A Guide to Your Surgery

Information for Patients and Families



Introduction

Fraser Health is committed to providing "the best in health care" in all of its many services, including surgery.

When "life or limb" is at stake, the decision to have surgery is pretty straight forward and surgery is performed very quickly.

In most circumstances though, surgery isn't urgent, and there is more time for thoughtful consideration and preparation.

We want you to be an active and informed member of the surgical care team. This Guide provides information, planning checklists, tools, and other resources to help you make decisions, prepare for surgery, and recover as quickly as possible.

We'd also like to draw your attention to a new online tool available to both you and your family practitioner that identifies surgeons likely able to do your surgery sooner than others. You can find this tool by going to the Fraser Health website at www.fraserhealth.ca/surgery

This Guide contains the following sections:

- •The Surgery Decision
- Choosing a Surgeon
- Preparing for Surgery Day
- Going Home
- Frequently Ask Questions
- Family & Friends

Appendices:

- Some of the Questions You May Want to Ask Your Family Practitioner
- Some of the Questions You May Want to Ask Your Surgeon Staying in Hospital Checklist
- Preparing for Surgery Checklist Exercises After Surgery
- Taking Care at Home After Surgery Support Person Checklist

The Surgery Decision

The More You Know

Whether or not to have surgery is a very personal decision. The more you know, the better able you will be to make the decision that's right for you.

The possibility of a surgical remedy to your condition will likely come up in discussion with your family practitioner. There may be other alternatives to consider too, so don't be afraid to ask questions.

Being Referred to a Surgeon

If surgery is being considered, your family practitioner will refer you to a surgeon for a consultation. This is another opportunity for you to learn more about your condition, options, and the potential risks and benefits of having surgery.

Getting a Second Opinion

Some patients feel as though they are betraying the surgeon they've already seen by seeking another point of view, but you do have the right to ask for a second opinion.

Getting a second opinion may be particularly important to you if you are considering major surgery, if you feel that your questions about the procedure are not being answered, or if you feel your goals and the goals of your surgeon are not the same. For example, if you are trying to avoid surgery and are seeking alternatives to the procedure, and your surgeon insists that surgery is the only option, you should seek a second opinion.

If you want a second opinion, ask your family practitioner to make a referral to a different surgeon for a consultation appointment.

Decision Tools & Resources

There are checklists included in the Appendix that you can review and take with you when you see your family practitioner or a surgeon. You can also print these from our website where you will also see a link to a Decision Tool about having surgery that you may find useful. Go to www.fraserhealth.ca and enter surgery decision in the search box.

Choosing a Surgeon

Unless your surgery is an emergency, you have some options when it comes to choosing a surgeon.

Some surgeons have more patients waiting for surgery than others. If you want to have your surgery as soon as possible, you and your family practitioner can access information which provides the names of the surgeons most likely able to perform your surgery sooner than others.

The "Soonest Surgery Tool" is based on statistics gathered for the Ministry of Health Wait Times website. The results change regularly based on the number of patients referred to each surgeon and the amount of time available in operating rooms. Here are two examples of how you can use this tool:

Example 1: When your family practitioner suggests making a referral to a surgeon, ask your doctor to go to the Fraser Health Physicians Website (www.physicians.fraserhealth.ca > Resources) and refer you to one of the surgeons most likely able to perform your surgery sooner.

Example 2: If your family practitioner has already referred you to a surgeon, and you would like a second opinion or be referred to a surgeon who can perform the surgery sooner, you can go back to your family practitioner and ask that you be referred to a second surgeon or one that is on the list.

Please note that information about Cardiac Surgery is not included and the information is for adult surgeries only.

Preparing for Surgery

In the months and weeks ahead

You are the most important person on your care team. You play a key role in staying as healthy as you can be before surgery <u>and</u> in your recovery after surgery.

Before surgery, focus on things you can do to be as strong and as healthy as possible. This helps you recover faster. You are also less likely to have any problems during or after surgery.

- ✓ Healthy Diet: Eat a balanced diet with healthy foods that include vegetables, fruit, lean protein, as well as foods rich in iron and calcium.
- ✓ **Activity and Exercise:** Stay active and exercise regularly (strengthens your muscles and improves your blood flow). Even walking 10 minutes a day and increasing the amount of time you walk will aide in your recovery. To get help making an exercise plan, talk to your family practitioner or call the Physical Activity Line (1-877-725-1149 or www.physicalactivityline.com)
- ✓ **Alcohol:** Limit alcohol to no more than one (1) drink each day. If you have concerns about limiting alcohol, talk to your family practitioner.
- ✓ **Smoking:** Stop smoking. You can get free nicotine patches or gum to help you quit. To register for the BC Smoking Cessation Program, call 8-1-1 or visit www.quitnow.ca. If you cannot quit, try to cut down.

HealthLinkBC.ca

For information on diet, exercise, and how to guit smoking, call 8-1-1.

If you have any health concerns or want to improve certain aspects of your health before your surgery, speak to your family practitioner.

Plan ahead:

This is a good time to ask any questions that you may have and to tell your healthcare team about your worries and needs before you leave. If you need additional services such as rehabilitation or home nursing care, this will be arranged before you go home. You may be given a prescription that your support person will need to get for you from a pharmacy.

You might also need help the first few days at home after surgery. Make plans with family or friends to help you with meals, laundry, shopping, and getting to and from appointments. If you do not speak or understand English very well, arrange to have a family or support person with you who can help you or ask us to arrange an interpreter for you.

Pre-Admission

This is a time where we review your general health and the medicine you take. You are also given instructions on how to get ready for your surgery and what to expect while in the hospital.

Depending on the kind of surgery you are having and your overall health, you will either come in to the Pre-Admission Clinic or a nurse calls you on the telephone.

Pre-Admission Clinic Visit

Wh	nat to bring:
	This booklet
	Your BC Services Card / BC Care Card (personal health number)
	Photo Identification (such as a driver's license)
	The medicines you are currently taking in their original containers.
	This includes prescription medications, medicines you buy off the shelf in the pharmacy (or over the internet), vitamins, and herbal supplements. A support person if you wish (to help you remember what is said).
	An interpreter
	If you don't speak or understand English well enough for medical conversations you can either bring someone with you as your interpreter $\bf or$ ask us to arrange a medical interpreter for your visit.

During your visit, you meet with a nurse. You might also meet with an anesthesiologist who talks with you about any specific health concerns. The anesthesiologist is the doctor who gives the medicine that keeps you asleep and pain-free during the surgery. The anesthesiologist could also talk with you about options for managing your pain during surgery. You might have blood work or

other tests done while at the hospital.

If you have diabetes, you will get instructions during your Pre-Admission Clinic phone call or visit about when and what to eat and drink, and how to take your diabetes medicine before your surgery.

Or	ne week before
	Arrange for:
	- A ride to the hospital
	- A ride home from the hospital
	- An adult to stay with you and help you for a few days at home after surgery
	Stop taking:
	- All vitamins and herbal/health supplements (such as garlic, gingko, kava, St. John's Wort, ginseng, don quai, glucosamine)
	- Fish oils
	Continue to take your regular medicines unless you have been told to stop by the anesthesiologist.
	- Use the space on the inside cover to list which medicines to stop and when.
	Stop any shaving, waxing, threading, or using any other method of removing hair from around where you are having surgery.
	Read all the instructions given to you for preparing for surgery and buy items needed.
	e-Admission Clinic or your surgeon asked that you do a Chlorhexidine Skin eaning.
	No. No special skin cleaning needed.
	Yes. Buy from a pharmacy the Chlorhexidine Gluconate product described in the skin cleaning instructions given to you by the Pre-Admission Clinic nurse.
Th	e day before
	Follow your regular daily routine.
	If you are having bowel surgery, follow the instructions from your surgeon for how to prepare your bowel for surgery. Start this preparation this morning.
	For 24 hours before surgery, do not drink any alcohol.
	Pack your bag for the hospital.
	ete: Ask a family member or friend to bring your bag to you after the surgery.

Personal belongings to pack		
■ Non-slip slippers or shoes		
☐ Bath robe	Label your bag with	
☐ Toothbrush and toothpaste	your name. You might	
☐ Comb and/or brush	want to also label your belongings.	
☐ Shaving supplies (unscented)		
Eye glasses and case		
Dentures and container		
Hearing aid(s), case, and spare battery(s)		
Walking aid(s) such as cane, walker, or wheelchair		
☐ If you have sleep apnea, your CPAP machine or dental device		
Remember: The hospital is a public building. Valuables can go r	nissing. Leave	
valuables at home. Send anything home that you are not using.		
The night before		
Between dinner and midnight, eat a light snack or just drink son	ne juice.	
We suggest around 8:00 p.m.		
* If having bowel surgery and have done bowel preparation, juice. No food.	only drink <u>clear</u>	
Snack examples:		
- Bowl of yogurt and glass of juice 2 to 3 cups		
- Piece of toast or bowl of cereal (500 to 750 mLs)		
and glass of juice		
- Bowl of rice and glass of juice		
If you have diabetes, follow the instructions given to you.		
Clean your skin as instructed by the Pre-Admission Clinic nurse.		
If you did not get any specific instructions, take a shower or bath w	ith soap and	
water tonight and in the morning. Wash your hair just once.		
 Do not put any products on your skin (such as lotion, make-up, cologne/perfume). 		
☐ Put on clean pyjamas (bed clothes) and sleep in clean bedding sheets.		
□ Do not eat any food after midnight (12:00AM).		
You can continue to drink <u>clear</u> fluids up until 4 hours before your se	urgery time.	
Clear fluids: Liquids you can see through such as water and juices (cranberry).	apple, grape,	
No milk products. No alcohol. No juices with pulp.		

What to expect before surgery

- You are met by a nurse who:
 - Gives you a hospital gown to change into.
 - Asks you about your medications, allergies, and any reactions you have had to medications.
 - Checks your blood pressure, pulse, and temperature.
 - Starts an intravenous (I.V. for short: sounds like 'eye-vee') in one of your arms.
 - Gives you some medicine into your I.V. or for you to swallow.
- You are moved to the pre-surgery holding area.
- In the pre-surgery holding area, you meet:
 - the nurses who will be working with your surgeon
 - the anesthesiologist, who confirms your plan for anesthesia during surgery
 - the surgeon, who marks the area or side being operated on using a special pen
- Once in the Operating Room, we ask you to remove your glasses, dentures, and finally, your hearing aide(s). We return them to you when you wake up in the Recovery Room after your surgery.
 - You will be asked many times what your name is, what surgery you are having, where on your body you are having your surgery, and if you have any allergies.

The morning of

Clean your skin as instructed by the Pre-Admission Clinic nurse.
If you did not get any specific instructions, take a shower or bath with soap and water. Wash your hair.
Dress in clean clothes.
Remember - Do not put any products on your skin (such as lotion, make-up, or cologne/perfume).
Remove all jewelry and piercings.
Brush your teeth (or dentures), tongue, and roof of your mouth.
Take your morning medications with a sip of water as directed by the anesthesiologist (or your surgeon).
- Use the space on the inside cover to list which medicines to take.
4 hours before your surgery time:
Drink 1 ½ cups (375 mLs) of <u>clear</u> juice.
 Drinking clear juice before surgery keeps you hydrated, helps control your blood sugar, and helps you from feeling sick to your stomach after surgery

- After this, do not drink anything.
- If you have diabetes, follow the instructions given to you.
- The last time you drink any clear fluid is 4 hours before your surgery time.

what to bring to the hospital		
☐ This booklet		
 Your BC Services Card / BC Care Card (personal health number) and Photo Identification (such as a driver's license) 		
☐ Hospital Identification bracele	et (if you got one from the laboratory).	
☐ A list of all the medicines you	are currently taking	
☐ If you have diabetes, your diabetes pills or insulin		
Someone to act as an interpreter (if you don't speak or understand English well).		
Remember to leave at home:		
your wallet or pursecredit cards	moneyjewelry	

In the Surgical Unit

- You can have visitors here. We have open visiting hours. However, remember rest is important for your recovery. Ask your visitors to limit their visits to short periods.
- Your family member or friend can bring in your bag with your personal belongings.
- Your nurses regularly check your blood pressure, pulse, breathing, temperature, surgery site, and pain level.

Take part in your recovery

- You play an important part in your recovery.
- In addition to activities to help you recover from your surgery, on the next few pages we also encourage you to do a number of things to help prevent pneumonia, blood clots, or other problems.

Managing pain

- You might have some pain or discomfort.
- It is important that you are comfortable so you can rest, move, heal, and exercise. Tell your nurse if the pain is making it hard for you to move, deep breathe, or rest. Don't wait until you are having a lot of the pain before you ask for help.
- To help us know how much pain you are having, we use a pain scale like this one here. These faces show how much something can hurt (not what your face looks like when in pain). From left to right, the faces show more and more pain.

You can point to the face that shows how much you hurt, or tell how much you hurt using words or a number from 0 to 10.1



If it is easier, you can also describe your pain as 'small', 'medium', or 'large'.

- Your pain needs to be at a comfortable level. You should be able to do normal
 activities such as washing, sitting, eating, and walking. For most people, this
 means have a pain score less than 4.
- We regularly give medicines for pain to help keep your pain under control. Depending on your surgery, the pain medicines we give could include:
 - Pills
 - Injections (needles)
 - Into the intravenous (I.V.)
 - Epidural (numbing medicine given through a small tube into your back)
 - Nerve block (numbing medicine injected around the nerve near the surgery area)
- Other ways you can help ease your pain:

Do slow, relaxed breathing. Listen to music.

Change positions

Hold a pillow to splint the surgery area when you cough or move

Feeling sick to your stomach

- If you feel sick to your stomach (nauseated) or throw up (vomit), we can give you medicine to settle your stomach. Let us know as soon as you feel sick.
- Other ways to help settle your stomach:
 Place a cool, damp cloth on your face or back of neck.
 Take small sips of cold water or suck on ice chips.

Getting moving

- Expect to be asked to sit up and even get out of bed the day of your surgery, unless your surgeon has ordered something different.
- For the first few times you get out of bed, call for a nurse to be with you. Never try to get up on your own until you are steady on your feet.
- Get up and sit in a chair for your meals.

¹ Faces Pain Scale - Revised (FPS-R), wwwliasp-pain.org/fpsr. Copyright © 2001, International Association for the Study of Pain®. Reproduced with permission.

- Go for a walk. Start with one walk and progress to 2 or more times a day.
- Do leg exercises. Bend and straighten your legs. Tighten and relax your buttock and thigh muscles. Point your toes up and down.

Drinking and eating

- For most surgeries, you can begin to drink fluids shortly after arriving on the Surgical Unit. For many surgeries, you can start eating within a few hours.
- Your body needs healthy foods with extra calories and protein to help you heal.
- Passing gas is a sign your bowels are starting to 'wake up' after surgery. Your nurse asks you often if you are passing gas or if your bowels have moved (had a poop).

Both having surgery and taking pain medicine can slow down your bowels. Getting out of bed, sitting up, and going for walks helps get your bowels moving.

Keeping healthy after surgery

A nurse in the recovery area will let you know when you are able to go home or are ready to be moved to a unit in the hospital.

If you are going to a unit in the hospital, here are some things you can do to stay healthy during your hospital stay.

- Clean your teeth and mouth 2 to 4 times every day.
- Keep head of bed at 30 degrees and foot of bed at 15 degrees, unless instructed not to do so
- Sit on the edge of the bed as soon as you can. Sit in a chair for meals or sit up in hed
- Walk 3 or more times every day. If pain prevents you from getting up, ask for pain medication
- Do deep breathing and coughing at least 10 times every hour. Use an incentive spirometer if one is given to you.
- Wear non-slip shoes or socks when up. Never try to get up on your own if you are unsteady. Call a nurse to help.
- Ask for your urinary catheter to be removed, if you have one.
- Use the toilet (or bedside commode) to empty your bladder or bowels.
- Wipe from front to back.
- Clean your hands often.
- It is the best way to stop the spread of germs.
- Clean your hands with soap and water or hand sanitizer.
- Clean your hands before eating and drinking, and after using the toilet and after touching surfaces others use.
- Ask others to clean their hands before touching you

Going Home

Whether you go home a few hours or several days after your surgery, you will be given instructions on how to take care of yourself when you go home (discharge instructions).

Your health care team will explain everything you need to know or do when you leave the hospital. Remember, if you do not speak or understand English very well, it is good to have a family member or support person who can help translate for you. The healthcare team can also make arrangement for an interpreter if you do not have a family member or support person available. The Taking Care at Home After Surgery information in the Appendix will help you and your support person know what you need to do over the next few weeks.

It is particularly important for you to ask the surgeon or nurse what signs or symptoms you might expect, what is normal, what is cause for concern, and what you should do if you are concerned.

Your family practitioner will receive reports from the surgeon so they are aware of your condition and can provide appropriate ongoing care.

This is important!

Be aware that anaesthetic drugs may stay in the body for up to 24 hours and you will be impaired during this period. Do not:

- Go to work or do business
- Make significant decisions of any kind
- Drive a car or work with machinery
- Travel alone by public transportation
- Do any strenuous activities
- Drink alcohol
- Take tranquilizers, sedatives, or sleeping pills
- Care for another person such as babies, small children, elderly people who need help

FAQ

Before Surgery

What is included in the term "surgery?"

The term "surgery" covers a wide range of medical procedures, including:

- Procedures to repair wounds or broken bones caused by an accident;
- Procedures to rectify a life threatening illness, such as removal of an inflamed appendix; biopsies, where a small bit of tissue or fluid is removed for testing to aid in determining a diagnosis; and,
- Procedures that may improve quality of life, but that do not threaten life if they are not performed, such as cataract surgery or knee replacement.

Why do some people have to wait longer than others?

Emergency surgeries are always done quickly. Since emergencies cannot be planned, scheduled surgeries are sometimes delayed. When you and your surgeon agree that you are going to have surgery, the surgeon puts you on their case list. Some surgeons have more patients waiting for surgery than others. Patients and physicians, including your family practitioner, now have access to information which provides the names of the five surgeons most likely able to perform your surgery sooner than others. This information is available at www.fraserhealth.ca > Your Care > Hospital > Surgery > Choosing a Surgeon.

What should I ask the surgeon at my first consultation?

It is important for you to ask whatever questions come to mind, even if they might seem silly. There is a list of suggestions in the Appendix to give you some ideas of things you might want to ask. Jot down any other questions you want to ask so you don't forget when you are with the surgeon.

Can I ask for a second opinion?

Yes. See the Choosing a Surgeon section for more information.

How do I decide between different surgeons' opinions? Where can I get advice? Your family practitioner knows you best and is in the best position to help you make a decision that is right for you. If you want to do your own research, most Fraser Health hospitals have a library and where you can ask for help finding information about your condition and different treatments.

Surgery Day and Hospitalization

Will the surgical team know about my other health issues?

The referral sent from your family practitioner to the surgeon will include information about your general health. When you first meet with the surgeon for a consultation, mention your other health issues. If you are asked to attend a Pre-Admission Clinic, the team there will ask you questions and you can also advise them of your other health issues. Don't be afraid to speak up or ask questions. You are a very important part of the team and any information you have about your health is valuable.

Why are there so many different people involved in my surgery?

There are many team members that you'll meet and many others that you won't. Each team member has a specific job to do.

Surgical consent is discussed and completed in the surgeon's office. Your surgical journey starts with seeing the surgeon and you deciding to have surgery.

The Pre-Admission Team contacts you for any appointments with the nurse or Anesthetist if needed. You will be given instructions for where to go and how to prepare for the day of surgery.

The day of surgery you will meet the operating room team. For recovering after surgery, you will be cared for by the PACU (Post-Anesthetic Care Unit) nurses, and

then cared for by the surgical inpatient team or day care unit team before going home.

Even though we do thousands of surgeries each year, the entire team is very serious about making sure that each and every patient is very well cared for.

Can I find out before exactly what the surgeon is planning to do, and then what actually was done to my body during surgery?

Yes, and yes. The law requires that the surgeon obtain your "informed consent" before surgery so that means that they must give you enough information for you to understand what will be done and the risks and benefits. Beyond that, it is up to you to decide how much information you want. If you want to more know, talk to your surgeon.

Going Home and After Care

If you had a medication to make you drowsy or to put you to sleep for your surgery, you must go home with someone who is a responsible adult. These drugs can stay in your body for us to 24 hours.

You must tell the nurse when you check-in on surgery day, who is going to help you. Your surgery could be cancelled if you do not have arrangements made because it is not safe for you to travel alone. The person helping you can go in a taxi or on the bus with you, so it's not necessary for them to have their own car.

If you <u>did not</u> have medication to make you drowsy or make you sleep with a minor surgery or some diagnostic procedures, then you may go home without a responsible adult.

Who will take care of me when I go home?

You will not be sent home until your care team is sure that you will be able to take care of your own basic needs, like going to the washroom. If you require medical care at home, this will be discussed with you before you go home. Ask your surgeon ahead of time, what kind of help you might need after you go home. Ask a friend or family member to check in on you each day, and help you with things like preparing meals.

Am I supposed to make an appointment to see my surgeon after I'm home for a while?

Before you go home, the care team will let you know if you need to see your surgeon again or if you are to go back to see your family practitioner.

When will I know if the surgery "worked?"

Ask your surgeon before surgery day what to expect during recovery, and how you will know that you are better.

The surgeon said that I'm going to need rehabilitation. What is that, and how do I arrange it?

Rehabilitation includes a number of different therapies, like physiotherapy and occupational therapy. If your surgeon or family practitioner thinks you need rehabilitation, a referral will be made for you and someone from rehabilitation will contact you. If you have extended health benefits, you can obtain physiotherapy services without a referral.

Family and Friends

If I bring someone in for surgery, can I stay?

It is not necessary for you to stay, but you certainly can if you wish to. Some minor procedures are very quick and don't require very long in recovery, while others can take several hours. Ask any of the nurses when your friend/family member checks in on surgery day. If you leave, someone will call you when it's time to come back to take the person home.

What can I do to support someone having surgery if I am asked to help with interpretation?

If you are supporting your family member or friend having surgery as an interpreter, please be available before and after the surgery to help with understanding information. It's good for you to also hear the discharge instructions after surgery. Your friend or family member may not remember all the information after having medications that impair your memory.

Who do I ask about how the surgery went and where my friend/family member is now?

If you are in the waiting area, the surgeon or nurse will come out to tell you how the surgery went or if you leave your phone number, someone will call you.

When can I visit my friend/family member in hospital?

That really depends on the situation, and remember that it is very important for both you and the patient to get plenty of rest. Once the patient has been moved to a unit, talk to the nurse about what would be best.

How do I know who is working with my family member when I come to the hospital each day?

The easiest way is to ask any of the staff members on the unit. There is usually a spot at the nursing station where all of the patients and their nurses are listed, so you can also look there.

Who can I ask about my family member's status every day?

The best person to ask is the nurse assigned to them. See the question right above.

Can I bring in food for family member or friend?

Usually yes, but ask their nurse first. Some patients need special diets, particularly the first few days after surgery.

How do I get my friend/family member home?

If you do not have your own vehicle, you can take a taxi or bus. The important thing is for your friend/family member to have someone with them – it is not safe for them to travel alone.

For Family and Friends

It is really important for people having surgery to have friends and family members to offer support and assistance. This section is dedicated to people like you who are kind and caring enough to learn more about how they can help.

If you review the Preparing for Surgery section, you'll see that we suggest that every person referred to a surgeon ask someone close to them to be their support person. This one key person is sometimes all that is needed. In other situations, the support person may take on the role of coordinator, making arrangements with others to help out. Below are the main things you need to know. There is also a Support Person Checklist in the Appendix that you may want to use.

Stress and Medications Can Impair Memory and Clear Thinking

Thinking about having surgery can be stressful, and stress can prevent us from remembering things and make it difficult to think clearly. Many medications can have the same effect. One of the ways you can help is to go with the patient to their appointments with the surgeon and at the Pre-Admission Clinic. Listen carefully, ask questions, and write information down, so it is there for you and the patient to review later.

Surgical Patients Cannot Go Home Alone

If your family member or friend has had a medication to make them sleepy or that put them to sleep for their surgery, they must go home with someone who is a responsible adult. These drugs can stay in their body for up to 24 hours.

If your family member or friend <u>has not</u> had a general anesthetic or any medication to make them sleep with a minor surgery or some diagnostic procedures, they may go home without a responsible adult.

Assume that your friend/family member will need to be driven or escorted home, unless you are specifically told otherwise by a member of their surgical team.

It is not necessary for you to have your own vehicle. You can accompany the patient in a taxi or on the bus. The important thing is for them to have a clear headed adult with them to ensure their safety.

You and the Patient Need Sleep

Most patients enjoy having visitors and some would love to have you nearby around the clock when they are in hospital. It is very important though, for both you and the patient to get a good night's sleep, and for the patient to rest guietly several times each day.

It is therefore best for friends and family to leave the hospital in the evening, and to allow the patient some time alone during the day to rest.

Ask the patient's nurse for guidance about what is best for your friend/family member. Some hospital units have rest periods when visiting is not permitted.

After the patient goes home, they may still need to rest several times each day. You can help by coordinating visitors and encouraging nap time.

At Home When to Get Help

You or your family member should call your surgeon or family practitioner if:

Call your surgeon or family practitioner if you have any of the following:

- You have a fever over 38.5°C (101.3F).
- You feel increasingly tired or dizzy.
- Your calf or lower leg is red, tender, or painful.
- You have problems urinating (going pee)
- You have stinging, burning, or pain when you urinate (go pee)
- Your urine smells bad.
- Your incision is red and swollen, and feels hot to touch.
- You see blood or pus coming from the incision.
- You have pain that does not decrease or ease with pain medicine.
- Your pain is stopping you from moving and recovering.
- You have a cough that continues to get worse.
- You feel sick to your stomach or are throwing up often for more than 24 hours.
- You have diarrhea that lasts for more than 2 days.

If you cannot contact your surgeon or family practitioner call HealthLinkBC at 8-1-1 to speak to a registered nurse any time - day or night.

You or family member should Call 9-1-1 for an ambulance *if the following happens:*

- You have trouble breathing or any pain in your chest.
- You have sudden severe pain that get worse even with pain medications.
- You feel cold but are sweating.
- You start shaking.

Important: You should NOT drive yourself to the hospital Emergency Department. Do not eat or drink anything unless you have been assessed and you have been advised you can do so!

Getting Help at Home

If your friend/family member needs nursing care or assistance bathing, the care team at the hospital will make a referral to Home Health, and they will contact the patient to make arrangements.

Getting Help for You

It is very important for you to take care of yourself when you are helping to take care of someone else. It is not selfish for you to take time to be alone or to go out and do something you enjoy. There are likely other friends, family members, neighbours, or people from church who would be more than happy to help out if they knew what was needed, so just ask.

Don't be afraid or embarrassed to ask for help if you want someone to talk to about your own emotions or fears. All hospitals have social workers that you can talk to. You can also talk to your family practitioner if you are worried about your own wellbeing.



Appendices Follow



Some of the Questions You May Want to Ask Your Family practitioner

	Why do I need surgery?	
	Is there anything other than surgery that could be done to treat my condition?	
	What is the medical term for the surgery you are recommending?	
	Is it important for me to have this surgery soon?	
	Will you include information about my other health conditions in your referral to the surgeon?	
	Will you include a list of the medications you've prescribed for me in your referral to the surgeon?	
	Is there anything I should or should not do while I'm waiting for my first appointment with the surgeon?	
	Do you have a specific surgeon in mind to send me to?	
	Is this one of the surgeons who could likely do my surgery sooner? (Your doctor can check at this web link: http://physicians.fraserhealth.ca)	
Jot down other questions you want to ask:		



Some of the Questions You May Want to Ask Your Surgeon

bou	bout Alternatives, Timing, Risks, and Benefits:		
	Why do I need this surgery?		
	What are the alternatives to surgery?		
	What are the risks, complications or side effects of this surgery?		
	What are the risks of NOT having this surgery?		
	How often do you do this kind of surgery?		
	What kind of outcome is typical?		
	How long am I likely to wait to have this surgery?		
	Can I arrange to be contacted on short notice if a cancellation occurs?		
	Am I likely to get worse in that time?		
	Are there any symptoms that I might start having that indicate the need for me to go to emergency?		
	What should I do if I change my mind about having the surgery, if I need to reschedule, or if my condition improves and I no longer need surgery?		
lote	s:		

About Freparing for Surgery.
☐ Can you describe to me what this procedure entails?
☐ What kind of scarring can I expect?
☐ What can I do now to decrease my risk and help speed my recovery?
Notes:
About Surgery Day:
☐ What kind of anesthetic will I be given?
☐ How long will I be in the Operating Room?
☐ How will my pain be managed after surgery?
☐ How will my diabetes (or other health condition) be managed during and after my procedure?
☐ When will I be able to eat and drink after surgery?
Notes:

About Staying in Hospital:
☐ How many nights should I plan on staying in the hospital?
Notes:
About Going Home:
$\ \square$ What type of incision care will I be expected to do after surgery?
☐ Who will take my stitches out?
☐ Are there any special instructions that will help speed my recovery?
☐ Will I need to arrange for help or home health services during my recovery?
☐ What type of follow-up care will I require?
☐ Will I need rehabilitation therapy after surgery?
☐ What prescriptions will I need to take following my surgery?
☐ Can I have my prescriptions filled prior to surgery so they are available when I return home?
☐ What is a normal recovery like after this procedure?
☐ When will I be able to return to my normal activities including exercise?
☐ When will I be able to return to work?
Notes:
Staying in Hospital Checklist
If your surgeon has said that you will be staying overnight in hospital after your surgery, this checklist whelp you make plans and pack for your stay. Please also refer to the Preparing for Surgery Checklist whi is for everyone having surgery.
Additional Arrangements
If you are going to be in hospital for more than a few days, you may also need to make arrangements t pay your rent/mortgage and other household bills. You can add this to your Preparing for Surgery Check

list plans.

If you have an extended health care plan, the cost of a private or semi-private room may be covered. Be sure to have information about your plan, including your account numbers, available for the nurse who calls or see you at the Pre-Admission Clinic.

Things You Need and Should Bring In

You Need:

- Grooming supplies; e.g. toothbrush, toothpaste, hairbrush, soap, shampoo, shaving kit.
- All my prescription medications, non-prescription medications, herbal remedies, vitamins, supplements, respiratory inhalers, eye drops, medicated skin cream, transplant medications, estrogen patches, birth control pills, and any other health products.
- Hearing aids, dentures and eyeglasses and cases for each.
- Slippers with non-slip soles.
- Socks and comfortable shoes with rubber, non-skid soles (such as running shoes).
- Any walking aids, such as cane or walker.

Things You Need and Should Bring In

You Want:

- Lip and skin moisturizer (the air in the hospital is dry).
- A housecoat that opens all the way down the front.
- A pair of pajama pants.
- My cell phone.
- A small amount of cash (\$20 \$40) to cover the cost of TV and phone rental, newspapers, coffee shop, etc.

Please bring only a minimal number of personal items and put your name on all items that you do bring as the hospital cannot be responsible for care of your personal belongings.

Please do not bring:

- Watches or jewelry.
- Additional pieces of identification (you do need your BC Care Card and one piece of photo ID like your driver's license).
- Credit cards or large amounts of cash.
- Large pieces of electrical equipment, like a TV or laptop.

Preparing for Surgery Checklist

Having surgery is a process that has many steps. These steps occur before, during, and after the surgical procedure itself. This checklist is designed to help you prepare for surgery, including things that you may need to arrange 6 or more weeks in advance.

Please note that there is a separate checklist to help you prepare for a stay in hospital. If your surgeon has told you that you will be in hospital at least one night, please see the Staying in Hospital checklist in the Appendix.

There is also a separate checklist for you to give to your support person.

While we have included a brief section on preparing for coming home, you may also wish to review the Taking Care at Home After Surgery information if it applies to you.

This Preparing for Surgery Checklist is divided into 6 sections as follows:

- 1. Personal Information
- 2. Medical & Physical Preparation
- 3. Things to Bring on Surgery Day
- 4. Work, Volunteer, and Other Commitments
- 5. Home & Family Arrangements
- 6. Preparing for Coming Home

Keep this checklist with you so you can write down information as you get it at appointments or by telephone.

Be sure to bring this checklist with you on surgery day.

Personal Information

My home address and phone number:	My support person or next of kin, name and phone number:	
The medications I take: 1	The vitamins, supplements, and other health products I use: 1	
My care team: My surgeon's name and phone number: My family practitioner's name and phone number:		
Try surgeons name and phone namber.	iviy farmiy praetitioner's name and priorie namber.	
My pharmacy name, address, phone and fax numbers:		
My surgery:		
The surgery I am having is called:	My surgery will be performed at:	
	The address is:	
On this part of my body:	On this date: I need to check-in at this time:	

Medical & Physical Preparation

As soon as you know that you are going to have surgery:

☐ Make an appointment with my family practitioner to talk about:		
(Date	e and Time of Appointment:)	
My other health conditions and how these should be managed before, during, and after surgery Quitting smoking, because I will recover much faster and be in better health overall if I quit before my surgery.		
	My use of alcohol, because I will recover much faster and be in better health overall if I quit before my surgery; and because if I drink too close to my surgery, it could be cancelled.	
	My use of street drugs, because I will recover much faster and be in better health overall if I quit before my surgery; and because if I use drugs too close to my surgery, it could be cancelled.	
	An exercise program, because the more physically fit I am before surgery, the faster I will recover.	
Othe	r things I want to talk about:	
_		
_		
My plans for these issues are:		

Medical Appointments / Lab Tests / Imaging Appointments (e.g. CT scan)

Go to: ☐ Any lab ☐ My family practitioner	Hospital
Other To have/attend:	
Address:	
My appointment has been set for me.	This appointment is on:
☐ I need to callto make an	(date),
appointment.	and I will likely be there forhours.
My special instructions are to:	I need to bring:
	My BC Care Card
	Photo ID (e.g. driver's licence)
Go to: ☐ Any lab ☐ My family practitioner	Hospital
Other To have/attend:	
Address:	
My appointment has been set for me.	This appointment is on:
☐ I need to callto make an	(date),
appointment.	and I will likely be there forhours.
My special instructions are to:	I need to bring:
	My BC Care Card
	Photo ID (e.g. driver's licence)
Go to: ☐ Any lab ☐ My family practitioner	Hospital
Other To have/attend:	
Address:	
My appointment has been set for me.	This appointment is on:
☐ I need to callto make an	(date),
appointment.	and I will likely be there forhours.
My special instructions are to:	I need to bring:
	☐ My BC Care Card
	☐ Photo ID (e.g. driver's licence)

Medical Appointments / Lab Tests / Imaging Appointments (e.g. CT scan)

Go to: ☐ Any lab My family practitioner	Hospital			
Other To have/attend:				
Address:				
☐ My appointment has been set for me.	This appointment is on:			
│	(date),			
appointment.	and I will likely be there forhours.			
My special instructions are to:	I need to bring:			
	☐ My BC Care Card			
	Photo ID (e.g. driver's licence)			
Go to: ☐ Any lab My family practitioner	Hospital			
Other To have/attend:				
Address:				
	I			
My appointment has been set for me.	This appointment is on:			
☐ I need to callto make an	(date),			
appointment.	and I will likely be there forhours.			
My special instructions are to:	I need to bring:			
	☐ My BC Care Card			
	Photo ID (e.g. driver's licence)			
Go to: ☐ Any lab My family practitioner	Hospital			
Other To have/attend:				
Address:				
☐ My appointment has been set for me.	This appointment is on:			
☐ I need to callto make an	(date),			
appointment.	and I will likely be there forhours.			
My special instructions are to:	I need to bring:			
	☐ My BC Care Card			
	Photo ID (e.g. driver's licence)			

Pre-Admission Clinic

Your preparation for surgery may include an interview conducted by telephone or by appointment at a Pre-Admission Clinic. If you are notified that you are to call or have an appointment at a Pre-Admission Clinic, you must call back or attend at the scheduled time. If you don't, your surgery will be cancelled. However, if you are not feeling well on the day of your appointment, please call the pre-admission clinic before you leave home. Depending on your illness, your appointment may be re-scheduled.

If you will need to have an interpreter at your appointment or if you have been told that you have MRSA, VRE, or C. difficile, or received out-of-country healthcare please tell the person who calls you, or call the number on the sheet provided to you about the Pre-Admission Clinic.

Go toHos	pital 🔲
Address:	
My special instructions are to:	This appointment is on: (date)at (time), and I will likely be there forhours. I peed to bring: My BC Care Card Photo ID (e.g. driver's licence) All my prescription medicines, non-prescription medications, herbal remedies, vitamins, supplements, and any other health products.
☐ My support person will take/come with me. ☐ I will ask	to take/come with me.

Things I Need to Buy or Pick Up a Few Days Before Surgery Buy Item: Pick up at: Done Chlorhexidine Gluconate skin cleaning product, if directed to purchase П \Box П Bowel prep/enema П П Medication Cane or Walker Crutches or Braces П Cryo cuffs Plain soap (unscented baby soap or soap for sensitive skin, with no lotion) 3 Days Before Surgery If you are sick, have a cold or flu, or if there have been any other recent change in your health, call your surgeon today to describe your symptoms. If you haven't done so already, review the Exercises After Surgery sheet and practice these. **The Day Before Surgery** ☐ Remove all makeup Remove nail polish and false nails (and do not reapply before surgery) (and do not reapply before surgery) ☐ Wash off any perfume or scented deodorant or ☐ Remove contact lens (and leave them out until after your surgery) skin lotion (and do not reapply before surgery) ☐ Shower/shampoo hair, beard and scalp as ☐ If you are sick, have a cold, flu or fever, call your instructed surgeon Do not smoke, drink alcohol, or use street drugs for 24 hours before your surgery. It is certainly best if you have stopped using these substances months before your surgery, but even 24 hours of abstinence will be helpful. Follow the instructions that your surgeon, anesthesiologist or pre admission clinic nurse provided you about when to stop eating solid food and when to stop drinking clear fluids before your surgery. It is now common to allow clear fluids up to 4 hours before surgery. Put a sign up on the fridge, the snack cupboard, and near the sink as reminders. If you have been told to take medications, you can take them at the time specified with a small sip of water. Clear Fluids: are liquids you can see through such as water and juices (apple, grape, cranberry). No milk products. No alcohol, No juice with pulp. Right Before I Leave Home on Surgery Day ☐ Take off all jewelry Shower/shampoo hair, beard and scalp as instructed ☐ Take out all body jewelry (e.g. piercings) ☐ Brush teeth (but don't swallow any water)

Things to Bring with Me on Surgery Day ☐ My BC Care Card Please do NOT bring: ☐ My extended health care information • Your purse or wallet ☐ Photo ID (e.g. driver's licence) • Any jewelry (please remove rings if ☐ All my prescription medicines, non-prescription you can) medications, herbal remedies, vitamins, supplements and any other health products. • Cash, credit or debit cards ☐ Cases for my glasses/contacts, dentures, hearing aid Laptops My CPAP, Bilevel or dental appliance (only if you are having a general anesthetic) Expensive clothing (wear clothes that • are easy to get off and on) ☐ Magazines to read while I'm waiting ☐ I have also been asked to bring: Expensive books Any other valuables Things to get ready for my support person to bring in after my surgery: (when you are ready to go home after day surgery or after you have been moved to a hospital unit if you are staying in hospital overnight) Crutches, cane, braces, or walker (if surgeon has indicated a need) Cash credit or debit cards (in case you need to pick up medication on the way home or want to rent a TV while in hospital) Other Notes:

Work, Volunteer, and Other Commitments

Reference Dates:	Notifications:
My surgery is on: I will be in hospital until: I will be up and around by but should not I will be able to return to my normal activities on:	Work Supervisor Volunteer Supervisor
☐ Does my extended health care plan cover the co	osts of a semi-private or private room in hospital?
Other things I need to remember:	

Home & Family Arrangements

Ιn	eed to make arrangements for:	I will ask my support person to do this:	I will ask this person to do this:	Confirmed
	Getting to appointments before surgery			
	Getting to the hospital/surgery centre			
	Someone to speak to the surgical team and let others know when I'll be home/moved to a hospital unit			
	Child care			
	Elder care			
	Pet care			
	Getting home***			
	Getting nome			
	Picking up medications/supplies I might need right away			
	Picking up medications/supplies I might			
	Picking up medications/supplies I might need right away			
	Picking up medications/supplies I might need right away Help when I get home Help getting to therapy or other appointments before I am able to go by			
	Picking up medications/supplies I might need right away Help when I get home Help getting to therapy or other appointments before I am able to go by			
	Picking up medications/supplies I might need right away Help when I get home Help getting to therapy or other appointments before I am able to go by			

*** Unless you have been specifically told otherwise, you MUST make arrangements for someone to drive or accompany you home by taxi or on the bus. If you do not have someone to help you get home, your surgery may be cancelled.

Preparing for Coming Home

Even minor surgical procedures may have a bigger effect on your body than you expect. It is best to make whatever arrangements are necessary for you to be able to rest for at least 24 hours after going home. Some patients may need a week or longer before they can prepare a family meal, do housekeeping, or care for children even if they have been in the hospital for a long time since their surgery. Be sure to ask your surgeon about what you should expect.

All surgical patients will receive discharge instructions. Be sure to ask any questions you have and get a telephone number for someone you can call if questions come up later. Please also review the Taking Care at Home After Surgery information in the Appendix.

Exercises After Surgery

If you are having a general anesthetic or if you will remain in bed for a few days after surgery, your lungs and circulatory system will need help to work properly. Practice these exercises at home before your surgery. After surgery, ask your nurse when you can start doing these lung and leg exercises. Do both exercises once per hour while awake, until you are out of bed for most of the day.

Deep Breathing and Coughing

- 1. Take a slow, deep breath, filling the bottom of the lungs first, then the middle, then the top.
- 2. Hold your breath in while you say in your head This will help my lungs recover.
- 3. Blow the air out completely, pushing the last bit of air out from the bottom of your lungs.
- 4. Repeat deep breathing three times; then,
- 5. Take a faster deep breath and cough the air (and whatever comes with it) out from as far down in the lungs as you can.
- 6. Repeat this cycle of deep breathing and coughing a **minimum** of 10 times per hour.

Leg Exercises

- 1. Keeping the heels of your feet on the bed, point and stretch your toes down toward the end of the bed.
- 2. Return to a normal resting position.
- 3. Point and stretch your toes back towards your chin.
- 4. Return to a normal resting position.
- 5. Keeping the heels of your feet on the bed or lifting them slightly if you can, point your toes and move them in a big circle to rotate your ankles. Move your toes clockwise a few times, then counter clockwise a few times.
- 6. Rest for a short time.
- 7. Repeat steps 1 to 6 four more times.

Taking Care at Home After Surgery

This checklist is to help you and your support person know what to do after you go home following your surgery. If you are given instructions verbally or in writing by anyone on your care team, follow those instructions precisely even if they conflict with what is written below. If you are uncertain which instructions to follow, call the surgeon's office.

When to Get Help Call your surgeon or family practitioner if:

- You have a fever over 38.5°C (101.3F).
- You feel increasingly tired or dizzy.
- Your calf or lower leg is red, tender, or painful.
- You have problems urinating (going pee).
- You have stinging, burning, or pain when you urinate (go pee).
- Your urine smells bad.
- Your incision is red and swollen, and feels hot to touch.
- You see blood or pus coming from the incision.
- You have pain that does not decrease or ease with pain medicine.
- Your pain is topping you from moving and recovering.
- You have a cough that continues to get worse.
- You feel sick to your stomach or are throwing up often for more than 24 hours.
- You have diarrhea that lasts for more than 2 days.

If you cannot contact your surgeon or family practitioner call HealthLinkBC at 8-1-1 to speak to a registered nurse any time – day or night.

You or family member should Call 9-1-1 for an ambulance if the following happens:

- You have trouble breathing or any pain in your chest.
- You have sudden severe pain that get worse even with pain medications
- You feel cold but are sweating
- You start shaking

Important: You should NOT drive yourself to the hospital Emergency Department. Do not eat or drink anything unless you have been assessed and you have been advised you can do so!

Avoiding Decisions

Having surgery of any kind, even when it seems minor, can affect your body in ways you may not expect. You may feel groggy or more emotional than usual, and pain medications might interfere with appropriate decision making. It is best to avoid making any major decisions for several days after you get home.

Resting

Even if you feel alert and physically well, your body needs rest time after surgery. Staying in bed all day is not helpful (unless you've been told otherwise), but having a few 20 to 30 minute rest breaks during the day, and getting a good 8 to 9 hours of sleep at night, will help you to recover sooner.

Taking Medications

Decreasing the amount of pain you feel after surgery helps to reduce stress on your body, promote healing, decrease complications, and prevent the development of long-term pain.

If pain medication has been prescribed for you, it is very important that you take this medication on a fixed schedule. **Do not wait for pain to return before you take more medication.** Use the "My Medication Card" to keep track of the medications and supplements that have been told to take after your surgery.

Getting Back to Normal (or even better than before!)

When the period of time that you've been told to avoid activity has passed, get back to your regular routine quickly. Better yet, if you haven't been as active as you know you should, this is a great time to talk to your family practitioner about things you can do to get more physically fit.

If you quit smoking, drinking excessively or using street drugs before your surgery and are tempted to start again, ask for help from your family practitioner right away. The physical withdrawal symptoms may have passed and there is no point having to start over again!

Remember that YOU are the best person to take good care of you. If you can avoid the things that are bad for you and do more of the things that are good for you, you'll be healthier and happier than ever.

Support Person Checklist

How Very Kind of You!

Having a trusted and reliable companion is a big help to surgical patients. Your kindness in agreeing to be the "Support Person" helps to minimize risk and to promote a speedy recovery.

This checklist is designed as a handy tool for you to keep track of what the patient has asked you to take care of and any tasks that you can hand over to other family and friends who are able to assist.

Quick Reference Information

Patient's Full Name:	Patient's Home Address:
Surgeon's name and phone number:	Family practitioner's name and phone number:
Pharmacy name and address:	Nearest hospital Emergency:
Name of the surgical procedure:	Surgery will be performed at:
Date and Time to Arrive for Surgery:	Date and Time to Pick Up to Take Home:

Picking up the patient after their surgery to bring them home is the single most important thing you can do to help. Surgery will be cancelled if no arrangements have been made, as it is not safe for a surgical patient to travel alone even if they have stayed in hospital after the surgery. Please note that if the patient is coming home on the same day as their surgery, most patients need to have a responsible adult stay with them for 24 hours.

Pre-Surgery Appointments

Since people are often worried about their condition and the prospect of having surgery, they are not able to think as clearly or remember things as well as they would otherwise. It is therefore very helpful if you are able to arrange for someone to accompany the patient to their consultation appointments with the surgeon and at the Pre-Admission Clinic (if needed). If the person you are supporting cannot travel alone for some reason, they may also need assistance to get to the lab or to an appointment for diagnostic imaging such as a CT scan.

Appointment:		I will go:	I will ask this person to go:	Confirmed
Date:	Time:	þ		
Address:				
7 (0.01 0.5)				
Date:	Time:			
Address:				
				
Date:	Time:			
Address:				
Date:	Time:			
				_
Address:				
Date:	Time:			
Address:				
7 (0.01 0.5)				
Date:	Time:			
Address:				
Date:	Time:			
Address:				

Home and Family Arrangements

Even minor surgical procedures may have a bigger effect on the body than a patient expects. It is best to have arrangements made as necessary to allow the patient to rest for at least 24 hours after going home. Some patients may need a week or longer before they can prepare a family meal, do housekeeping, or care for children even if they have been in the hospital for a long time since their surgery. If you accompany the patient to their consultation appointment with the surgeon, you can ask what to expect and how you can help.

All surgical patients will receive instructions of some sort when they are discharged. Be sure to ask any questions you have and get a telephone number for someone you can call if questions come up later.

Our Preparing for Surgery Checklist for patients includes a list of arrangements that may need to be made. If the surgery involves arms or legs, if the patient will have an incision, or if a general or regional anesthetic will be used, please also review the Taking Care at Home After Surgery information sheet.

You can use the chart below to note things that you have been asked to take care of and who is able to assist you.

I need to make arrangements to:	I will do this:	I will ask this person to do this:	Confirmed
<u> </u>		'	
	└		└



Keep your medication record up to date.

Remember to include:

- drug allergies
- vitamins and minerals
- herbal/natural products
- ✓ all medications including non-prescription products

Ask your doctor, nurse or pharmacist to review all your medications to see if any can be stopped or reduced.

QUESTIONS TO ASK ABOUT YOUR MEDICATIONS when you see your doctor.

when you see your doctor, nurse, or pharmacist.

1. CHANGES?

Have any medications been added, stopped or changed, and why?

2. CONTINUE?

What medications do I need to keep taking, and why?

3. PROPER USE?

How do I take my medications, and for how long?

4. MONITOR?

How will I know if my medication is working, and what side effects do I watch for?

5. FOLLOW-UP?

Do I need any tests and when do I book my next visit?











SafeMedicationUse.ca



List any allergies (food or latex) or bad reactions to medicines:

List any medical problems:

www.	.frase	rhea	lth.ca

This information does not replace the advice given to you by your health care provider.

Catalogue #265487 **TRIAL** (March 2017) To order: patienteduc.fraserhealth.ca

My Medication Card

Carry a list of your current medications with you at all times.

Share this list with your doctors, pharmacists, and other caregivers to help them provide you with the best care.

My name:
BC Services Card/CareCard number:

Emergency contact and phone number:
Doctor's name and phone number:
Pharmacy name and phone number:
Other doctors (specialists):



My Medication Card



Name of Medicine or Supplement	Strength	How much	How often	Started	Stopped	Reason for taking	Who Prescribed
Example: My drug	20 mg	1 tablet	2 times a day	Mar 23/17		Blood pressure	Dr. Smith

My Medication Card - TRIAL over...