

Preparing for your hospital procedure

Booking your hospital procedure

During the initial consultation Dr Boorer will let you know if your procedure will need to be performed in hospital. She will work with you to decide which hospital is most appropriate for your procedure, and she will discuss potential dates for your procedure.

Once you have decided to go ahead with your procedure, please notify Thao, our practice manager to secure your date. She will post the necessary hospital admission paperwork to you. Once you complete this paperwork please post it directly to the hospital, which will then take care of the logistics regarding your admission. Please contact us if you require any assistance with completing the hospital paperwork.

Day-stay versus overnight hospital stays

Patients who undergo Day-stay surgery are discharged home from hospital on the same day as the procedure. Most minor procedures are performed as Day-stay admissions.

Patients who undergo larger or more complex procedures may be required to remain overnight in hospital for one or more days. Dr Boorer will discuss your expected length of stay during the initial consultation.

Please note that you are not permitted to drive yourself home after a hospital procedure.

Pre-admission preparation

The majority of patients having hospital procedures will be required to fast (cease eating and drinking fluids) for 6 hours prior to their procedure to avoid anaesthetic complications. The fasting time for children and babies is 6 hours for food and formula, and 4 hours for breast milk and water.

The hospital will phone you one business day prior to your procedure to confirm your fasting requirements and time of admission. At this time they may also confirm your personal and insurance details, as well as any special needs that you may have.

If you have not heard from the hospital by 4pm on the day prior to your procedure please contact the Admissions department of the relevant hospital.

Medications

It is important to let Dr Boorer know about all the medications, vitamins and herbal supplements that you are taking as some of these may need to be ceased or their doses may need to be altered prior to surgery. The main medications that may interfere with surgery are medications for diabetes, anti-inflammatory medications (such as Nurofen, Voltaren and Celebrex), and blood thinning medications (such as Warfarin, Aspirin and Plavix). Should it be required, Dr Boorer will provide you with written instructions regarding how to manage changes to your routine medications.

What to bring to hospital

We recommend that you leave all valuables such as jewelry and large sums of money at home. We also recommend that you avoid wearing excessive makeup and nail polish.

Please bring to the hospital:

- All Relevant x-rays and scans
- All regular medications
- Your Medicare / health insurance / veterans affairs card and details
- Relevant Workcover information
- Comfortable clothing for wearing at discharge
- Pyjamas and toiletries for overnight stays
- Books, magazines etc
- Any special postoperative garments that Dr Boorer has recommended

Admission details

On arrival your paperwork will be reviewed by a nurse and you will be asked to change into a hospital gown. Dr Boorer and the anaesthetist will come to see you prior to your procedure. Your significant others may stay with you until you are transferred to the operating theatre. Parents are usually allowed to accompany their child into theatres, and may stay with their child for overnight admissions in a fold-out bed.

Hospital procedures: post-operative information

Recovery room

Immediately after your procedure you will be transferred to the recovery ward until the effects of the anaesthetic have worn off. Your vital signs and operative site will be closely monitored. When your condition is satisfactory you will be transferred back to the Day stay ward or your overnight room (usually 30-45mins later). Parents are permitted to sit with their child in recovery.

Discharge from hospital

If you are a Day stay patient you will be discharged by the nurse when your condition is satisfactory (1-2hrs after your procedure). If you are staying overnight, Dr Boorer will usually see you each morning until you are ready to be discharged.

On discharge you will be given, where necessary, instructions regarding:

- Management of wounds and dressings
- Surgical garments
- Appropriate physical activity and positioning
- Pain medications
- Special diets
- Follow-up arrangements

Please note that you are not permitted to drive yourself home after a hospital procedure. It is preferable to have an adult with you in the first 24hrs following an anaesthetic if this is possible.

Follow-up appointment

Your discharge information will indicate when Dr Boorer needs to see you again (usually 5-12 days post-op). Please phone the rooms to make this appointment on 02 9252 8200.

Post operative care of the procedural site

Try to keep the procedural site still and avoid excessive activity in the first 48hrs.

Facial and head wounds:

Avoid stooping, bending, straining or heavy lifting; sleeping propped up on several pillows can minimise swelling and bruising.

Hand wounds:

Keep above heart level

Leg and foot wounds:

Elevate feet when possible and minimise walking in first 48hrs.

Back wounds:

Avoid excessive activity as these wounds can break open when strained

Other areas:

You will be given specific instructions

Swelling

Bruising and swelling can be minimised where appropriate by applying an ice pack in the first 24hrs. You will be instructed on how to do this.

Bleeding

It is normal to experience a small amount of bleeding following your procedure. While in hospital this will be monitored by the nursing staff. If bleeding occurs after discharge keep the affected part still, elevate if possible and apply pressure with a clean flannel or gauze continuously for 10 minutes.

Pain

During your procedure pain medications and local anaesthetic will be given to minimise immediate post-op pain. During the recovery period some pain is inevitable and this will be managed with the appropriate strength pain medications. These may be given orally or directly into the IV drip. You will not be discharged until pain is manageable with oral pain medications. You will be provided with pain medications or a prescription on discharge with instructions on how to manage your pain at home.

It is common to have a sore throat after general anaesthetic. This usually lasts 2 days.

It is important not to drive, drink alcohol or operate machinery while on prescription pain medication.

Nausea

Some patients experience nausea or vomiting after general anaesthetic or sedation or as a side effect of pain medications. If this has occurred previously please let the anaesthetist know. There are a variety of pain medications and anti-nausea medications available so if you are experiencing nausea post-op let your nurse or Dr Boorer know so that it can be managed appropriately.

Sports and social activities

At the initial consultation Dr Boorer will advise you of what to expect in regards to bruising and swelling so that you can make the necessary adjustments to your work and social activities. Similarly you will be advised if there are any restrictions on sports, swimming or other physical activities following your procedure.

Smoking

You are advised to avoid smoking and use of nicotine patches for 3 weeks prior to and after your procedure as nicotine significantly reduces blood flow to the wound and can impair healing and increase the risk of infection.

Contact us

Please phone the rooms immediately (02 9252 8200) if:

- You have strong or increasing pain
- There is more bleeding than expected
- The wound is red and painful, appears infected or has opened up
- You have a fever
- You have any other concerns or problems

After hours Dr Boorer can be contacted via the Plastic Surgery Registrar at the Prince of Wales Hospital on 02 9382 2222 or via the hospital you were discharged from. If you are unable to reach Dr Boorer please see your GP or in the event of an emergency attend your nearest hospital Emergency Department.