York and Scarborough Teaching Hospitals
NHS Foundation Trust

What you need to know when coming into hospital for surgery

Information for patients, relatives and carers

Please scan the QR code below to view an online copy of this leaflet or visit https://www.yorkhospitals.nhs.uk/seecmsfile/?id=1916:

ⓘ For more information, please contact the number on your appointment letter or one of the useful contact numbers enclosed

Introduction

We understand that having a surgical procedure can be a worrying time for you, your relatives and those who care for you, it is our aim to provide you with the information you may require prior to your admission to aid you planning for you stay in hospital and prepare you for after your procedure.

You can find more information on the below websites:

- Royal College of Anaesthetists (RCoA) series, and large print copies, from their website www.rcoa.ac.uk/patientinfo
- Centre of Perioperative Care www.cpoc.org.uk

Pre-assessment (prior to surgery)

Before your surgery we need to know about your general health. You will be asked to complete a health questionnaire. The questionnaire can be in paper format or accessed by a QR code or text message.

It is vital this questionnaire is completed as it assessed by our pre-assessment team who then determine the next steps to organise a date for your procedure.

After completing the questionnaire, a pre-assessment nurse may need to contact you to ask further questions, discuss current medication and plan further tests such as blood tests or ECG if indicated.

This can be a good time to ask questions and talk about any worries that you may have.

The preassessment team may need to give advice regarding your current medications and if to stop them prior to surgery. It is important these instructions are followed as failing to do say may lead to your operation being cancelled.

If you have specific questions regarding your surgery or procedure you should discuss this with your surgeon.

Before you come into Hospital for Surgery

Please read the appointment letter you have received carefully.

Please follow any instructions given in your appointment letter about when you can have your last food and drink before your operation. It is important that you follow these instructions, as we may have to cancel your operation if these are not followed correctly.

Please remove all jewellery and body piercings at home. You do not have to remove your wedding ring, but it will need to be covered with tape once you arrive.

We cannot guarantee your belongings will be safe for the duration of your stay so therefore ask you do not bring any valuables or large amounts of money with you.

We will ask you to sign a form saying that you agree that we cannot guarantee to keep your belongings safe.

What do I need to bring into hospital?

You will need to bring:

- A dressing gown and a pair of slippers
- Book, magazines or something else to keep
- you occupied.
- A mobile phone or mobile device, if you have one
- Any mobility aids that you need, such as walking stick.
- All medications in the original packaging
- (not controlled drugs) even if you are not staying in hospital overnight.

  If your procedure is in Bridlington Hospital, please bring all medication including controlled drugs.

- Any hearing aids and/or glasses or contact lenses you use and a container to store them in.
- Contact numbers for your relatives or carers and your transport home.
- A small amount of money, including change
- for parking.
- A bag, such as a holdall, which can be secured in the event your belongings need to be moved between wards.
- If you have Obstructive Sleep Apnoea and use a CPAP machine or a mandibular splint you must bring this into hospital with you.

Preparing for an operation

As soon as you know that you may be having an operation, it is helpful to think about how you can be as healthy and fit as possible.

Flu Vaccination
Flu vaccination season typically runs from September to February, and it is important to consider seeking a flu vaccination when available through your GP, NHS app or pharmacy to stay protected. The flu, or influenza, is a contagious respiratory illness caused by viruses that can lead to serious complications, especially for those with underlying health conditions. To ensure maximum protection, please make sure to get your flu vaccination at least two weeks before your scheduled procedure.

Smoking
If you smoke, you may wish to consider giving up or reduce the amount you smoke before your operation. Smoking can reduce the amount of oxygen in your blood and increase the risk of breathing and heart problems during and after your procedure.

Patients, visitors and staff are not permitted to smoke anywhere on our hospital and community premises including the grounds and gardens.

If you plan to quit smoking, it is a good idea to get help from a counsellor or support service. You are four times more likely to give up successfully if you have this kind of help.

Free services in your area include:

NHS North Yorkshire Stop Smoking Service – for group or one-to-one help and advice from trained experts.

- **North Yorkshire residents** call North Yorkshire Living Well on 01609 797 272.
- **City of York residents** call 01904 553 377. Let them know you are going to have an operation so they can give you priority.
- **Bridlington and Driffield patients** can call Xyla on 03302369102.

NHS Website – NHS stop smoking services can help you quit - NHS (www.nhs.uk) You can download the NHS Quit Smoking app or call the free Smokefree National Helpline on **0300 123 1044.**

Alternatively, your local **Pharmacist or GP Practice** can put you in touch with a registered Stop Smoking Advisor.

NHS sites are Smokefree and now offer specialist Tobacco Dependency Support for all patients admitted. Go Smoke Free | Humber & North Yorkshire | NHS Stop Smoking (www.swapandstop.co.uk).

Your weight

Many of the risks of having an operation are increased if you are very overweight. Your GP can give you advice about weight loss and put you in touch with an organisation that can help. Slow, supervised weight loss is likely to be most successful. Tools such as this programme may be of help NHS England » The NHS Digital Weight Management Programme: https://www.england.nhs.uk/digital-weight-management/

Weight loss medications are used by many people, if you are taking a weight loss medication, please ensure you documented this on your health questionnaire.

Alcohol

If you drink more than the recommended amount, you should consider cut down before an operation. Advice can be found at www.nhs.uk/livewell/alcohol/pages/alcohol-units.aspx.

Changes in your health before your operation

Please contact the waiting list team if you become unwell or have started taking a new medication prior to your admission date. The waiting list will seek advice from the clinical teams, and you will be contacted regarding advice.

Your teeth
If you are having joint replacement surgery, you must have a dental check-up prior to pre-assessment if you have not had a check-up in the past six to 12 months.

Ideally if you have any loose teeth, you should visit your dentist to see if they can be secured before an anaesthetic. This reduces as far as possible the chance of any damage to your teeth.

On the day of your operation, your anaesthetist will want to know which teeth are loose, or if you have crowns or a bridge.

Admission times and fasting information

When you arrive on the ward you will be greeted by a member of the ward team before you are seen by the surgeon and anaesthetist.

Arrival times vary depending on the time of your surgery, please follow the instructions on your letter.

Your admission letter will give you a clear explanation of when to stop eating and to only take clear fluids, please follow this instruction. If you do not follow this instruction, you may run the risk of cancellation of surgery.

If you are having only a local anaesthetic (with no sedation), please eat and drink as normal before your admission.

The exact time of your surgery is not known. If you are on an all-day list, your surgery could take place at any time up until 5pm. The ward staff will keep you hydrated with water.

You can leave the ward to go for a walk, but you must let nursing staff know you are leaving the ward.

Can someone come with me?

A relative or friend is welcome to accompany you to hospital however once you are booked in, they will be asked to leave, the exception to this if you have a carer as they will be able to wait with you until you go for your operation, however this must be arranged prior to the day. Please discuss this with the waiting list team when they discuss dates of operation with you.

If your operation requires a stay in hospital, then your friends and relatives will be able to visit you after your operation.

On your day of admission

There will be some waiting around before you go to theatre. It is a good idea to bring something to do. When you arrive on the ward the staff will give you an estimated time for surgery and discharge however this can be subject to change, the nursing staff will keep you informed throughout your stay.

Before surgery you will be seen by a surgeon who will discuss your surgery and confirm consent for surgery and an anaesthetist who will discuss the type of anaesthetic and members of the ward team who will complete admission paperwork. You will have the opportunity to ask any questions regarding surgery and anaesthetic at this point.

The choice of anaesthetic depends on many factors, and these will be discussed with you on the day of surgery.

The Anaesthetist's role and the types of anaesthesia used

Anaesthetists are doctors with specialist training who are responsible for giving your anaesthetic and for your wellbeing and safety throughout your surgery.

Your anaesthetist will meet you before your operation. They will:

- Ask about your health.
- Discuss types of anaesthesia with you and find out what you would like, helping you to make choices.
- Discuss with you the benefits, risks and your preferences.
- Agree a plan with you for your anaesthetic and pain control, to make your experience as calm and pain free as possible.

The choice of anaesthetic depends on:

- Your operation and any medical problems.
- Your particular risks.
- Your preferences and the reasons for them.
- The recommendation and particular skills of your anaesthetist.
- The equipment, staff and other resources at our hospitals.

Some types of anaesthesia

Anaesthesia stops you feeling pain and other sensations. It can be given in various ways and does not always make you unconscious.

Local anaesthesia involves injections which numb a small part of your body. You stay conscious but free from pain.

Regional anaesthesia e.g. a spinal or epidural or ‘arm block’. This involves an injection that numbs a larger or deeper part of the body. You stay conscious, or receive some sedation, but are free from pain.

Spinal Anaesthesia involves an injection of local anaesthetic drug into the small of your back to numb the nerves from your waist down to your toes.
The numbness usually lasts for two to four hours.

General anaesthesia gives a state of controlled unconsciousness. It is essential for some operations. You will be asleep and feel nothing.

Sedation gives a sleep like state and is often used with a local or regional anaesthetic. Sedation may be light or deep, and you may remember everything, something or nothing after sedation.

Risk and General Anaesthesia

Modern anaesthetics are very safe. There are some common side effects from the anaesthetic drugs or the equipment used, which are usually not serious or long lasting.

Risks will vary between individuals and will depend on the operation and the anaesthetic technique used.

Your anaesthetist will discuss with you the risks that they believe to be more significant for you.

Very Common - more than one in 10
Feeling sick (nausea), shivering, thirst, sore throat, bruising, becoming confused (delirium).

Common – between one in 10 and one in 100
Pain at the injection site, minor tongue or lip injury, chest infection.

Uncommon – between one in 100 and one in 1,000
Tingling, numbness, pain or weakness (minor nerve damage).

Rare – between one in 1,000 and one in 10,000
Peripheral nerve damage that is permanent, blurred vision, eye irritation or pain due to a small scratch (corneal abrasion) or dry eyes, damage to teeth, severe allergic reaction (anaphylaxis).

Very Rare – one in 10,000 to one in 100,000
The risks we all take in normal life, such as road travel, are actually far greater than the risks below.
Awareness during an anaesthetic (one in 20,000), Loss of vision (one in 100,000),
Death as a direct result of anaesthesia (one in 100,000)

> If you wish to read more detail about these events and risks, please see the individual risk leaflets available on the Royal College of Anaesthetists' website: www.rcoa.ac.uk/patient-information/patient-information-resources/anaesthesia-risk/risk-leaflets

The Operating Department

Once the theatre team are ready to carry out your procedure you will be taken to the theatre suite.

You will be asked a series of questions and be asked to confirm your surgery to ensure safe care is provided.

You will be then escorted into the theatre by a theatre team member to have your anaesthetic and procedure carried out.

The Recovery Room

You will be closely monitored following your surgery and the team will ensure that you are as comfortable as you can be as you come round from the anaesthetic.

Depending on what type of anaesthesia you have been given the recovery nurse can provide you with water, tea or coffee.

When you are comfortable and recovering well, a nurse will transfer you to a ward on your bed or trolley.

What will I feel like afterwards?

How you feel will depend on the type of anaesthetic and operation you have had, how much pain-relieving medicine you need and your general health.

General anaesthetics can cause side effects which are generally short-lived (last a few hours).

You may feel tired or even exhausted for some days after the operation. After major surgery this can last weeks or even months.

Pain Relief after surgery

Good pain relief is important, and some people need more pain relief than others. It is much easier to relieve pain if it is dealt with before the pain is too much.

Pain relief can be increased, given more often, or given in different combinations. Pain relief can be given in tablet, liquid or injection form whilst in hospital.

It is important you are honest with the nursing team and tell them if you are in significant pain,

Pain Relief after leaving hospital

Although you may be given a supply of painkillers when you leave the hospital, it is sensible to buy some over-the-counter painkillers to have ready at home.

Getting home

You must arrange for someone to collect you from hospital. You must not use public transport or drive yourself within 24 hours of having a general anaesthetic.

In some cases, transport can be arranged but this must be arranged by patients in advanced and cannot be arranged by the hospital. The transport phone number is 0330 678 4000. Eligibility is based on specific criteria.

At home

You must arrange for a responsible adult you can rely on to stay with you overnight following your operation. Follow any special instructions that the hospital staff may advise about your medication, dressing, mobility etc.

Martha’s Rule

Martha's Rule supports the early detection of deterioration by ensuring concerns of patients, families, carers and staff are listened to and acted upon. It gives you the right to request a rapid review if you are worried about deterioration.

You can call or text:

- York: 07345 456277
- Scarborough : 07345 456223

Accessibility

Do you need any help to access our services? We have lots of ways to support you. Visit our accessibility hub to find out more: www.yorkhospitals.nhs.uk/access

Useful contact numbers

York Hospital patients:	
Ward 27 Admissions	01904 726027
Day Unit and Extended Stay Area	01904 726010
	01904 721265
Scarborough Hospital patients:	01723 342209
Bridlington Hospital Patients:	
Short stay and day surgery	01262 423134
Orthopaedic surgery	01262 423110

Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact:
Ward Manager Claire Jackson, Pre-assessment Unit, York Hospital, Wigginton Road, York, YO31 8HE, telephone 01904 726027 or email claire.jackson71@nhs.net.

Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email yhs-tr.patientexperienceteam@nhs.net.

An answer phone is available out of hours.

Leaflets in alternative languages or formats

If you would like this information in a different format, including braille or easy read, or translated into a different language, please speak to a member of staff in the ward or department providing your care.

Patient Information Leaflets can be accessed via the Trust's Patient Information Leaflet website: www.yorkhospitals.nhs.uk/your-visit/patient-information-leaflets/

This publication includes text taken from The Royal College of Anaesthetists' (RCoA) leaflet 'You and Your Anaesthetic", 5th Edition, Feb 2020 and the General Anaesthetics Risks and Side effects infographic 2024. The RCoA has not reviewed this as a whole. The original leaflets can be found at www.rcoa.ac.uk/patientinfo

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