NAMAKY

ADVANCED ENDOMETRIOSIS SURGERY

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Instructions Before Having Surgery

Thank you for choosing Namaky Advanced Endometriosis Surgery for your care. I understand that surgery can be a life-changing event. This packet is designed to help empower you with the knowledge you need in order to have the best possible outcome.

HISTORY AND PHYSICAL

Hospitals require that you have an updated full history and physical examination within 30 days prior to surgery. I will usually do this myself, but on occasion may ask you to visit your primary care physician, or a specialty physician, to have a pre-operative history and physical performed (I will tell you if this is the case).

BLOODWORK

You will receive a phone call that blood work has been ordered. Please visit the lab at the hospital where your surgery is scheduled 5 days prior to surgery to complete the bloodwork.

IMAGING

Most patients will not need additional imaging prior to having surgery. If I do ask you to have imaging done, then please schedule it in the Radiology Department at Good Samaritan Hospital, or another TriHealth hospital. I can directly review images from a TriHealth hospital.

MEDICATIONS

Do not take aspirin within 7 days of your surgery. If you take aspirin within 7 days of your surgery, notify our office.

If you are on other blood thinners such as clopidogrel (Plavix) or Coumadin (warfarin), then please let me know. I will likely ask you to see the prescribing physician to help manage these medications around the time of your surgery, or I will contact them by phone to help decide whether to stop taking them. In most cases they can be temporarily stopped for your surgery.

Most other medications can (and should be) taken leading up to, and on the day of, surgery. If you take mediations for diabetes, I will tell you how to adjust your medication

dose on the day of surgery. If I have not already instructed you how to do this, then call our office so we can discuss how to do this.

You may be prescribed an opiate (narcotic) medication, such as oxycodone or hydrocodone, for pain control after surgery. Opiates do carry a risk of addiction, but you may use them if needed. Always use other medications first, such as ibuprofen or acetaminophen, and use the smallest amount of opiate needed to control your pain. Opiates are sometimes needed to control pain, and most people do not get addicted by using them. However, by using the opiate prescription you are accepting the risk of possible addiction.

PRESCRIPTIONS

Your prescriptions will typically be prescribed on the day of surgery prior to discharge from the hospital. If your pharmacy indicates they have not received them, please let us know.

SMOKING

If you are a smoker (if you smoke tobacco, marijuana, or regularly inhale any other type of smoke) then you should abstain from smoking for 4 weeks prior to surgery. Smoking within that time increases the chance of a post-operative infection. I can usually prescribe a nicotine patch to help you achieve this.

PRE-OPERATIVE SHOWERS

Generally, you should shower using a special soap for several days prior to, and the morning of, surgery (See attached sheet).

OTHER PRE-OPERATIVE CARE

Do not clip or shave any hair that you think might be in the way of surgery. Shaving increases the risk of a surgical infection. If we need to remove hair for your surgery, we will do this ourselves using special clippers.

I generally do not advise you to have a "bowel prep." Occasionally, depending on the type of surgery, you may be asked to have one. I will give you instructions if this is the case.

DISABILITY AND LEAVE PAPERWORK

Please provide me with, or have your employer provide me with, any disability or leave (FMLA) paperwork required for your surgery and I will be happy to complete it for you.

I routinely sign for time off in the amount of 2 weeks for any laparoscopy, including laparoscopic excision and/or hysterectomy as that is all that is typically needed. The maximum disability time off for laparoscopic surgery is 4 weeks. For open surgery, I approve and recommend 6 weeks off. Caregivers are given a maximum of 1 week off.

THE NIGHT BEFORE SURGERY AND DIET

Get plenty of sleep the night prior to surgery. You may have normal foods up until 8 hours prior to surgery. Do not eat any solid foods after that. You may have clear liquids, such as black coffee, tea, water, Gatorade, or sodas up until 2 hours prior to your arrival at the hospital. This does not include any liquid that you cannot see through, so do not use dairy or any creamers. Do not eat or drink anything within 2 hours of your arrival at the hospital. The only exception to this is that you may take your medications with a sip of water.

THE DAY OF SURGERY

You generally will take your normally scheduled medications on the day of surgery. See the "Medications" section above.

Bring your Living Will, Advance Directives, and Power of Attorney documents with you to the hospital.

Plan to arrive at the hospital two hours before your scheduled surgery time. After checking in, you will be taken to a room and asked to change into a gown. A nurse will start your IV and go over your chart with you. Anesthesia will also evaluate you in your pre-op room. I will also visit you in the pre-op room to make sure everything is in order and all the necessary forms are signed correctly. A resident may also speak with you if I have one with me that day.

I teach residents and they often will participate in your care during surgery and in the hospital, just as they do in our office. Residents are trained beyond the level of surgical assistants. As a result, surgeries done with residents assisting generally have better outcomes and run more smoothly.

Minor surgery, such as hysteroscopy, will generally take about 20 to 30 minutes. Including anesthesia time and room turnover, family may wait about 1 to 2 hours before they see you after surgery. Major surgery, such as hysterectomy, will generally take about 1 to 2 hours. Including anesthesia time and room turnover, family may wait about 2 to 3 hours before they see you after surgery.

After surgery, you will be taken, awake, to a recovery area. Nursing will make sure you are alert, able to drink without nausea, and any pain is controlled. They may also ask you to use the restroom on your own.

If you had minor or minimally invasive surgery, I expect that we are able to get you home on the day of surgery. Those of you having major open surgery will stay in the hospital, usually for two nights. Occasionally, minimally invasive surgeries will stay one night in the hospital.

You will need to have someone to take you home on the day of surgery. The hospital will not allow you to go home alone after having anesthesia.

POST-OPERATIVE CARE AND DISCHARGE INSTRUCTIONS

If I have not already given you a detailed set of Discharge Instructions, please let me know and I will be sure you get them. They include useful information on activity, pain management, incision care, and follow up.

You will be given detailed post-operative instructions again when you are sent home from the hospital.

FOLLOW UP

Follow up after surgery is after 2 weeks. You need to make a post-operative appointment. It's best not to make the appointment sooner than 2 weeks after, unless you need to return to work or school sooner.

Thank you again for choosing Namaky Advanced Endometriosis Surgery for your care. I strive to make this the best possible experience for you, and will treat you like my own family.

CONTACT INFO

For a medical emergency, dial 911.

If you need a timely response from me, you can call 513-580-4496, 24 hours a day, 7 days a week to get help.

For non-urgent issues you can call me or send me a message through the Onpatient portal. If your message is more than a few sentences, then use of the portal may not be appropriate. In that case, please call instead.

Devin D. Namaky, MD
Namaky Advanced Endometriosis Surgery

Shower Instructions to Reduce Infection

3 Shower Schedule (no baths)

At Namaky Advanced Endometriosis Surgery, we take every precaution to prevent infection.

Starting two days before surgery, your surgeon wants you to shower with a special soap called Chlorhexidine Gluconate (CHG), or Hibiclens. It is available without a prescription at most pharmacies. It kills bacteria on the skin and helps protect you from getting a surgical site infection.

If you are allergic to CHG, don't use it and follow the shower instructions using Dial antibacterial soap. Call the doctor if you have skin irritation.

Please read all instructions before showering!

Showering steps

1. Remove all jewelry and body piercings.
2. Rinse your body with warm water.
3. Wash your hair with regular shampoo. Rinse your hair and body of all shampoo residue.
1. Turn off the water.
2. Using a new bath loofah, apply at least 2 tablespoons of the CHG soap to cover your entire body from below the chin to your feet (AVOID THE FACE AND GENITALS).
3. Ask for help or use a long-handled brush to reach the middle of your back.
4. Firmly massage all over for 2 minutes.
5. Pause a minute and then turn the water back on and rinse your body thoroughly.
6. Do not use regular soap after washing.
7. Don't apply lotions, oils, powders or other ointments to your body.

Other important tips during this process

1. Do not take baths.
2. Clean all bed sheets and linens.
3. No pets in bed.
4. Don’t use the CHG after surgery as it can break down incision glue.
5. DON’T GET CHG IN THE EYES, EARS, NOSE OR GENITAL AREAS. If you get CHG in any of these areas, be sure to immediately rinse them thoroughly. FLUSH YOUR EYES IMMEDIATELY IF CHG GETS IN YOUR EYES.
6. Don't shave or cut your hair within 7 days before surgery.