

Surgery Center Guide



Dear Patient,

Welcome to Ochsner. This guide provides important information about your upcoming surgery. Please read it carefully. These instructions will help you move smoothly through each phase of your surgery and recovery.

Before, during, and after your surgery, you will be cared for by some of the most skilled and experienced medical professionals. All the members of your care team will work with you and your family to ensure a safe, smooth and comfortable surgery and recovery.

Your doctor is the main source of information and advice before and after your procedure. The information contained in this guide should not be used as a substitute for your physician and your healthcare team.

Many departments within Ochsner will be calling you prior to your procedure. When you check in for your next appointment, please be sure your doctor's office has the best number for us to reach you.

If you have any questions or concerns not addressed in this guide, call your surgeon's office or any of the departments below:

St. Charles Parish Hospital 985-785-6242
 Admitting/Authorization 504-842-0550
 Surgery Center 985-785-4280
 Pre-Admit Center 985-785-5783

Thank you for choosing Ochsner and St. Charles Parish Hospital.



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Surgery Summary and Patient Reminders

Patient Name	 	 	
Date of Surgery			
Time to Arrive at Hospital _	 	 	
Time of Surgery			

The Day Before Surgery

The day before your surgery, a nurse will call you with your arrival time. If you have not received your arrival time by noon the day before surgery, call 985-785-5783. Reference the chart below to see what day you should call.

Day Surgery is Scheduled	Day to Call Prior to Surgery	
Monday	Friday	
Tuesday	Monday	
Wednesday	Tuesday	
Thursday	Wednesday	
Friday	Thursday	



During this pre-admit call, the nurse will also review which medications you may take the morning of your surgery.

The Day of Surgery

The day of your surgery, you will report to Same Day Surgery (SDS) located at 1057 Paul Maillard Rd, Luling, LA 70070. The phone number is 985-785-4280.

You will not be allowed to drive yourself home or use any ride-sharing service (Uber, Lyft, taxi) after sedation or anesthesia. Be sure to arrange for someone to drive you home.

Campus Map and Parking Information

This is a map of the entire hospital including parking lots. Please park in the South parking lot which is marked with a red rectangle. You will enter the hospital through the South 1 Entrance, which is marked with a purple rectangle. For additional assistance, call 985-785-6242.



Preparing for Surgery

When you need surgery, your physician determines whether you will go home the same day (outpatient surgery) or will remain in the hospital overnight (inpatient surgery). Your physician also decides which Ochsner facility best meets your needs.

Tell your doctor or nurse in advance if you:

- · Are allergic to any medications, whether prescription or over-the-counter
- Take aspirin products or any medications containing aspirin
- Take herbal supplements or medications of any kind
- Take blood thinners, such as Coumadin (warfarin), Ticlid or Plavix (clopidogrel)
- Are diabetic, including any medications you take for diabetes



Be sure to arrange for someone to drive you home following surgery. Sedation and anesthesia make it dangerous for you to drive. You will not be allowed to leave the facility alone or drive yourself home.

Your medications

Pre-Admit will ca	Il you about the medications that you can take the morning of your surgery. Write them down
1	
3	
4	
5	
7	
8	

Bring a list of all your medications with you the day of your surgery. You can also give the list to your doctor or nurse during your final clinic appointment before surgery.

• Stop taking all herbal medications 14 days prior to surgery.

Stop taking aspirin, products containing aspirin _____ days before surgery.

• Stop taking blood thinners _____ days before surgery.

• Stop smoking _____ days before surgery.

- Stop drinking alcoholic beverages for 24 hours before surgery. Do not drink alcohol for 24 hours after surgery.
- Eat a light supper on the night before your surgery.
- Do not eat any solid foods or drink any liquids after 12:00 AM (midnight). This includes gum, hard candy, mints, and chewing tobacco.
- You may have Gatorade, Powerade, and water until _____ (2 hours prior to your arrival time).

If You Are Taking Medication for Diabetes or Weight Loss

If you are currently injecting any of these drug names weekly, **stop taking this drug a full 7 days before your procedure**.

- Dulaglutide (Trulicity®)
- Liraglutide (Victoza[®], Saxenda[®])
- Semaglutide (Ozempic[®], Rybelsus[®], Wegovy[®])
- Exanatide (Byetta[®], Bydureon[®])
- Tirzepatide (Mounjaro[®])
- Lixisenatide (Adlyxin®)

This means your last injection will be on ______.

If you are currently taking any medications with the generic name phentermine (see brand names below) by mouth, **stop taking this medication 4 days before your procedure.**

- Adipex[®]
- Atti-Plex P[®]
- Fastin®
- Phentercot[®]
- Phentride®
- Pro-Fast[®]
- Adipex-P[®]
- I omaira®

Contact your doctor's office with any questions. They may connect you with our Anesthesia team if needed.

Your procedure may be canceled or postponed if you do not follow these instructions.

Stop Smoking

We strongly encourage you to stop smoking. Quitting reduces your risk of complications after your operation.



Ochsner's free smoking cessation program can help you quit for good.

Our program provides a risk-free way to help you quit smoking, vaping or using tobacco products. With FREE counseling and medications*, you have everything you need to start living a healthier life.

You qualify if you

- Are 18 years of age or older
- Are ready to quit smoking, vaping or using tobacco products

What's included

- FREE office visits
- FREE group and individual counseling sessions
- FREE over-the-counter and prescription medications*

What to expect

- 1. First, you'll meet one-on-one, in person or virtually, with a smoking cessation counselor to discuss your options and create an individualized treatment plan.
- 2. Next, you'll work with a certified tobacco treatment specialist via in-person, virtual or over-the-phone appointments to determine the best way to quit and select a quit date.
- 3. Throughout the process, you can track your medications in MyOchsner, our online patient portal.

To learn more, ask a member of your care team, call 866-524-4988, or visit ochsner.org/quit.

*Contact our referral coordinators for coverage details

Day of Surgery

- **Medications.** Take any medications specified by the anesthesiologist with a small sip of water the morning of your surgery.
- Brush your teeth. You may brush your teeth and rinse your mouth. Do not swallow any water or toothpaste.
- **Clothing.** A button front shirt and loose-fitting clothes are the most comfortable before and after surgery. We also recommend low-heeled shoes.
- Hair. Avoid buns, ponytails or hairpieces at the back of the head. Remove or avoid any clips, pins or bands that bind hair. Do not use hairspray. Before going to surgery, you will need to remove any wigs or hairpieces. We will cover your hair during surgery. Your privacy regarding personal appearance will be respected.
- Fingernails. Please be sure to remove all nail polish before you arrive for surgery. We understand that tips, wraps, gels, etc., are expensive; however, we ask these products be removed from at least one finger on each hand. Your fingertips are used to accurately monitor your oxygen level during surgery by a device called an oximeter
- Glasses and Contact Lenses. Wear glasses when possible. If contact lenses must be worn, bring a lens case and solution. If glasses are worn, bring a case for them.
- **Hearing Aids.** If you rely on a hearing aid, wear it to the hospital on the day of surgery. This will ensure you can hear and understand everything we need to communicate with you.
- **Valuables.** Jewelry, including body piercings, money, and credit cards should be left at home. Ochsner is not responsible for valuables that are not secured in our surgery center.
- Makeup, Perfume, Creams, Lotions and Deodorants. Do not use any of these products on the day of surgery. Remove false eyelashes prior to surgery.
- Implanted Medical Devices. If you have an implanted device, such as a pacemaker or AICD, bring the device information card (if you have it) with you.
- **Medical Equipment.** If you have been fitted for a brace to wear after surgery or you have been given crutches, bring those with you to the surgery center.
- Shower. Take a shower with Hibiclens® (available over the counter). This reduces the chance of infection.
- + How to shower with Hibiclens on the day of surgery
 - **1.** Washing your hair is optional. If you do, wash your hair with your normal shampoo. Rinse your hair and body thoroughly afterward to remove the residue.
 - 2. Do not shave the area of your body where your surgery will be performed.
 - 3. Turn the water off. Apply Hibiclens to your entire body from the jaw down. Do not get Hibiclens in your eyes, ears, nose, mouth or genital area. Wash thoroughly for five minutes, paying special attention to the area where your surgery will be performed. Do not scrub your skin too hard. Do not use regular soap.
 - 4. Turn the water back on and rinse your body well.
 - **5.** Pat yourself dry with a clean, soft towel. Do not apply any lotions, creams, deodorants, perfumes or powders. Put on clean clothes.



If you are diabetic

- Follow the diabetic medicine instructions you received during your pre-operative visit.
- DO NOT take your insulin or diabetic medications the morning of surgery.
- When you arrive at the surgical center, be sure to tell the nurse you are diabetic.

Other Items to bring with you

- Insurance card
- Identification card such as driver's license, passport, or other picture ID
- Copy of your advance directives
- List of medications and allergies, if not already provided
- Name and phone number of person to contact if your condition changes significantly





If your physical condition changes such as a cold or respiratory illness, or if you have to delay or cancel your surgery for some other reason, you must notify your surgeon right away.

If you need to cancel your surgery after hours or the day of your surgery, call 985-785-6242 and ask to speak to the House Supervisor.

After Surgery

Once your procedure is complete, your physician will talk to your family. Some physicians choose to meet with the family in a conference room. This is simply the physician's preference. It does not indicate there is a problem.

The anesthesia provider will remain with you until you are transferred back to the Post Anesthesia Care Unit (PACU/Recovery). This may take anywhere from 15-90 minutes after your surgeon visits you.

If you are going home the same day

You and your family member will receive verbal and written instructions, including medication and diet before you leave the hospital.

To ensure your safety, you will not be allowed to leave the hospital alone or drive yourself home. Sedation and anesthesia make it dangerous for you to drive. Please make sure you have arranged for someone to drive you home when you are ready.

All patients are discharged from the hospital in a wheelchair.

If you expect to stay in the hospital overnight

Decide in advance if you will need someone with you for a few days. Be sure to arrange for that help before you arrive for surgery.

Visitors

Ochsner understands that visiting family and friends provide valuable support. Please check with your nurse for visitor guidelines. Each area of the hospital has its own policies. This may include the number and types of visitors, including children. At any time, visitors may be limited to ensure you receive the best possible care.

A waiting area is available for family and friends. Family members or visitors may wait in the family waiting rooms while you are in surgery. We have open visiting hours for family and visitors. Please ask your nurse for details.

Amenities

Vending machines

 Available throughout the hospital, including in our waiting room

Lagniappe Gift Shop

- 1st floor
- Hours vary

Courtyard Café

- 1st floor
- Monday Friday, 8:00 a.m. 3:00 p.m.

Oyster Pearl Cafeteria

- 1st floor
- Breakfast: Monday Friday, 7:00 a.m. 9:00 a.m.
- Lunch: Monday Friday, 11:00 a.m. 2:00 p.m.

Herbal Products and Surgery

Herbal products are available as tablets, liquids, granules, or powders, and are commonly contained in herbal teas. They are not regulated by the FDA. There are few instructions on proper use, dosage requirements, possible side effects, toxicity, and possible drug interactions. This makes it difficult to predict a patient's reaction to the herbal product.



Tell your doctor about any vitamins, supplements, or herbal products that you are taking. If you take these products prior to surgery, there is significant risk of real problems during and after your surgery.

You may need to stop taking these products 7-10 days before your surgery. Ask your doctor for instructions.

Herbal products that may alter bleeding

- Borage Seed Oil
- Bogbean
- Capsicum
- Feverfew
- Garlic
- Ginger

- Ginko
- Guarana (Zoom)
- Horse Chestnut
- Pau D'Arco (Taheebo, Trumpet Bush, Lapacho)
- Sweet Clover

Herbal products that interact with coumadin or antiplatelet agents

- Angelica Root
- Anise
- Arnica Flower
- Asafoetida
- Celery
- Chamomile
- Cinchona Bark
- Coenzyme Q
- Danshen

- Devil's Claw
- Don Quai
- Fenugreek
- Garlic
- Ginko
- Ginsena
- Green Tea
- Horse Chestnut
- Licorice Root

- Lovage Bark
- Papaya
- Parslev
- Passionflower Herb
- Quassia
- Red Clover
- Rue
- St. John's Wort
- Tamarind

Other substances that may alter bleeding times

- Chinese Patent Medications
- Chuifong Toukuwan
- Fish Oil (Omega-3 fatty adds)
- Gamma Linolenic Acid (GLA)
- Miracle Herb

- Tung Sheuh
- Vitamin E

Aspirin-Containing Products and Surgery

Your doctor may tell you to avoid aspirin or products that contain aspirin, salicylates and/or salicylamides prior to surgery. The lists below provide examples of these products and compounds, including. This is not a complete list.

You may need to stop taking these products 7-10 days before your surgery. Ask your doctor for instructions.

Prescription products containing aspirin, silicyates and/or salicylamides

- Argesic Tablets
- Ascriptin with Codeine Tablets
- Axotal Tablets
- Buff-A-Comp Tablets and Capsules
- Buff-A-Comp No. 3 Tablets (with Codeine)
- Bufferin with Codine No. 3 Tablets
- Darvon with a.S.A. Pulvules
- Darvon Compound Pulvules
- Darvon Compound 65
- Darvon-N with A.S.A.
- Disalcid Capsules
- Easprin
- Empiric with Codeine Tablets
- Equagesic Tablets
- Florinal Tablets

- Florinal with Codeine
- Lanonnal Tablets
- Magan Tablets
- Magsal Tablets
- Marnal Capsules
- Micrainin Tablets
- Mobidin Tablets
- Norgesic and Norgesic Forte Tablets
- Percodan and Percodan-Demi Tablets
- Robaxisal Tablets
- SK-65 Compound Capsules
- Synelgos-DC Capsules
- Talwin Compound Tablets and Liquid
- Trillsate Tablets and Liquid
- Zorprin Tablets

Non-prescription (over-the-counter) products containing aspirin, salicylates and/or salicylamides

- Alka-Seltzer Effervescent Tablets
- Alka-Seltzer Plus Cold Medicine Tablets
- Anacin Tablets and Capsules Maximum Strength
- Anodynos Tablets
- Arthralgen Tablets
- Arthritis Pain Formula Tablets
- Arthritis Strength Bufferin Tablets
- Arthropan Liquid
- A.S.A. Tablets

- A.S.A. Enseals
- Ascriptin Tablets
- Ascriptin A/D Tablets
- Ascriptin Extra Strength Tablets
- Asperbuf Tablets
- Aspergum (chewing gum)
- Bayer Aspirin Tablets
- Bayer Children's Aspirin Tablets
- Bayer Children's Cold Tablets

- Bayer Timed-Released Aspirin Tablets
- BC Tablet and Powder
- Buffaprin Tablets
- Bufferin Tablets
- Bufferin Arthritis Strength Tablets
- Bufferin Extra Strength Tablets
- Buffets II Tablets
- Buffinol Tablets
- Buffinol Extra Tablets
- Buf-Tabs
- · Cama Arthritis Pain Reliever
- Cope Tablets
- Cosprin Tablets
- CP-2 Tablets
- Dasin Capsules
- Doan's Pills
- Duoprin Capsules
- Duoprin-S Syrup
- Duradyne Tablets
- Ecotrin Tablets
- Emagrin Tablets
- Empirin Tablets
- Excedrin Tablets & Capsules

- 4-Way Gold Tablets
- Maximum Bayer Aspirin
- Measurin Tablets
- Midol Caplets
- Moblgesic Tablets
- Momentum Tablets
- Neocylate Tablets
- Pabalate
- Pepto-Bismol Tablets and Suspension
- Persistin Tablets
- S-A-C Tablets
- St. Joseph Aspirin for Children
- St. Joseph Cold Tablets for Children
- Saleto Tablets
- Salocol Tablets
- Stanback Powder
- Supac
- Synalgos Capsules
- Trigesic
- Uracel
- · Vanquish Caplets
- Venn



Alcohol and Surgery

We want to help you prepare for and recover from surgery as quickly and safely as possible.



Recovery from anesthesia and surgery may not proceed as planned if your healthcare team is not aware of your alcohol use.

Be open and honest with your provider about how many drinks you have per day.

Excessive alcohol use is defined as drinking more than three drinks per day. It can affect the outcome of your surgery. Binge drinking (consuming large amounts of alcohol infrequently, such as on weekends) can also affect the outcome of your surgery.

Alcohol withdrawal

If you drink more than three drinks a day, you could have a complication, called alcohol withdrawal, after surgery. Alcohol withdrawal is a set of symptoms that people have when they suddenly stop drinking after using alcohol for a long time. During withdrawal, a person's central nervous system overreacts. This can cause mild symptoms such as shakiness, sweating or hallucinating.

It can also cause other more serious side effects.

If not treated properly, alcohol withdrawal can cause potentially life-threatening complications after surgery. This can include tremors, seizures, hallucinations, delirium tremors, and even death. Untreated alcohol withdrawal often leads to a longer stay in the hospital, potentially in the Intensive Care Unit.

Chronic heavy drinking also can interfere with several organ systems and biochemical processes in the body. This interference can cause serious, even life-threatening complications.

Your care team can offer alcohol withdrawal treatment to help:

- Decrease the risk of seizures and delirium tremors after surgery
- Decrease the risk we will need to restrain you for your own safety or the safety of others
- Decrease your risk of falling after surgery
- Reduce the use of potent sedative medications
- Reduce the time you stay in the hospital after surgery
- Reduce the time you might spend on a mechanical ventilator to help you breathe
- Lower incidence of organ failure and biochemical complications

Talk to a member of your care team or your primary care physician about your alcohol use if you feel you may be at risk of any of these complications.

Smoking and Surgery

Quitting smoking is extremely important for a successful surgery and recovery. Cigarette smoking compromises your immune system. This increases your risk of an infection after surgery. Quitting the habit before surgery will decrease the surgical risks associated with smoking.

If you are a smoker:

- **1. Speak to your primary care doctor about treatment.** Your doctor knows your medical history. He or she can suggest the right treatment for you.
- 2. **Set a quit date.** Pick an actual date to stop smoking. Let your closest friends and family know you are quitting. It may help you stick to your goal.
- **3. Enroll in a quit smoking support plan.** A good support plan offers expert advice and support, personalized to meet your needs. It can also teach you things like how to recognize and deal with situations that may tempt you to smoke. Also build a support network so when you're faced with an urge you'll be better prepared. Ochsner offers free smoking cessation programs. Visit **ochsner.org/quit** to learn more.

For most smokers, smoking is more than a habit – it's an addiction. As with most addictions, when you take away the thing that you're addicted to, you may experience physical withdrawal symptoms. Some common signs of nicotine withdrawal include:

- Urge to smoke
- Irritability, frustration, or anger
- Restlessness
- Depressed mood and anxiety

- Decreased heart rate
- Insomnia
- Difficulty concentrating
- Increased appetite or weight gain

No matter how tough nicotine withdrawal symptoms may seem at first, they can lessen over time. Until then, think of the symptoms as a sign that your body is cleansing itself of nicotine. That's a positive thing. Ask your primary care doctor about our smoking cessation program or visit **ochsner.org/quit**.

Pain Management and Drug Safety After Surgery

Managing your pain

After surgery, it is normal to feel some pain or discomfort. At Ochsner, our goal is to help you manage this pain safely. By controlling your pain, we can help you sleep better, be more active and recover faster. To do this, your physician may prescribe a combination of methods that should help control your pain. These may include

- **Non-medical treatment:** hot or cold packs, deep breathing and relaxation exercises, massage, relaxation, music or other distracting pastimes, positive thinking, or nerve stimulation (TENS).
- **Anesthetic treatment:** includes general anesthesia; spinal anesthesia, or nerve blocks; or pain medicine delivered either by a small tube in your back (an epidural catheter) or by an IV line in your arm.
- Pain control medication: measures may include oral medications (pain pills), intramuscular injections, suppositories, or medication delivered through a small plastic tube in your vein (an IV) or through an epidural catheter in your back.

Pain relief medications

If your provider feels you need medication for pain relief, this may consist of

- Fever reducers (also called Non-Narcotic Analgesics or Antipyretics). Acetaminophen, (Tylenol®, Feverall®) is given to relieve mild to moderate pain and reduce fever.
- Non-Steroidal Anti-Inflammatory Drugs (NSAIDs). Aspirin and ibuprofen (Motrin®, Aleve®, Naprosyn®) and other NSAIDs reduce swelling and soreness and relieve mild to moderate pain.

Or, your provider may include a short course of **prescription pain medication**, which can be used if other pain relief methods are not enough. These medications are also called opioids or narcotics.

When taken correctly, opioids are very good medicines for post-surgery pain. But they can be misused. This guide will help you understand how to take your prescription pain medication safely and keep others safe.

How to use opioids safely

- **Take as directed.** Your physician and pharmacist will give you specific instructions for taking this prescription. Follow these instructions.
- **Keep it to yourself.** Don't share this prescription is only for you. Sharing prescriptions is illegal and can put other people in danger.
- Ask about your other prescriptions. Some medications should not be taken at the same time as opioids because they can slow or stop your breathing. Talk to your physician or pharmacist if you are taking benzodiazepines (such as Ativan, Xanax, Valium), seizure medications, muscle relaxers, or psychiatric drugs.
- Talk to your provider about other health conditions. Tell us if you're pregnant, have a history of sleep apnea, mental health conditions, or substance use disorder.
- **Stay sober.** It can be very dangerous to use alcohol and other substances while you're taking an opioid pain medicine. Skip the alcohol, sleeping pills, or illegal drugs until you've stopped this medication.

• Be cautious. Don't drive or operate heavy machinery until you know how this medication affects you.

How to store opioids safely

- **Keep it in the original container.** Don't transfer the prescription to another bottle or package. This way you will always know exactly what is in the container and who it is for.
- **Keep it where children can't see or reach it.** The safest place to store prescription pain medication is in a locked cabinet or on a high shelf.

How to dispose of opioids safely

- **Discard properly when done.** Immediately after your pain is gone, dispose of any unused prescription pain medication.
 - Contact your local law enforcement agency or pharmacist to find a drug "take back" or disposal location near you. You can also find a location at this website:https://www.fda.gov/drugs/disposal-unusedmedicines-what-you-should-know/drug-disposal-drug-take-back-locations.
 - If there is no take back or disposal location near you, check the FDA's Flush List. This is a list of drugs that CAN be flushed down the toilet https://www.fda.gov/drugs/disposal-unused-medicines-what-you-should-know/drug-disposal-fdas-flush-list-certain-medicines#FlushList
 - If your medication is not on the FDA Flush List, you can put it in the trash. To do so, remove the medication from its container and combine it with something unpleasant such as used coffee grounds or kitty litter. Place this mixture in a sealable bag in the garbage so it cannot leak or break out. Scratch out all personal information on the original container and throw it away or recycle it.

Know the risks

- If not used correctly, prescription pain medications can be just as dangerous as illegal drugs.
- Misuse can have serious consequences including dependence, addiction, overdose, even death.
- Get medical attention immediately if
 - You have taken your medication incorrectly and you have
 - Overall low energy
 - Physical weakness
 - Nausea and/or vomiting
 - Trouble breathing
 - You have taken more medication than your prescription instructs

How Ochsner providers prescribe opioids

We are committed to helping end opioid misuse and its serious consequences. To ensure we play our part, Ochsner providers are very careful about opioid prescriptions and refills. We have strict policies to ensure your safety and the safety of those around you.

1. Some opioid prescriptions cannot be refilled through your pharmacy. We may ask you to make a clinic appointment before your prescription pain medication is refilled. That way we can help manage your pain the best way possible and avoid overuse of opioids.

- 2. We will only consider refills three days (or less) before the end of your medication regimen. Be sure to take your medication as your provider directs.
- 3. We do not mail or ship prescription pain medication. Opioids are considered "controlled substances" by law and must be picked up in person.
- **4.** We only use prescription pain medications for patients undergoing surgery or other procedures. If you have pain for other reasons, we have many other resources to help you, including our Pain Management specialists, physical therapists, and others.

Ochsner does not prescribe medical marijuana, CBD or THC products at this time.

To learn more, visit one of these sites or talk to your Ochsner provider

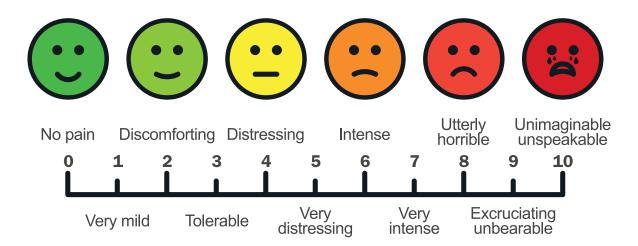
- www.drugabuse.gov
 National Institute for Drug Abuse
- www.samhsa.gov

SAMHSA – Substance Abuse and Mental Health Services Administration or call the SAMHSA National Helpline at 1-800-662 HELP (4357) for treatment referrals

www.fda.gov/drugs/resources-you-drugs
 Find resources to answer regulatory and drug-related questions.

Pain levels

At Ochsner, your well-being is an ongoing concern. Tell the doctor or nurse about pain that does not go away. They need to know how you are feeling. While your comfort is important, your pain may be a signal that you could be having a problem after surgery.



Preventing Falls During Your Hospital Stay

All patients admitted to the hospital are at a higher risk for falls. A fall increases your risk for injury. This could lead to an increased length of stay in the hospital or make your recovery period longer.

In the event that it is in the patient's best interest not to be left alone, we will ask for a family member or friend to stay with them. Having a familiar person present can help to prevent falls. If that is not possible, the patient or family may hire sitters to provide this kind of support. The cost for sitters is the responsibility of the patient/family and cannot be added to the hospital bill. A list of agencies offering sitter service is available upon request.

We ask that caregivers notify the nurse prior to leaving the patient's bedside so the nurse can best determine how to prevent falls. Bed exit or chair alarms may be turned on to alert the nurse that the patient is attempting to get up without help. Do not turn off these alarms; they are for the patient's safety. Wait for staff to assist the patient in getting up. Do not bring your family member to the bathroom or leave them in the bathroom.

Common Causes of Falls

There are many reasons that patients may be at greater risk of falling while in the hospital, including being in an unfamiliar setting, weakness from surgery or illness, adjusting to new medications, or being connected to medical equipment. Patients, family members and Ochsner staff each have a role to play in preventing falls.

Patient/Caregiver Responsibilities



1. Provide Information

- Current medications
- History of falls
- Bathroom routine
- Walking/transferring needs



2. Press the Red Call Button

- For help getting out of bed/chair
- For help to the bathroom
- To grab items out of reach



3. Before Standing

- Call for help
- Wait for your care team even if a caregiver is in the room
- Rise slowly if lying down
- Sit on the edge of the bed



4. Before Walking

- Wear non-skid socks or fitted closed-toe shoes
- Use a walker or cane as needed

Care Team Responsibilities

1. While on Duty

- Orient you to your room
- Place your call light within reach
- Raise your bedrails
- Keep room well-lit and clutter-free
- Give clear medication instructions
- Encourage and assist with movement

2. As Needed

- Place a "Fall Risk" band on your wrist
- Turn on your bed/chair alarm
- Use TeleSitter with camera to monitor you

3. Movement Support

- Stay within arm's length to, from, and during toileting/dressing to ensure your safety
- Provide you with proper assistive devices as needed

Financial and Insurance Information

We realize the financial aspects of hospital services are often complicated and difficult to understand. But you should not worry, because **Ochsner personnel will contact your insurance company for detailed information about your surgical coverage.**

We want to make sure we meet your insurance company's billing requirements and, when needed, get their authorization for our services. Your insurance company will tell us what your out-of-pocket payment will be according to your policy. Your payment may include co-payments, deductibles, co-insurance, non-covered services or other insurance limitations.

Please contact your insurance provider if you have additional questions about your specific coverage. You may want to contact your insurance company to:

- Better understand your insurance policy(s) for the expected hospital services
- Make sure the Ochsner facilities and physicians caring for you are approved by your insurance company
- Identify any out-of-pocket payments you will have to make
- Know and be able to pay your out-of-pocket payment before services are provided

Ochsner Admitting/Authorization staff will contact your insurance company to:

- Obtain insurance coverage and benefit information
- Ask for authorization requirements and take the steps necessary to obtain authorization
- Take steps necessary to get authorization for healthcare services
- Determine your out-of-pocket payment

Also, Ochsner financial counselors are available to assist you, whether you have insurance or not.



If you have authorization questions related to your insurance, please call our Pre-Service representatives at 504-842-0550. The Surgery Department is unable to provide any financial information.

Additional Information

We hope the information in this guide has prepared you for your upcoming surgery. We want to be certain that you understand all of your at-home instructions, have follow-up care scheduled, and that you don't have any concerns about your care.



If you have questions, call 985-785-5783 and ask for the Pre-Admit Department or contact your doctor's office and speak to anyone on your healthcare team.

Thank you for entrusting your care to Ochsner. We look forward to providing you with the quality care and service you expect and deserve.

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