Pre-operative instructions for adult patients undergoing Planned Neurosurgery

Patient: ____________________________________________________________

Surgeon: ___________________________________________________________

Care Coordinator: ___________________________________________________

Surgery date: _______________________________________________________

Procedure: _________________________________________________________

CONTACT INFORMATION

During business hours, please call UCLA Neurosurgery: 310-825-5111. Ask to speak with your surgeon.

After business hours, please call the UCLA page operator: 310-825-6301. Ask to have the neurosurgical resident on call contacted for urgent questions.

Pre-Operative Evaluation and Planning Center (200 Medical Plaza): 310-794-1106 or 310-794-1085. Please call between the hours of 3:00 p.m. and 5:00 p.m.
1. IN PREPARATION FOR YOUR SURGERY

Do I need to see any other doctor before my surgery?

☐ See your primary care physician (PCP). Laboratory tests and history and physical may need to be done within 30 days of surgery. Verify with your care coordinator if he/she will schedule the appointment(s).

☐ Inform your surgeon if you are under the care of a medical specialist (for example a cardiologist, pulmonologist, hematologist-oncologist, or other medical specialist). Additional pre-operative evaluations may be necessary from these specialists.

Do I need to identify a contact person before surgery?

☐ We require that you have a responsible adult available to accompany you home. This does not include public transportation, a taxi driver or other ridesharing services. Your surgery will be cancelled if you do not have a responsible adult available to take you home at time of discharge.
  • Transportation should be arranged prior to your arrival to the facility.

How do I manage my medications before surgery?

☐ If you are taking blood thinners such as Plavix (Clopidogrel), Coumadin (Warfarin), Pradaxa (Dabigatran), Rivaroxaban (Xarelto) or Apixaban (Eliquis), you will have to stop taking these medications well in advance of your surgery date. Most patients taking aspirin (or Plavix) will have to stop taking it at least 10 days before surgery. Please contact your surgeon’s office immediately if you are unsure of what to do.

☐ Diabetes medications  Please contact your PCP for instructions because you may not need these medications the morning of your surgery.

☐ Blood pressure medications If you take this in the morning, take it with only a sip of water the morning of surgery. If you take it in the afternoon or evening, take it the day BEFORE surgery.

☐ Seizure medications If you take this in the morning, take it with only a sip of water the morning of surgery.

☐ DO NOT BRING MEDICATIONS FROM HOME UNLESS SPECIFICALLY INSTRUCTED.

☐ Complete the Admission Medication History Form if you have not already done so. Please specify the DOSE and FREQUENCY for each medication, including supplements and herbal medications. Bring this form with you to the Admissions Desk when you are checking in.
PLEASE ask your surgeon when you should stop taking the medications below.

**ASPIRIN OR ASPIRIN-CONTAINING PRODUCTS**
- **Over the counter**
  - Alka Seltzer, Aspirin regimen Bayer, Ecotrin, Excedrin or Excedrin extra strength, Momentum Backache Relief, Vanquish Analgesic Caplets
- **Prescription**
  - Easprin, Disalcid, Plavix, Salflex, Trilisate

**NON-STEROIDAL ANALGESICS (NSAIDS)**
- **Over the counter**
  - Advil, Aleve, Motrin, Nuprin, Orudis KT
- **Prescription**
  - Mobic (Meloxicam), Celebrex, Anaprox Nalfon, Arthrotec Naproxyn, Cataflam Oruvail, Clinoril Ponest Kapseals, Daypro Relafen, Disalcid Salflex, Ec-Naproxyn Tolectin, Feldene Toradol, Indocin Trilisate, Lodine Voltaren

**HERBS**
- Echinacea, St. John’s Wort, Ephedra, Valerian, Feverfew, Vitamin E, Fish Oil, Vitamin C (large doses above the RDA), Garlic, Gingko Biloba, Ginger, Ginseng, Green tea, Kava kava

If you are unsure if your medication(s) contain aspirin, please consult your pharmacist.

Is there any special skin preparation before surgery?
- Please do not cut your hair or shave your back/neck before surgery.
- An antiseptic skin cleanser liquid called CHG (chlorhexidine gluconate) is recommended. Please see informational sheet on page 8.

When is the last time I can eat or drink before surgery?
- Do not eat anything (including chewing gum or candy) after midnight or at least 8 hours prior to your surgery check-in time. You may ONLY have sips of clear liquids (water, Pedialyte, or Gatorade) as needed to take medications until 5:00 am on the morning of surgery. You may brush your teeth and rinse your mouth, but do not swallow any of the water.

What if English is not my first language?
- A representative from Interpreter Services is always available at no cost. Please notify the Pre-operative Evaluation and Planning Center at 310-794-1106 or 310-794-1085 the day before your surgery if you will need an interpreter.
2. PRIOR TO YOUR SURGERY DATE

What do I do if I feel sick before surgery?

☐ If you have a fever, flu, or any other concerning symptoms, please notify your surgeon’s office as soon as possible prior to your surgery, as your surgery may need to be postponed.

Can the planned surgery start time change?

☐ Your doctor’s office will give you a preliminary time your surgery is scheduled to take place. One business day before your surgery—usually after 3:00 pm—you will be contacted by a registered nurse from the UCLA Ambulatory Surgery Center in Westwood who will confirm your arrival time.

• Please note that since changes may occur in scheduling, your confirmed surgery time may be different from the preliminary scheduled time. Please refrain from scheduling activities around your surgery, as the confirmed time may change from morning to afternoon, or vice versa.

• If you have not received a call by 5:00 pm the day before your surgery, please call the UCLA Ambulatory Surgery Center in Westwood at 310-794-1085.

• If your surgery is on Monday, you will receive the phone call the preceding Friday.

• Please tell the nurse if you recently had or currently have a cold or fever. Anesthesia is not safe if you have recently had a cold or respiratory tract infection.

• Please report any injuries, infection at surgical site, tooth infection, or other condition that may require postponement of your surgery.

• Please let the nurse know if you will need wheelchair assistance.

What do I bring to the surgery center?

☐ Please bring an ID, your cellular telephone, insurance cards and a minimal amount of cash or one credit card, which may be needed to pay for parking, purchasing medications or insurance co-payments.

• We are unable to replace lost or misplaced personal items. Therefore, we recommend that you bring only essential items such as glasses, dentures, hearing aids, canes, walkers or wheelchairs to our facility.

• If you wear contact lenses or glasses, you may be asked to remove them before surgery. Please bring a case for safekeeping.

• Leave valuables such as jewelry including rings, watches, earrings and body piercings at home or with your family member. All jewelry must be removed prior to surgery.

• Wear comfortable, loose-fitting clothes and low-heeled shoes. Depending on your procedure, you may have bulky bandages that will require loose-fitting clothes when you go home.

• Please refrain from wearing makeup and fingernail polish. Nail polish may interfere with monitoring equipment during your surgery.

• Please report any injuries, infection at surgical site, tooth infection, or other condition that may require postponement of your surgery.
3. THE DAY OF YOUR SURGERY

How do I get to the Ambulatory Surgery Center in Westwood?

☐ See page 7 for directions and maps.

Where do I check in?

☐ The Surgery Center is located in the 200 Medical Plaza building at UCLA, Westwood Plaza, Los Angeles, CA 90095. 6th Floor, Suite 660. Check-in at the reception desk.
  • When you check into the Ambulatory Surgery Center, the receptionist may ask you to fill out additional paperwork. At this time, any remaining financial concerns may be addressed.

What paperwork will be verified with me in the Preprocedure Treatment Unit?

☐ Surgical Informed Consent and Blood Transfusion Consent: If you have not already done so, you will need to sign these documents.

☐ Anesthesia Informed Consent: You will also be asked to sign an Informed Consent document for your anesthesia.

☐ It is hospital policy to perform pregnancy testing in females age 10-53 years old.

What happens after I check in?

☐ After checking in at the reception area, you will be escorted to the Pretreatment Unit where a nurse will ask you to change into a hospital gown and begin the preoperative assessment. The nurse will ask you pertinent health questions that are necessary for a complete evaluation.
  • An anesthesiologist will discuss the appropriate anesthetic options with you and answer your questions.
  • An operating room nurse and your surgeon will speak to you to confirm the details of your surgery prior to going into the operating room.
  • If you have not already done so, you will be asked to sign the Consent for Procedure or Surgery and the Consent for Anesthesia forms.
  • When the preoperative assessment is complete and all consents have been signed, you will be escorted into the surgical suite where your surgical team—consisting of your surgeon, anesthesiologist and surgical nurses—will stay with you throughout the procedure.

Where will my family or friends wait during the surgery?

☐ Patient care needs require that we limit the number of people allowed in the Pretreatment Unit. Only one person is allowed to accompany you in the preoperative area. Minors may have two accompanying adults.
  • During your surgery, all family members and friends will be asked to wait in the reception area or the Family Waiting Room.
What happens immediately after the surgery is completed?

- Following surgery, you will be transferred to the Post Anesthesia Care Unit (PACU). In the PACU, you will be closely monitored as you recover from your anesthetic.
  - Your surgeon or nurse will let your relatives or friends waiting in the Family Waiting Room know that the procedure has been completed and will let them know when you can have visitors.
  - One person at a time is allowed to visit with you in the PACU area.
  - It is not recommended for small children to visit the PACU.
  - The length of stay in the PACU will depend on many factors, including pain control, comfort and instructions from your surgeon.
  - If you are scheduled to remain overnight, you will continue to be monitored throughout the night. The PACU cannot accommodate friends and family after 8:00 pm or overnight.

4. PREPARING FOR DISCHARGE

What do I need to know about being discharged from the surgery center?

- During your recovery time in the PACU, your nurse will give you or your family written instructions that may include how to care for your surgical site, what to expect during your recovery and assistance with walking.
  - Be sure to follow the discharge instructions given to you by your nurse at the Ambulatory Surgery Center. This will ensure the best possible recovery from your surgery or procedure.
  - Please ask questions regarding your care at this time.
  - If medications are ordered, they may be available to pick up from the 200 UCLA Medical Plaza 4th Floor Pharmacy located two floors below the Ambulatory Surgery Center in Suite 426. You have the option to use a pharmacy of your choice.
  - We require that you have a responsible adult available to accompany you home. This does not include public transportation, a taxi driver or other ridesharing services. **Your surgery will be cancelled if you do not have a responsible adult available to take you home at time of discharge.**

- Your team will be reviewing all the important information points with you prior to your discharge. You will also be receiving a discharge packet that contains all the information for your safe return home.
Important Information Regarding Your Surgery

Post-operative transportation
We require that you have a responsible adult available to accompany you home. This does not include public transportation, a taxi driver or other ridesharing services. Your surgery will be cancelled if you do not have a responsible adult available to take you home at time of discharge.

• For children having surgery, we recommend having two responsible adults to accompany the child home.

• Transportation should be arranged prior to your arrival to the facility.

Follow-up
If you have any immediate concerns about your medical condition once you arrive home, such as fever, chills, severe nausea, vomiting, bleeding or severe pain, contact the Ronald Reagan UCLA Medical Center page operator by calling (310) 825-6301 and pressing 1. The operator will help you contact your surgeon or the designated resident on call. If it is an emergency, dial 911 or report to the nearest emergency room.

• The day after your surgery or procedure, you will receive a call from one of our nurses to make sure you are well on your way to recovery. If your surgery was on a Friday, you should expect a call the following Monday morning.

Share your experience
Again, thank you for choosing the UCLA Ambulatory Surgery Center in Westwood for your upcoming surgery. To help ensure that we are providing the best care possible, please provide us with some details about your experience.

Contact information
UCLA Ambulatory Surgery Center in Westwood
200 Medical Plaza, Suite 660
Los Angeles, California 90095
Telephone: (310) 794-1106 or (310) 794-1085
Fax: (310) 794-1511

PARKING INFORMATION
Parking is available in the parking garage at 200 UCLA Medical Plaza. There is a fee to park. The Ambulatory Surgery Center cannot validate parking or reimburse the parking fee.

UCLA MAPS
Shower with Chlorhexidine Gluconate (CHG) soap to prevent infection

Instructions:
You should shower with CHG soap a **minimum of five times** before your surgery, or more often as directed by your surgeon. Showering several times before surgery blocks germ growth and provides the best protection when used **at least 5x in a row**.

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**How to shower with CHG soap:**

1. Wash your hair, face, and body, with your normal shampoo, conditioner and soap. Rinse completely.
2. Turn off the shower or step out of the bathwater.
3. Pour a quarter size amount of liquid CHG soap onto a wet, clean washcloth and apply to your entire body FROM THE NECK DOWN (DO NOT use CHG on face, hair, or genital area).
4. Rub the soap filled washcloth over your entire body – apply more soap as needed.
5. Turn on the shower or return to the bath and rinse the liquid soap off your body.
6. Towel dry.

**Repeat steps 1-6 each time you shower**

**CAUTION:**
- CHG is not to be used on the head, face, or genital area
- CHG should be kept away from the eyes, ears, or mouth
- CHG should not be used if you are allergic to any of the ingredients in the preparation

**Important reminders:**

- Do not use any other soaps or body wash when using CHG. Other soaps can block the CHG benefits.
- After showering, do not apply lotion, cream, powder, deodorant, or hair conditioner.
- Do not shave or remove any body hair below the neck (facial shaving is permitted).
- CHG is safe to use on minor wounds, rashes, burns, and over staples and stiches.
- Allergic reactions are rare but may occur. If you have an allergic reaction, stop using CHG and call your doctor if you have a skin irritation.
- If you are allergic to CHG, please follow the bathing instructions above using an over-the-counter regular antibacterial soap instead of CHG.
- CHG soap is available to purchase at most drug stores.

UCLA Health
Neurosurgery
Patient Discharge Instructions:  
**Pulse Generator Replacement**

**Diet**
- You may resume the type of diet you had before surgery. Eating a well-balanced diet is important for proper wound healing.

**Medications**
- Please remember to bring your home medications with you to your visit.
  - **Home Medications**: You should restart all your home medications, including all of your movement disorder related medications, EXCEPT ASPIRIN immediately after surgery.
  - **Blood Thinners**: If you were taking aspirin, warfarin, or coumadin before the surgery, you should restart these medications beginning 7 days after surgery (unless otherwise instructed by your surgeon).
  - **Pain Medications**: Narcotics are not routinely provided.
    > Please use Tylenol (acetaminophen) and Advil (ibuprofen) for pain on an as needed basis.

**Overview of Daily Activities**
- Recovery rates are individual; however, it is a good idea to balance your activities with enough rest. It is normal to feel that you have less energy.
- **Lifting**: No heavy lifting (more than 10 pounds) for two weeks after this surgery.
- **All Other Activity**: You should increase your activities slowly within limits set by fatigue. Resume as tolerated, unless instructed otherwise by the physical and occupational therapists while in the hospital. The best exercise after surgery is walking. You should begin walking short distances immediately after surgery and gradually increase the distance. This will allow you to increase overall strength and endurance. You may climb stairs as soon as you feel like it. Be sure to use the handrail. You may resume sexual intimacy when you feel well enough, but do not overexert yourself.
- It is safe to use household appliances, computers, and cellular phones with the system implanted. It is also safe to pass through metal detectors although the system may set the alarm off.

**Resume to Work/Driving/Air Travel**
- **Driving**: You may drive the next day after surgery.
- **Working**: You may return to work one week after surgery.
- **Air Travel**: You may fly 24 hours after surgery.

**Wound/Suture Care**
- Your wound should stay covered with the surgical dressing for 72 hours after surgery.
- After 72 hours, you may remove the original dressing and leave the wound open to the air. If you prefer, you can apply a nonadhesive bandage over the wound as well.
You may shower and wash your wound beginning on 4th day after surgery. You should not however scrub your wound. We recommend that you shower with someone in the bathroom to assist you.

The sutures or staples will be removed at your first follow-up appointment (10-14 days after surgery).

Please call your surgeon’s office or the neurosurgery resident on-call (after hours) if there are questions or concerns about your wound or if there is redness, drainage, breakdown or other signs of infection.

Follow-up

We do not schedule routine post-operative visits after generator replacement.

You will however receive a call from Dr. Pouratian’s team one week after your battery replacement to confirm if you would like a follow-up appointment scheduled. You could also call his office if you would like an appointment scheduled sooner.

If you are concerned or if you would like for Dr. Pouratian to take a look at your wound, please contact his office. You also have the option to take a picture and email this to him at npouratian@mednet.ucla.edu.

You must have regular follow-up every 3 months, or at least every 6 months with you neurologist.

Precautions

You will be given an identification card prior to discharge. This identification card will help you in cases where a metal detector may be set off by your implant. If you are not given one before you leave the hospital, remind the nurse or the person discharging you.

Please notify our office before undergoing any of the following tests and/or equipment:
- Magnetic Resonance Imaging
- Electrocautery
- Diathermy (Deep heat therapy)
- Ultrasound

Please call your surgeon’s office or the neurosurgery resident on-call (after hours)
- If you experience any neurological changes including weakness, numbness, tingling, headache, seizure, or any change in level of consciousness

If you have any questions regarding your medications, please call your neurologist.

Signs to Watch for at Home

Always try to call your doctor first if you are experiencing any of the symptoms below:
- Onset of severe, persistent headache not relieved by medication and rest
- Onset of increased drowsiness, confusion, stiff neck, or nausea and vomiting
- Any new onset or worsening of visual problems
- Any new onset or worsening of speech or swallowing problems
- Any new onset or increased weakness, numbness or tingling
- Any new onset of or increased seizures
- Worsening tremors
- Persistent chills; new onset of fever > 101 F
- Any redness, swelling, drainage, heat, or pain around your incision

For life-threatening emergencies that cannot wait, please go to the nearest Emergency Room for immediate evaluation or dial 911.
During business hours, please call UCLA Neurosurgery: **310-825-5111**. Ask to speak with your surgeon.

After 5:00 PM, please call the UCLA page operator: **310-825-6301**. Ask to have the neurosurgical resident on call contacted for urgent questions.