



WOMEN'S HEALTH
ADVANTAGE

OUTPATIENT SURGERY INSTRUCTIONS

Please call Surgery Scheduling at **260-432-4400 (OPTION 5)** with any questions.

Outpatient

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| Cervical cerclage | Laparoscopy (diagnostic or operative) |
| Dilation and curettage (D&C) with or without hysteroscopy | Cervical conization |
| Endometrial ablation (Novasure, Minerva) | Perineal or vaginal surgery |
| Hysteroscopic or laparoscopic myomectomy | Polypectomy or hysteroscopic polypectomy |
| Hysteroscopy | TOT/Bladder sling |
| Laparoscopic sterilization | Robotic surgery (hysterectomy or operative) |

For more information on these and other surgeries and procedures, please visit our website at heradvantage.com. If you are unable to access the Internet, please request information pamphlets.

If you have not already done so, we invite you to sign up for the Patient Portal for use before and after surgery. This is available to you as a time-saving and convenient alternative to calling and leaving a voice message for us.

The Patient Portal on our website is not to be used in the case of an emergency. For an emergency, you are advised to call 911 or go to the emergency room at Dupont Hospital, Lutheran Hospital, or Parkview Regional Medical Center.

Insurance

1. Our office will contact your insurance company to see if prior authorization/precertification for medical necessity is required. We can provide the necessary medical information to obtain prior authorization/precertification; however, the above is never a guarantee of benefits or payment.
2. Please provide our office with a current insurance card and your surgeon's charges will be filed directly with your insurance company. We are participating providers in many insurance plans; but, if there is any question, please call your insurance company.
3. It is up to you to become familiar with the physicians and facilities that are within your insurance network. If not, you may be subject to a substantial out-of-network penalty.
4. Individual policies vary and are subject to exclusion of some types of procedures such as sterilizations. It is advisable to understand what your policy covers. If you are not sure, please call your insurance company and ask. Record the date, time, and the name of the person you spoke with for possible future reference.
5. After surgery, you and/or your insurance company will be billed by our office, the hospital, the anesthesiologist, the pathologist (if specimens are sent) and other miscellaneous providers involved in your care.
6. It may be necessary for you or a family member to call and notify your insurance company if you would need to be admitted as an inpatient.
7. If you do not have insurance or your insurance will not pay for your surgery, please call our billing department at 260-969-1263 to arrange a payment plan.
8. Our office will complete your form for FMLA or short term disability for a nominal charge. Please contact 260-432-4400 (option 6) for any questions. You may fax the required paperwork to 260-432-2723.

Before Surgery

1. Preoperative testing will be discussed with your surgery scheduler. A testing order slip will either be faxed to the testing facility, mailed to you, or someone from the Preadmission Testing Department at the hospital will call you to schedule your testing appointment. All preoperative testing must be completed in the allotted time frame to avoid rescheduling your surgery.
2. To avoid pregnancy, abstain from sexual intercourse for 2 weeks prior to surgery. If you are postmenopausal or have had a sterilization procedure done, you may disregard this instruction.
3. Some patients require surgical clearance from their primary care physician or specialist. This is determined by your surgeon at Women's Health Advantage. If your surgeon does request clearance, we will notify you. We ask that you please call your clearing physician right away for a surgical clearance appointment.

Bowel Prep

1. If you are scheduled to have laparoscopic surgery, you may need to give yourself one Fleet enema the evening before. Your surgery scheduling nurse will let you know if this is required by your physician for your procedure.

Medications

1. Avoid aspirin, ibuprofen (such as Motrin or Advil) and naproxen (such as Aleve) products for two weeks prior to surgery. These medications can increase your bleeding time. Tylenol (acetaminophen) or a Tylenol-based narcotic, if prescribed by your physician, is fine to use for pain.
2. Discontinue all herbs, oils, and supplements, other than a multivitamin or iron for two weeks prior to surgery. Herbal supplements, oils, and concentrated supplements may increase your risk for bleeding or cause drug interactions with anesthesia.
3. If you are on any diabetic or blood thinning medications, please notify our surgery scheduling nurse and check with the physician who orders these medications for instructions on when the medications need to be stopped preoperatively.
4. Please discuss taking any of your necessary medications, such as hypertension medication, with the surgery nurse and call with any changes to your medications to determine if you need to take them the day of your surgery. If you have anything to eat or drink (this includes chewing gum or sucking on mints) within the 8-9 hour period before surgery, other than minimal sips to take necessary medications, the anesthesiologist will cancel your surgery.

In Addition

1. It is recommended that you stop smoking at least 2 weeks prior to surgery. Healthy, non-irritated lungs will be to your benefit with anesthesia and during recovery.
2. Please avoid alcoholic beverages for 24-48 hours prior to surgery.
3. Plan on being at the facility for 1-3 hours after your surgery time; actual time of dismissal will depend on the hospital's criteria for dismissal.
4. You must have a driver to take you home.
5. Please shower using an antibacterial soap, such as dial, and wash your hair with shampoo the night before or the day of surgery. The facility may ask you to use a specific cleansing cloth instead of the antibacterial soap. You may use deodorant. Please avoid perfumes, lotions, and smoking.
6. You should wear comfortable clothing to the surgery facility.
7. Report to the facility's patient registration desk at your scheduled arrival time.

After surgery

1. As you recover from the anesthesia, you will be offered ice chips, soda, or water before you go home. When tolerating fluids, gradually progress to your usual diet. If you become nauseated, consume clear liquids only until the nausea subsides.
2. It is normal to be dizzy and/or sleepy for several hours after your surgery. Plan to go home and rest or sleep most of the day.
3. You should not drive for 24 hours after surgery.
4. You may have occasional uterine cramping, vaginal bleeding, watery discharge and/or generalized muscle aching. These symptoms should gradually decrease. Use the pain medication sent home with you from the hospital. If no prescription pain medication was ordered, you may try ibuprofen 600mg every six hours as needed or Tylenol Extra Strength as directed. Be aware that most prescription pain medication contains acetaminophen (Tylenol); consult your physician or pharmacist before using any additional acetaminophen with your prescription medication.
5. If you had laparoscopic surgery, you may have discomfort in your shoulders, neck or upper chest. This is caused by the gas used to inflate the abdomen during surgery and usually resolves within 48-72 hours. This is often relieved by lying down with your chest and shoulders at the same level or lower than your hips.
6. You may notice your abdomen is puffy or bloated. This usually lasts from 1-2 weeks and will gradually resolve.
7. It is normal to have light or intermittent vaginal bleeding or watery discharge for 1-3 weeks post-operatively.
8. Do not have intercourse, use tampons or douche for at least one week or until the bleeding has stopped, whichever is longer. If you had a conization of the cervix or LEEP procedure done, this restriction is for 4 weeks. If you had a bladder sling placed, this restriction is for 2 weeks.
9. You may shower as soon as desired. Avoid tub baths, hot tubs, and pools for at least one week or until the bleeding has decreased to minimal spotting and your incisions are healing well.

10. You may have your menstrual period at the normal time or it may come early, late or skip a month. If you had an ablation, you may still have a light to moderate flow. Keep a record and discuss this at your post-op visit.
11. Lifting Restrictions: If a conization of the cervix or a LEEP procedure is done, please avoid heavy lifting (over 15 pounds) for at least one week. If you had a bladder sling placed, avoid lifting over 10 lbs. for 2 weeks.
12. For laparoscopic procedures, you may have up to 1-2 weeks off of work. For most minor surgeries, up to 4 days off is adequate.
13. If you had specimens taken at the time of surgery, you may inquire about the pathology results after 7 business days. You may also wait and review them with your doctor at your post-op visit.

Please contact us through the patient portal at myhealthrecord.com or by phone if you have:

1. Excessive vaginal bleeding, such as a menstrual type flow, soaking a pad an hour, or passing large clots
2. Any fever over 100 degrees or flu-like symptoms, associated muscle aches, chills, headache, or general feeling of ill health
3. Any problems with urination, such as burning, frequency, urgency, pain, or any problems with emptying your bladder
4. Foul or discolored vaginal discharge, however clear yellow fluid can be normal for healing
5. Any excessive redness, tenderness, or swelling at incision sites
6. Any foul incisional drainage
7. Excessive pain that is not getting better

If at any time you need to call the doctor after hours, please call the office at 260-432-4400 and you will be forwarded to the answering service. If you haven't received a return call within 30 minutes, please place the call again. In case of emergency, go to the hospital emergency room approved by your insurance. Please DO NOT go to Parkview Randallia or St. Joseph Hospital as our physicians DO NOT go to these hospitals.

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