



PRE-ADMISSION TESTING

Date: _____

Time: _____

Location: _____

MED/CARD CLEARANCE

Date: _____

Time: _____

Location: _____

LAB WORK/EKG

Date: _____

Time: _____

Location: _____

OTHER PRE-OP TESTS

Date: _____

Time: _____

Location: _____

SURGERY DATE

Date: _____

Time: Notification details on page 4

Location: _____

POST-SURGICAL VISIT

Date: _____

Time: _____

Location: _____



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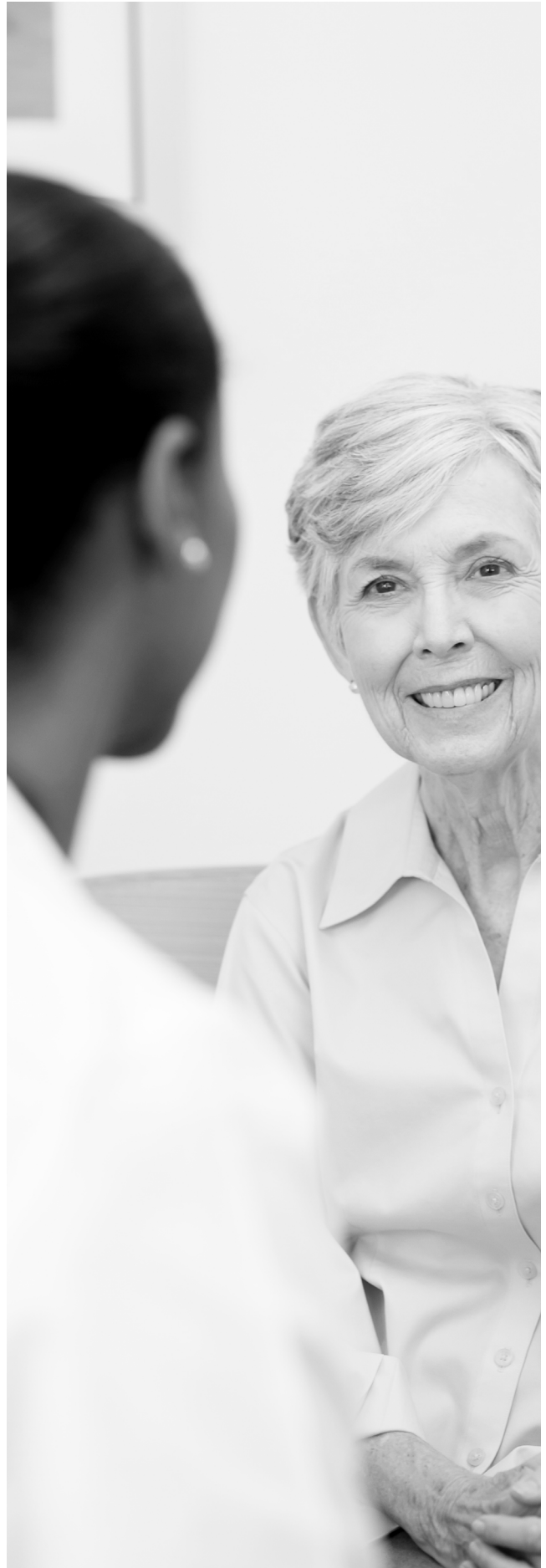
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We have included a helpful Surgery Reminders Checklist at the end of this book, so you can keep track of important steps for your surgery or procedure.

DISCLAIMER: The content of this booklet is for informational purposes only, and is not intended as medical advice or a substitute for the professional opinion of a physician or other healthcare provider involved in your treatment. We encourage you to consult with your treating physician or other healthcare professional in connection with diagnosis and treatment decisions.





WHAT YOU NEED TO KNOW TO **GET STARTED**

Before your surgery, your doctor and your healthcare team will teach you about your care for both before and after surgery. We have prepared the following information for you to provide an overview of this process.

Pre-Admission Testing Appointment and Day of Surgery

When scheduled for surgery, you may require a Pre-Admission Testing (PAT) appointment. Your surgeon's office may schedule this for you at the time of your office visit, or you may be contacted by a pre-admission nurse to determine if this is necessary.

At this visit, we will also speak with you about the following:

Understanding Your Health Insurance

You and your family should take time to understand your health insurance coverage, especially for the care you may need after you leave the hospital.

Please bring your insurance cards and photo identification card to this visit. If you have not already made payment arrangements with the hospital, we will talk with you about financial responsibility and payment options regarding this surgery. Please bring a check or credit card with you on the day of surgery.

Please check with your insurance carrier to determine your need for pre-authorization. If you have questions about your co-payment or insurance authorization, please call 863.687.1199.

Medications

Tell your surgeon about any medications you are taking, including over-the-counter medications, vitamins, herbals and weight loss medications (prescription or over-the-counter). Ask about aspirin, anti-inflammatory medicines, herbs, and any diabetes medicines you are currently taking. Your physician will tell you if you need to make any changes. **Diabetes medications containing metformin need to be stopped 24 hours prior to surgery.**

The following medications should be stopped according to the following instructions:

Metformin/Glucophage	<u>24 hour prior to surgery</u>
Coumadin	_____
Aspirin, Plavix, other blood thinners	_____
_____	_____
_____	_____

IMPORTANT QUESTIONS TO ASK YOUR SURGEON

1. Please explain the surgery I will be having.
2. How long will I be in the hospital?
3. Do I need to stop any medications before my surgery?
4. Will I have to change the medicines I take?
5. How long does recovery take?
6. Will I go to rehab after surgery or will I go home?

Medical Condition

Please tell your doctor about your medical history, including any prior surgeries.

Allergies

Please tell your doctor and healthcare team about any allergies you have.

Dental Work

Please tell your doctor or healthcare team about any dental work planned either before or after surgery. Your doctor may want to give you special instructions.

Illness

If you should become ill with a cold or another illness in the week prior to surgery, let your healthcare team or doctor know.

Skin Care

If you develop redness, a scratch, a bug bite, or any open wound near your surgical site prior to the procedure, contact your surgeon's office.

Stay as Active as Possible

Follow your doctor's advice about exercise prior to surgery. In general, staying active prior to surgery will keep your muscles strong and make your recovery easier.

Advance Directive

An Advance Directive or Living Will lets your family and care providers know the treatments you want in the event you are very ill and cannot make your own decisions.

Please review your advance directive or living will and bring a copy with you to the hospital. If you do not have one, you can complete one before your admission. More information can be found at <http://www.myLRH.org>.

This information is also offered to you at admission.

BEFORE SURGERY

Diet

You should not have anything by mouth after midnight the day before surgery unless your doctor tells you otherwise. Remember, nothing by mouth includes: water, hard candy, gum, breath mints and chewing tobacco. You may brush your teeth, but do not swallow the water.

Notification

Between 2:30 p.m. and 4:00 p.m. on the business day before your surgery, you will receive a phone call from the hospital confirming your time of surgery. If you do not receive this call, contact the surgery department at 863.284.1690. (Patients scheduled for Monday surgeries will be contacted on the Friday prior.)

Medication the Day of Surgery

Unless your doctor tells you not to, please take your blood pressure, seizure, cardiac, Parkinson's, and thyroid medicine the morning of surgery. Only use a small sip of water. Bring a list of all your medications, including over-the-counter, vitamins, herbals and weight-loss medications. Please provide the dosage and times for these medications.

Clothing

Wear comfortable clothing. You will be asked to wear a hospital gown and remove your under clothes, dentures, partials, glasses, contact lenses, hair pins, wigs and jewelry, including piercings. You may be able to wear your hearing aids to surgery, if required.

Skin Preparation

- You will need to wash with a special antibacterial soap **three times** before surgery: the day before surgery in the morning, the night before and the morning of surgery (See Pre-Surgery Preparation on page 6).
- Wash your hands often to prevent infections.
- Use freshly washed bed linens and use clean towels and washcloths after each shower.
- Do not apply lotions, perfumes or make-up.
- Avoid contact with pets to skin areas.

Personal Belongings

You may bring a robe, toiletries and your C-pap machine (if applicable) if you are staying overnight. Bring your cane, walker or wheelchair and label these with your name and phone number. Please leave valuables, including jewelry, at home.

PREPARING YOUR HOME FOR YOUR RETURN AFTER SURGERY

Before your surgery, take the time to prepare your home and get the supplies you will need after surgery.

Tips to Prepare Your Home before Surgery

- Make sure everything you need is easy to get to and on the same floor where you will spend most of your time.
- Put food and other supplies in a cupboard that is between your waist and shoulder level.
- Have enough lighting inside and outside of your home.
- Use night lights throughout your home.
- Remove throw rugs or fasten them to the floor with carpet tape.
- Use smoke detectors in your home.
- Have a list of emergency numbers prepared.
- Have unsafe sidewalks, walkways or stairs repaired.
- Install handrails where needed.
- Put grab bars by your tub, shower and toilet.
- Make your tub and shower slip-proof.
- Thoroughly dust your home to reduce sources of infection.

Supplies to Have Available for Your Return Home

- Clean bed sheets, clean sleepwear, and clean towels and washcloths.
- Have a supply of your regular medications so you do not run out while recuperating.
- Stock up on canned or frozen food, toilet paper, shampoo, and other personal items.
- Either buy or make single meals that can be frozen and reheated.

Other Helpful Items Include:

- Long-handled shower sponge.
- Long-handled shoe horn.
- A reaching aid to help you pick things up off of the floor.

If you have Outpatient Surgery

You must have someone to drive you home and a responsible adult to stay with you overnight.

IMPORTANT:

Pet dander near a surgical site can cause infections to develop, so plan to have a family member or friend take care of the needs of your pet(s) while you recover. (Grooming, litter box changing, etc.)

ITEMS TO BRING THE DAY OF SURGERY

- ☐ Insurance card and/or any copay required
- ☐ Insurance pharmacy card, if applicable
- ☐ Photo ID
- ☐ Medicine list
- ☐ Personal items (brush, comb, toothbrush, etc.)
- ☐ Loose-fitting underclothes, robe and sleepwear
- ☐ Non-slip shoes
- ☐ Cell phone and charger
- ☐ Contact information for your care partner
- ☐ CPAP machine if you have sleep apnea
- ☐ Braces or other orthotic devices that you use regularly



PROPER SHOWERING STEPS

For the safety of your surgery, it is important that each shower is taken using these three steps:

Step 1 - Rinse

Before starting to wash, please rinse your body with water.

Step 2 - Wash

Begin washing your body with the Chlorhexidine cleaner.

Step 3 - Rinse

To finish your shower, thoroughly rinse off the Chlorhexidine cleaner.

PRE-SURGERY PREPARATION

SHOWERING

You will take 3 showers before your surgery and will need the following items:

- One bottle (3-4 oz.) of Chlorhexidine. (ex. Hibiclens or similar)
- Three (3) clean washcloths.*
- Three (3) clean towels.*

Please use a fresh clean towel and washcloth for each shower.

Shower 1 - Day before surgery

In the morning, take a shower using 1 oz. of the Chlorhexidine cleaner.

- Use the first clean washcloth and towel.

Shower 2 - Night before surgery

In the evening, take a shower using 1 oz. of the Chlorhexidine cleaner.

- Use the second clean washcloth and towel.

Shower 3 - Morning of surgery

Take a shower with the remaining cleaner. Use the third clean washcloth and towel.

Guidelines for Using Chlorhexidine:

- Keep the chlorhexidine out of your eyes, ears, mouth, genital area, and deep wounds.
- If you have a dressing, splint or cast in place prior to surgery, wash around them. Do not remove the dressing, splint or cast unless advised to do so by your surgeon.
- Do not use soap, lotions, perfumes, powder, deodorant, or make-up after using product.
- Do not use if you are allergic to chlorhexidine.
- Read product label for complete instructions.
- Do not use on children under two months of age.

SHAVING

Please do not shave the surgical area. Any hair removal will be done at the hospital on the morning of surgery.

IF YOU HAVE **DIABETES** . . .

Please follow your doctor's advice when preparing for surgery.

Studies show that patients with well-controlled blood sugar have fewer problems during and after surgery; but even if your blood sugar is under control, surgery can make it more difficult to manage because of the following:

- Surgery is stressful.
- You may not follow your normal meal plan.
- You may be asked to stop taking diabetes medication before surgery depending on what you take.

Use this checklist to help make sure your blood sugar stays in control before and after surgery.

Before Setting a Date for Surgery

- ☐ Meet with your doctor and ask the following:
 - Is my diabetes management working?
 - Do I need to make changes to my treatment plan?
 - Do I need special blood sugar tests before surgery?
 - Do I need to adjust my insulin dosage?
- ☐ Make sure your Hemoglobin A1C is less than 8.

One Week Before Surgery

- ☐ Test your blood sugar before each meal and at bedtime if not already doing so. Most people with diabetes aim for these target values:
 - Pre-meal target: 70-130 mg/dL or _____
 - Bedtime target: 100-140 mg/dL or _____
- ☐ Follow your diabetes treatment plan faithfully.

One Day Before Surgery

- ☐ Continue to test your blood sugar before meals and at bedtime and write down the values. Your doctor may need to refer to these readings.
- ☐ Continue taking your insulin or other injectable medication as usual, unless told not to by your doctor.
- ☐ Unless told otherwise by your doctor, stop taking your other diabetes medication such as: Metformin, Glucophage®, Actoplus Met®, Avandamet™, Fortamet®, Glucovance®, Glumetza®, Invokamet™, Janumet®, Jentadueto®, Kazano, Kombiglyze™, Prandimet®, Riomet™, Synjardy®, Xigduo.
- ☐ Don't eat or drink after midnight (12 a.m.)

Day of Surgery (Before Coming In)

- ☐ Adjust your insulin according to the Supplemental Insulin Scale below or your doctor's instructions.
- ☐ Check your blood sugar:
 - If it is low (< 70 mg/dL), take one teaspoon of sugar and inform the nurse or doctor when you arrive.
 - If it is high (more than 150 mg/dL), take a correction dose of rapid-acting insulin per the supplemental insulin scale below. If you don't have correction doses, call your diabetes doctor.

When You Arrive For Surgery

- ☐ Bring your written blood sugar records with you.
- ☐ Report your last blood sugar reading to the doctor or nurse.
- ☐ Let the doctor and nurse know what time you took an insulin dose (if taken).

After You Are Home

- ☐ Make sure you keep your blood sugar under control (<160) to promote faster wound healing and avoid infection.

What if your blood sugar is too high? Please refer to the scale below; the numbers in the **Insulin Dose** column show you the number of units of insulin per dose.

Supplemental Insulin Scale	
Blood Sugar (mg/dL)	Insulin Dose
151-200	2 units
201-250	4 units
251-300	6 units
301-350	8 units
351 or higher	Call your doctor

ARRIVING THE DAY OF SURGERY - LEVEL 1

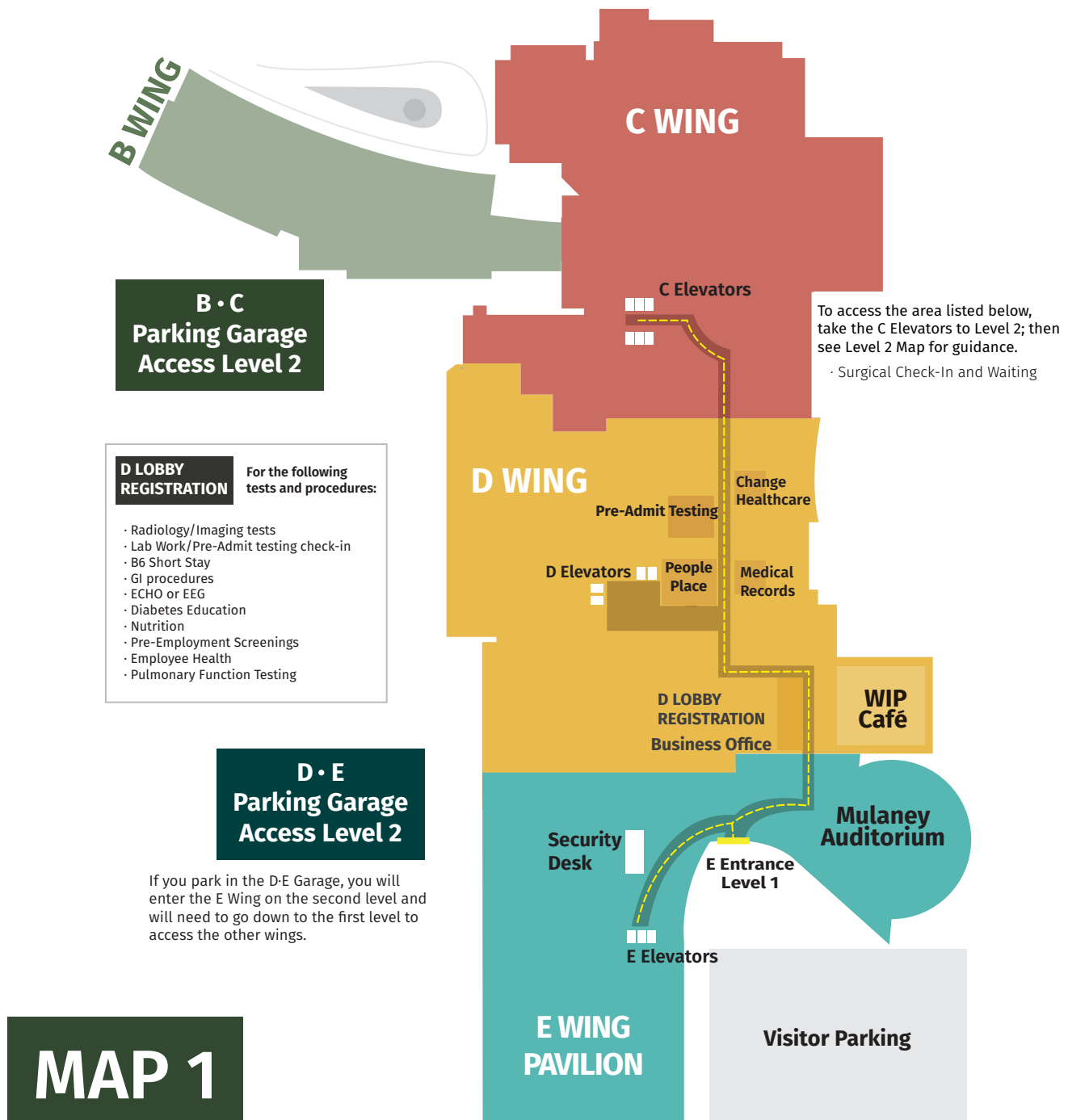
Pre-op Phone Call

Surgery patients receive a pre-op phone call on the **business day** before surgery. During the call, we will tell you:

- the time of your surgery
- the time to arrive (2 hours prior to surgery)
- the entrance where you should arrive (either the B Wing or the Pavilion)

If you were told to arrive at the Pavilion on the day of surgery, you are encouraged to enter through the E Entrance or from the D-E Garage for easiest access to your check-in area. (During your pre-op phone call from the hospital, we will tell you where in the Pavilion to arrive for your particular surgery or procedure.)

The map below provides guidance from the E Wing to the rest of the Medical Center Campus through the Level 1 hallway. The C Elevators can take you to Level 2.



ARRIVING THE DAY OF SURGERY - LEVEL 2

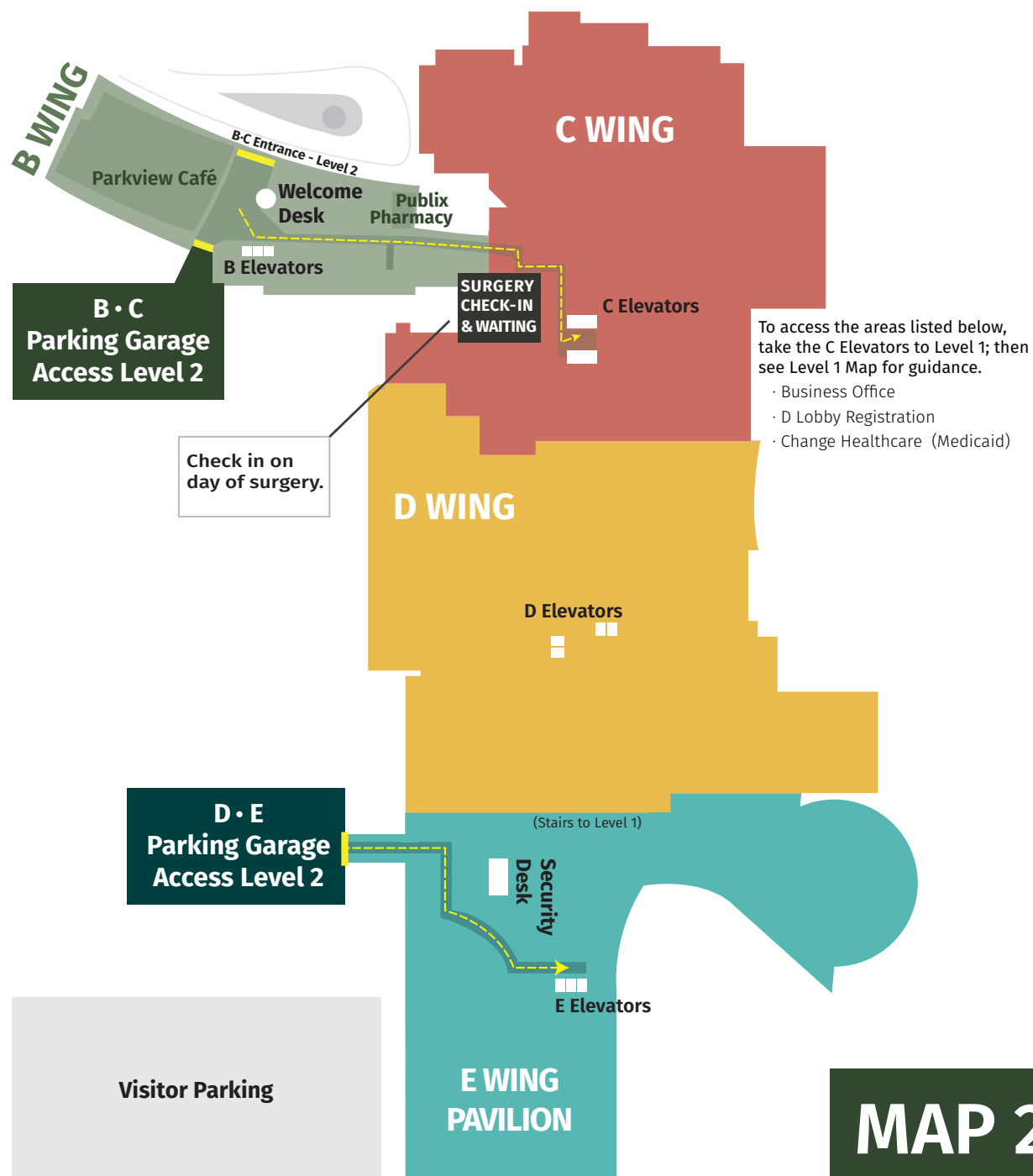
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- the time of your surgery
- the time to arrive (2 hours prior to surgery)
- the entrance where you should arrive (either the B Wing or the Pavilion)

If you were told to arrive at the B Wing on the day of surgery, you are encouraged to enter through the B Entrance or from the B-C Garage for easiest access to your check-in area. (During your pre-op phone call from the hospital, we will tell you where to arrive for your surgery or procedure.)

The map below provides guidance from the B Wing to the Surgery Check-In Area.



PARKING AT THE MEDICAL CENTER CAMPUS

COMPLIMENTARY PARKING

For your convenience, we provide free parking in the following areas:

B-C Parking Garage (This parking area is closest to the B - Lobby)

D-E Parking Garage

Surface lots around the Carol Jenkins Barnett Pavilion for Women and Children

VALET PARKING

Valet service is available at the following locations for a charge per transaction:

- B Entrance
- Main Emergency Department Entrance

For the most up-to-date information about parking, including information about Valet Parking, please visit our website at myLRH.org/parking.





PRE-OP

You will be taken to a room where you will be asked to change into a hospital gown. The nurse will explain what to expect and will perform a brief physical exam.

You may be asked some of the same questions several times before surgery and right up until surgery.

SURGERY - WHAT TO EXPECT

Tests

Blood work, X-rays, and an EKG (a tracing of your heart rhythm) may be done on the morning of surgery if it has not been done before. We may swab the inside of your nose before surgery to check for specific germs, such as *Staphylococcus aureus* (Staph) or other bacteria. As a precaution, and if necessary, we will treat the inside of your nose with mupirocin (an antibiotic cream) during your stay.

Skin Preparation

You may have your skin prepped by washing with special soap or by clipping to remove hair.

Surgical Consents

You will be asked to sign a surgical consent if you haven't already signed one. If you have any questions about the consent, be sure to ask your doctor before surgery.

Special Preparation

- The anesthesiologist will speak to you before the surgery, if he or she has not already.
- You will have an IV (a special line put into one of your veins in which fluids and medications can be given).
- You may have a urinary catheter (a small tube that drains urine from your bladder).
- You may be given special stockings to wear to increase circulation in your legs.
- We may give you medication to decrease stomach irritation.
- Once it is time for surgery, you will be connected to monitors and anesthesia will begin.

Visitor Information

- Please limit your visitors to two (2) in the pre-op area and one (1) in the holding room.
- Visitors are limited to two (2) persons in the 2nd floor Surgery Waiting room.
- An electronic tracking board in the Surgery Waiting Room keeps your family updated about when the surgery begins, ends, and when you are moved to recovery.

AFTER SURGERY

Immediately After Surgery

- You will be taken to the PACU (recovery room) and monitored for at least 1 hour.
- You will be given pain medicine as needed during your time in recovery.
- Once you are awake and stable, you will be taken to your inpatient or outpatient bed, depending on the type of procedure.

Pain Control

Pain management is an important part of recovery from surgery. Our goal is to keep you as comfortable as possible. We will ask you to rate your pain from 0 (no pain) to 10 (extreme pain). Please let us know if you are hurting so we can treat your pain.

Types of Pain Control

Different doctors use different methods to manage pain. Some choices include:

- **PCA pump** – Allows you to safely control the amount of pain medicine you need. Your nurse will provide more information.
- **IV Medications** – Your nurse will administer your pain medication through your IV at the appropriate times.
- **Oral Medicines** – When you can tolerate foods, you will be switched to oral pain relievers. You will be sent home with a prescription for oral pain medications.

In Your Hospital Room

- Early walking (with staff assistance) will help you recover faster and avoid complications.
- You will be asked to do breathing exercises using a device called an incentive spirometer. This helps to exercise your lungs. **It is a simple process, but very important.**
- Your diet will advance slowly from ice chips to clear liquids to soft regular foods.

PREVENTING FALLS

We want you to be safe while you are with us. Being in a new place, taking new medicines, and not feeling your best can raise your risk of falling.

DO NOT GET OUT OF BED ALONE.

If you are a HIGH fall risk:

Please use your call button if you wish to get up for any reason. Your nurse or care provider will be happy to assist you.

Tips for Patients:

- **Use your call button to call for help before getting up for any reason.**
- Make sure important items are within reach.
- Sit at the side of the bed for a few minutes before standing and stand up slowly.
- Be mindful of any equipment or tubing that may be attached.
- We may provide a bed alarm that will sound to remind you to call for help when you need to get out of bed.
- Make sure to wear nonskid socks or shoes when walking.
- Avoid distractions.
- Notify the nurse about spills or wet areas on the floor so they may be cleaned quickly.

Tips for Family Members or Visitors:

- Let the nurse know when you are leaving.
- Let the nurse know if you notice any change in the patient's alertness.
- For added safety, arrange to have someone stay with the patient.

WHAT IS DELIRIUM?

Delirium (sudden confusion) may happen when someone is sick or has had surgery. Severe illness, dehydration, memory problems, and/or vision or hearing troubles can increase the risk of delirium. It is important to recognize the signs and symptoms of delirium. If you notice that your loved one is acting differently or in unusual ways, please let your care team know so they can make a proper assessment.

Symptoms

- Restlessness and/or sleepiness.
- Slurred speech.
- Seeing and hearing imaginary things.
- Confusion between night and day.
- Forgetfulness.
- Difficulty concentrating.
- Confused speech.

Causes

- Medications.
- Infection.
- Simply being in the hospital.

Treatment

- Determine the cause through tests and asking questions.
- Medications.

Expected Course

Delirium usually resolves in a few days or sometimes weeks. Others may not completely return to their normal state. Your healthcare provider will be able to answer any questions you may have about delirium.

How to Help

Families and caregivers can be a great help to patients with delirium. One way to provide assistance is to have someone stay with the patient as much as possible.



Other ways to help include:

Rest Periods:

- Reduce noise and distractions.
- Lower light levels.
- Provide comforting blankets and pillows.
- Offer warm drinks or back rubs for relaxation.

Physical Activity:

- Help with sitting and walking.
- Learn the proper way to assist with exercises and other activities.

Food and Drink:

- Help with eating during meals.
- Encourage fluids (follow doctor orders for proper fluid intake).

Hearing and Vision:

- Make sure the patient's hearing aids or amplifiers are available and working.
- Make sure the patient's eyeglasses are available; clean them often.
- Use enough lighting.
- Offer the use of a magnifying glass.

Mental Stimulation:

- Look at family photos or have familiar people visit.
- Talk about current events.
- Read aloud or provide large print books.

Conversation:

- Use a calm reassuring voice.
- Remind the patient where he or she is often.
- Give one instruction at a time to not overstimulate the patient.

DISCHARGE CHECKLIST

Before you go home, make sure you have what you need.

- ☐ Someone to help you at home.
- ☐ Important phone numbers (doctor, physical therapy, home health, etc.).
- ☐ Non-slip shoes.
- ☐ Keys to your house.
- ☐ Clean comfortable clothes to wear home.
- ☐ All of your personal property (cell phone/charger, dentures, hearing aid, cane, books, etc.).
- ☐ Proper equipment ordered to keep you safe, if needed (walker, three-in-one commode, etc.).
- ☐ Enough food for a couple of weeks or someone to shop for you.

ABOUT YOUR DISCHARGE

Following surgery, your discharge plan will be based on your needs, options covered by your insurance and your choice. Your care team consisting of nurses, physical therapists and social workers will discuss your discharge plans as ordered by your doctor.

You will be given information about:

- how to care for your wound or dressings.
- how to move around in the right way.
- how to take your medications.
- your follow-up visits.

Discharge Medications

For your convenience, we have a Publix Pharmacy on the second floor of the B-Wing near the front lobby. Our in-house Publix Pharmacy now offers free delivery of discharge medications to your room. Please let your nurse know if you are interested in this service. You may pay by cash or credit card for your medications on day of discharge.

Social Workers

Social workers are here to assist with your discharge plans and to help arrange for your care after you leave us. They are available during the week, Monday through Friday from 8:00 a.m. to 4:30 p.m. Weekend social workers are available on a more limited basis.

For discharge needs prior to coming to the hospital, please call 863.284.1593.

CARE AND SAFETY

Your care team will give you detailed information about after surgery care. The following is general care information.

Medications

- Do not take any anti-inflammatory medicines unless told to do so by your doctor.
- If you have questions about any medication, ask your doctor or nurse.
- Don't stop taking your ordered medications unless told to do so by your doctor.

Blood Clots

Continue to follow your doctor's instructions to reduce the chance of blood clots. Should any of the following warning signs occur, please contact your doctor immediately:

- Swelling in your calf, ankle or foot.
- Pain in your calf.
- Pain and redness in and around your knee.

Caring For Your Incisions

- Wash your hands before and after touching your incision(s).
- Wash your hands often to prevent the spread of infection. **Handwashing is the number one way to prevent infection.**
- Keep your mouth clean with frequent teeth brushing.
- Keep smoke and pets away from your incision(s). If you have a child in diapers, make sure to wash your hands thoroughly after every diaper change.
- Avoid contact with people who may have respiratory issues like colds or flu.
- Cover upholstered furniture with a clean sheet.
- Shower according to your doctor's instruction. NO TUB BATHS, HOT TUBS or POOLS, until approved by your surgeon.
- During your shower, do not use direct water pressure on your incision.
- Use a clean washcloth and clean towel each time you shower.
- Thoroughly pat dry your incision(s) with a clean towel after each shower.

Handwashing - When to Clean Your Hands:

- After using the bathroom.
- Before and after eating.
- After coughing or sneezing.
- After using a tissue.
- Before and after touching or changing a dressing or bandage.
- After touching any object or surface that may be contaminated.

Tips for Good Handwashing:

- Use warm water and plenty of soap. Work up a good lather.
- Clean the whole hand: under the nails, between the fingers and up the wrists.
- Wash for at least 15 seconds. Don't just wipe, scrub well.
- Rinse, letting the water run down your fingers, not up your wrists.
- Dry your hands well. Use a paper towel to turn off the faucet and open the door in public restrooms.

How to Prevent Falls at Home:

- Wear shoes with rubber soles that do not have an opening for your toes.
- Keep clutter off of the floor.
- Clean up any floor spills.
- Do not place electrical cords across pathways.
- Do not climb on stools or stepladders.
- Do not wax your floors.
- Keep items you use often within reach.
- Be aware of pets that can get under your feet and cause a fall.
- Remove throw rugs or secure them to the floor using carpet tape.

RECOGNIZE DANGER SIGNALS

Call your doctor if you have any of the following symptoms:

- Inability to tolerate foods or fluids.
- Persistent nausea or vomiting.
- Swelling or pain in either leg or calf.
- Signs of surgical site infection: increased redness, increased drainage or swelling, and worsening pain.
- If you feel warm or chilled, check your temperature. Call the doctor for a temperature greater than 100.4°F (38°C).

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PE00010 (09) LRH 04/21



Thank you for choosing Lakeland Regional Health for your care. We look forward to your arrival. Please read and follow the steps below prior to your surgery or procedure:

- ☐ Ensure you have completed your Pre-Op COVID-19 Test.
- ☐ Complete your 3 Chlorhexidine showers.
- ☐ Arrange transportation to and from the hospital with a responsible adult and limit the number of visitors to two. Please plan to have a responsible person remain with you 24 hours after surgery.
- ☐ Wear loose clothing and only bring photo ID, insurance card, co-pay and current medication list including prescription and over-the-counter medicines and supplements, with dosages and times.
- ☐ If you use a CPAP machine for sleep apnea, bring it with you to the hospital.
- ☐ Remove all jewelry and any piercings. Your procedure may be cancelled if jewelry or piercings are not removed for your safety.
- ☐ Plan to arrive at the **B Entrance** and check-in at the information desk. You need to arrive **2 hours** prior to your scheduled procedure.
- ☐ No eating or drinking after midnight, which includes gum, cough drops, hard candy, mints, tobacco etc., unless otherwise instructed by your doctor's office.
- ☐ **Take medications for blood pressure, heart disease, seizures, Parkinson's and thyroid** with a sip of water the morning of your procedure.
- ☐ If you are diabetic **do not take any medications containing Glucophage, Metformin, Avandamet, within 24 hours prior to your surgery time.** If you have taken one of these medications, please call **863.284.1690** during normal business hours to speak to a nurse.
- ☐ Review [Surgery Guides](#) for more information.
- ☐ If you have **NOT** stopped the following: **Aspirin, Plavix, NSAIDS, Coumadin, Pradaxa** or **other blood thinners**, please verify with your physician if those should be stopped
- ☐ If you have any mobility issues or questions concerning your procedure, please call us during normal business hours at **863.284.1690**.

Your health and safety are our highest priorities. We look forward to seeing you soon!

Lakeland Regional Health Surgical Team