needed.
- If you are taking narcotic pain medicines, you may feel tired or drowsy. **Do not drive** a motorized vehicle or operate heavy machinery.

When will I have a bowel movement?

This is different for each patient. If you are passing gas and you are able to eat without nausea or vomiting, your bowels are working well. It may take up to a week to have a bowel movement, especially if you had a bowel prep before surgery.

Narcotic pain medicine may cause constipation. You should take a stool softener such as docusate (Colace®) or senna (Senokot®) while taking your narcotic medicine. These medicines can be purchased over the counter and will help prevent constipation. The goal is to have a bowel movement every day or every other day.

Can I take a shower?

- You may shower as soon as you arrive home. The dressing is "WATERPROOF" and can get wet.
- Do not take a bath or sit in a tub of water until your surgeon tells you it is safe to do so.

How do I take care of my wound?

You will need to:

- Remove the dressing you left the hospital 7 days after your surgery unless told otherwise by your healthcare team.
- You do not need to cover the incision after taking off the dressing.
- If there is an area of oozing or drainage you can cover it with gauze to prevent staining of your clothes.
- When you shower let water and soap run over the incision to keep it clean.
 - Do not scrub the wound

- Pat it dry carefully
- Do not let water hit the incision directly to avoid discomfort
- Staples are usually removed in the office 7-14 days after surgery.
- You may have small incisions covered with Dermabond® (glue). The glue will start to come off in 7-10 days. Do not pick at it.

What can I expect at my post-operative appointment(s)?

- Remove staples if needed
- Discuss surgical findings
- Review pathology results
- Establish plan of care
- If you need to change or make an appointment, call 732-235-7615.

When to call my healthcare team.

Call 732-235-2465 and select the prompt for "symptoms or side effects" if you have:

- Shortness of breath or chest pain
- Worsening pain or pain that is not controlled by pain medicine
- Increased swelling in one or both of your legs, with or without pain
- Stopped passing gas or don't have a bowel movement for 48 hours
- Nausea, vomiting, abdominal distension
- Increased redness, tenderness, pain or swelling around the surgical site
- Vaginal bleeding that is bright red or have bleeding like a period (spotting is normal)
- Chills and/or fever of 100.4° or greater
- Pus-like drainage along the incision
- Opening up or separating of the surgical site

Important Patient Telephone Numbers

| New Patient Appointment | To make an initial appointment, or if you have not been seen at Rutgers Cancer Institute of New Jersey in the last 2 years | 844-CANCER NJ |
|--|---|--|
| Return Patient Appointments | To make, reschedule or cancel a follow-up appointment | 732-235-7615 |
| Nurse Help Line | To ask about medications, symptoms and/or side effects | 732-235-2465 prompt 2, 1 |
| Prescription Refill | To request a prescription refill. | 732-235-2465 prompt 2, 2 |
| Social Work | To ask about community resources, support groups, or speak with a social worker about coping, stress management, decision making or communication | 732-235-6792 |
| Hospital Admissions | To ask about your planned admission. | 1-844-RWJBH4U (1-844-795-2448 option 4) |
| Financial Counselors | To ask about your deductible, copayment, out of pocket expense, or network benefits. 732-235-8067 | |
| Surgical Scheduling | To ask about your surgery date or pre- admission testing | 732-235-6194 |
| Medical Records | To get copies of your medical record (chart) | 844-835-1241 rutgerscancerinstnj@cioxhealth.com |
| Billing, Rutgers Health Group | To ask about your bill from Rutgers Cancer Institute of New Jersey | 866-470-6626 |
| Billing, Robert Wood Johnson University Hospital | To ask about your bill from Robert Wood Johnson University Hospital | 877-221-7809 |



Scan with smart phone or device

Instructions Before Your Surgery: BOWEL PREPARATION

Bowel Preparation:

In order to prepare for the surgery, you will need to buy the following items.

| The | ese are available over-the-counter at pharmacies: |
|-----|--|
| | 1 bottle of Miralax®, closest to 255 grams |
| | 4 Dulcolax® tablets, 5mg each |
| | 1 bottle of 64oz Gatorade® drink |
| Ge | t the following prescriptions from your healthcare team (Physician or Nurse Practitioner): |
| | Metronidazole (Flagyl®) 500mg |
| | Neomycin 500mg 2 tablets (1gm) |
| ТН | IE DAY BEFORE YOUR SURGERY (Date): |

- You can have a light breakfast, for example, two scrambled eggs before 9 AM. Then, stop eating regular food and begin a clear liquid diet (see the Clear Liquid Diet information sheet).
- Mix and stir the entire bottle of Miralax® with 64oz of Gatorade® in a separate container. This solution tastes better if it is chilled.
- At 9 AM, begin drinking 8oz of the solution every 15 minutes until the solution is completely finished. Drink each glass quickly rather than sipping for optimal results. Finish the solution by 11:30 AM.
- Wait one hour after completing the solution, by 12:30 PM, take all 4 Dulcolax ® tablets at once with water.
- At 1 PM take your first dose of oral antibiotics (neomycin and metronidazole)
- At 3 PM take your second dose of oral antibiotics.
- Continue to drink at least 8oz of clear liquids every hour until bedtime.
- Call the healthcare team if you have trouble with this preparation or if your stool's not becoming clear liquid.
- At 9 PM take your final dose of oral antibiotics.
- Before going to bed, drink 1 bottle of Ensure® Pre-Surgery Clear Nutrition Drink. This was given to you at your pre-admission testing appointment. Follow bottle instructions or use as directed.
- DO NOT EAT OR DRINK AFTER MIDNIGHT UNLESS INSTRUCTED BY YOUR HEALTHCARE TEAM. THIS INCLUDES GUM AND HARD CANDY.

| Day of Surgery | (Date): |
|----------------|---------|

- You may take your medicine(s) with a small sip of water as instructed by your healthcare team.
- Drink the Ensure® Pre-Surgery Clear Carbohydrate drink 2-3 hours before the scheduled start of your surgery. You received this at your pre-admission testing appointment.
- After the Ensure® Pre-Surgery Clear Carbohydrate drink, you cannot have anything to eat or drink until after surgery.

If you are in need of immediate assistance, please call 732-235-2465 and select the option that best meets your needs.







Medicine Checklist Before Your Procedure

Your healthcare team will review your current list of medicines, vitamins and supplements and advise you when to stop taking them.

_____ days before procedure stop taking the following medicines:

- Aspirin or medicines containing aspirin such as: acetylsalicyclic acid, Excedrin[®], Percodan[®], Alka-Seltzer[®], Pepto-Bismol[®]
- Herbal supplements such as Vitamin E, Omega 3, Fish oil, green tea, gingko biloba
- Steroids such as dexamethasone, prednisone, prednisolone
- Anti-inflammatory medicines or medicines that have an anti-inflammatory ingredient in it such as:

| celecoxib (Celebrex®) | ketoprofen (Orudis®) | naproxen sodium (Aleve®/Anaprox®) |
|--|--------------------------|--------------------------------------|
| diclofenac (Voltaren®) | ketorolac (Toradol®) | piroxicam (Feldene®) |
| hydrocodone bitartrate/acetaminophen (Vicodin®) | meloxicam (Mobic®) | sulindac (Clinorial®) |
| ibuprofen (Advil®, Midol®, Motrin®) | misoprostol (Arthrotec®) | |
| indomethacin (Indocin®) | naproxen (Naprosyn®) | |

days before procedure stop taking the following blood thinning medicines such as:

| abxicimab (Reopro®) | dipyridamole (Persantine®) | prasugrel (Effient®) |
|----------------------------------|----------------------------|------------------------|
| aggrenox (Aspirin, Dipyridamol®) | drotrecogin alfa (Xigris®) | rivaroxaban (Xarelto®) |
| apixaban (Eliquis) | enoxaparin (Lovenox®) | ticagrelor (Brilinta®) |
| clopidogrel (Plavix®) | eptifbatide (Integrilin®) | ticlopine (Ticlid®) |
| dabigatran (Pradaxa®) | fondaparinux (Arixtra®) | tirofiban (Aggrastat®) |
| dalteparin (Fragmin®) | pletal (Cilostazol®) | warfarin (Coumadin®) |

| Additional/specific instructions: | |
|-----------------------------------|--|
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| | |

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