Welcome to Swedish Medical Center. We look forward to giving you the very best care. Our goal is to ensure your entire experience at Swedish is excellent in every way.

Your surgery/procedure is scheduled at the following location:

- Ballard campus  206-781-6245
- Cherry Hill campus  206-215-3200
- First Hill campus  206-215-3200
- Orthopedic Institute  206-215-3200
- Issaquah campus  425-313-7000

Toll-free for all campuses 866-851-5111

Please take the following steps to prepare for your surgery/procedure:

1. Call Swedish Medical Center at the location noted above to preregister for your procedure and to schedule a **required preadmission appointment**.
   - Allow 15 minutes to preregister. The patient must be present for this call and have his or her ID and insurance card available.
   - Preadmission appointments will be scheduled as phone interviews. In-person appointments are scheduled at the First Hill campus only.
   - Please note: If your procedure is scheduled at the Issaquah campus, you will be contacted directly to complete your preadmission interview; no appointment is necessary.

2. If you receive a telephone message from Swedish, promptly return the call to the number left on the message.

3. Once your procedure has been scheduled at the hospital, call your insurance company to confirm authorization.

4. Read this handout carefully and pay particular attention to the pre-operative diet and medication instructions.

**Important financial information:**

It is the patient’s responsibility to contact his or her insurance company to ensure:

- Your doctor has received authorization for professional fees and the hospital charges.
- You know the limits of your coverage and any non-covered charges that may be billed to you personally.

Questions about billing or costs for surgery can be answered by calling 206-320-5300.

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**Preadmission appointment**  
*(Please allow 45 minutes)*

- Date: ____________________________
- Time: ____________________________

Please have with you for this appointment:

- Current list of your medications.
- Your family doctor’s name and phone number.
- Your insurance card.
- List of your past surgeries and current conditions.
- Reports of any past cardiac tests.

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**Surgery/procedure appointment**

- Date: ____________________________
- Time: ____________________________

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*A map with directions and parking for each campus is included in this booklet. Check-in locations for preadmission and surgery are detailed on the map.*

*For more information, visit Swedish.org. Click on the Patient & Visitor Info tab and select Patient Information.*

*For patient rights and responsibilities, visit Swedish.org. Click on the Patient & Visitor Info tab and select Patient Rights & Responsibilities.*
If you have a pacemaker or internal defibrillator, it is VERY IMPORTANT to do the following:

• Notify your surgeon that you have a pacemaker or defibrillator.
• Notify your heart doctor that you are going to have surgery or a procedure because your device may need to be checked before admission.
• During your preadmission appointment, tell the staff that you have one of these heart devices.
• Bring to the hospital for all appointments:
  - The name and phone number of your heart doctor
  - The identification card for your medical device

Unless instructed otherwise by your doctor, follow the guidelines below for taking medicine before your surgery/procedure.

Two weeks before your surgery or procedure:
Stop taking all herbal supplements.

Three days before your surgery or procedure:
STOP taking all nonsteroidal, anti-inflammatory medications such as:
• Celebrex
• Diclofenac (Voltaren)
• Etodolac (Lodine)
• Ibuprofen (Advil, Motrin)
• Indomethacin (Indocin)
• Ketoprofen (Orudis, Oruvail)
• Ketorolac (Toradol)
• Meloxicam (Mobic)
• Nabumetone (Relafen)
• Naproxen (Aleve, Anaprox, Naprosyn)
• Oxaprozin (Daypro)
• Piroxicam (Feldene)
• Sulindac (Clinoril)

On the morning of your surgery or procedure:
Take your prescribed medications that your doctor has told you to continue, including narcotic medication.

Changes in your health
Tell your doctor if you experience any change in your health before your surgery/procedure. Such changes may include a cold, flu, fever, infection or diarrhea, as well as any other major changes.
Pre-surgery/procedure diet instructions

Unless instructed otherwise by your doctor, you must follow these diet instructions before your surgery or procedure.

### Important

#### 8 hours before arrival time

STOP eating all solid foods and drinking liquids you cannot see through, as well as the following:
- NO milk or dairy products
- NO coffee creamer
- NO chewing gum
- NO lozenges
- NO alcohol

You may drink clear liquids, such as water, Gatorade, plain gelatin, apple juice without pulp, clear tea or black coffee.

#### 2 hours before arrival time

STOP drinking all liquids except for medications, as directed by your doctor.

If you have diabetes, refer to page 4 in this booklet.

### Exceptions

Patients with diabetes, GERD or who are pregnant or obese may be advised by your doctor to stop all liquids and solids eight hours prior to arrival.

You may take, with a small sip of water, medications you have been directed to take on the morning of surgery.

### The day before surgery/procedure

- Be sure you know what time to arrive at the hospital.
- Review pre-operative dietary instructions.
- You will need to shower twice in the 24 hours prior to having your surgery. Follow the specific shower instructions included in this booklet.

### High blood sugar

The stress of surgery and being in the hospital can cause high blood sugar in people who have diabetes and even those who don’t have diabetes.

It is very important to control your blood sugar before, during and after surgery. Good blood sugar levels allows for optimal healing and helps prevent infection. Because this is so important, you may be given insulin during your admission. If you are given insulin during the admission process it does not mean you will need it after discharge from the hospital, or that you have diabetes. It simply means your blood sugar was too high for healing to take place.

*IMPORTANT* If you have diabetes, refer to page 4 in this booklet.
**If you have diabetes**

If you take Metformin, stop taking the medication **24 hours** prior to surgery.

If you take insulin to control your diabetes, notify your diabetes doctor that you are going to have surgery or a procedure, in case you need special instructions.

If your arrival time at the hospital is scheduled after noon, talk to your doctor about how to best manage your insulin therapy on the day of surgery.

Unless instructed otherwise by your doctor, please follow the guidelines below for taking diabetes medicines the **evening** before your surgery/procedure.

- If you normally take long-acting insulin (Lantus/glargine or Levemir/detemir) at bedtime, take the usual dose.
- If you take intermediate-acting insulin (NPH) in the evening, take the full dose.
- If you take mixed insulin (70/30, 75/25) before dinner, take your usual dose before dinner the night before surgery.

Unless instructed otherwise by your doctor, please follow the guidelines below for taking diabetes medicines the **morning** of your surgery/procedure.

- Do not take any oral anti-diabetes medicine.
- If you normally take long-acting insulin (Lantus/glargine or Levemir/detemir) in the morning, take half of the prescribed dose the morning of surgery.
- If you take intermediate-acting insulin (NPH) in the morning, take half your usual dose the morning of surgery.
- **DO NOT** take any mixed insulin (70/30, 75/25) the morning of surgery.
- **DO NOT** take any rapid-acting or bolus insulin (regular, Humalog/lispro, Novolog/aspart or Apidra/glulisine) the morning of surgery.
- While traveling to the hospital, bring glucose tablets, sugar cubes or glucose gel (nothing liquid) in case you begin experiencing symptoms of low blood sugar.

- If you have been told that you can drink liquids two hours prior to your arrival time, do not drink any carbohydrate-containing drinks unless directed by your doctor. Some examples of sugar-free liquids are: water, sugar-free soda and tea without sugar.

**If you have an insulin pump:**

- Change your set and site the day before surgery. To ensure the insulin is infusing well, do not change it right before you go to bed.
- Leave the pump set on your usual basal rate and continue wearing it.
- If your morning blood sugar is greater than 180 mg/dl, take half the recommended bolus. Do not give another bolus for at least three hours.
- Bring any insulin pump supplies, including insulin, to the hospital with you in case you need to change your set while in the hospital. It would also be a good idea to bring a case, container or pouch to put your pump in if it needs to be removed before, during or after surgery.
- It is recommended for a family member or friend to be available to take possession of your pump should you need to remove it.

**If you were told to drink a carbohydrate-rich drink:**

- Two-and-a-half hours before you are to arrive at the hospital, drink the carbohydrate-rich drink. If you normally take rapid-acting insulin with meals, take half the normal dose you would take for a meal or for 60 grams of carbohydrate.
- Two hours before you are scheduled to arrive at the hospital, stop drinking all fluids.
Pre-surgery showers

Pre-surgery showering with a special antiseptic soap helps reduce the risk of infection at your surgery site. Because skin is not sterile, showering with a special soap, called chlorhexidine gluconate, cleans the skin and reduces the number of germs.

Purchase a 4-ounce bottle of 4-percent chlorhexidine gluconate antiseptic soap for your two showers. (Hibiclens is a brand name for antiseptic soap). Many pharmacies carry the soap, but you may want to call ahead to the pharmacy to confirm. If you are allergic to chlorhexidine soap, use a regular antibacterial soap instead. Do not use on open wounds or dressings that should not be removed.

If you are having surgery above your chin, use regular soap for your showers. If you are having brain surgery, call your surgeon's office for special instructions.

**Supplies**
You will need clean washcloths and clean towels for each shower and your normal shower soap, shampoo and the chlorhexidine gluconate antiseptic soap.

**Showering**
Shower two times before your surgery using the chlorhexidine soap.

Do not use chlorhexidine soap near your eyes, ears, nose, mouth, vagina or the end of the penis. If the soap gets on these areas, rinse well with water.

**Shaving**
Do not shave or wax for 72 hours before surgery. It is okay to shave facial hair up to 24 hours before surgery.

**Shower 1 – The night before surgery:**
1. Start by washing your hair first, using your regular normal shampoo and conditioner as desired. Completely rinse the hair and body to remove any soap residue. Wash your face with regular soap and rinse.
2. After completely rinsing the hair and body, turn off the shower water.
3. Using clean washcloths, use half a bottle of the chlorhexidine soap for your full-body shower. The order of washing your body is shown in the picture on the following page. Wash your body gently and do not scrub your skin too hard. Let the lather remain in contact with your skin for two minutes.
4. Turn on the shower and rinse well. Do not rewash with regular soap.
5. Pat skin dry with a fresh, clean towel. Do not apply lotions, creams, perfumes, cologne, makeup or hair products after you shower.
6. Dress in freshly washed clothes or pajamas.
7. **Sleep on clean sheets and pillowcases.**

**Shower 2 – The morning of surgery:**
1. Remove all jewelry, body piercings and nail polish.
2. Follow steps one through six listed in Shower 1.
3. Do not apply deodorant, lotions, creams, perfumes, cologne, makeup or hair products after you shower.
4. Dress in warm, freshly washed, loose and comfortable clothing. Keeping warm before surgery can help prevent infection.
5. After you arrive at the hospital, the nurse may ask you to use an antiseptic wipe on your skin before your surgery.
The day of your surgery/procedure

Follow the pre-surgery/procedure instructions about your diet and your medications from your doctor. **If you do not follow these instructions, your surgery/procedure may be delayed or canceled.**

- Take your medications, with a small sip of water, as directed by your doctor. See additional guidelines on page 2.
- Take your second pre-operative shower just before coming to the hospital. Follow the shower instructions included in this packet. Hair and skin should be free of products such as hairspray, perfume, gels, aftershave, facial creams, oils, lotions or hair conditioners. Also, do not wear contact lenses or makeup.
- Wear loose, comfortable clothing and shoes.

**Please bring the following:**

- Your medical and pharmacy insurance cards, a state-issued photo ID, and the ID card for any implanted medical device you may have.
- Bring money for parking and possible discharge medication co-payments, which are separate from the hospital bill. **Leave all other valuables at home, including other credit cards, extra cash, jewelry and electronic devices such as cell phones, computers, readers and gaming devices.**
- Bring any that apply:
  - A list of your medications and doses.
  - Inhalers, if you have asthma.
  - CPAP machine and notation of your settings.
  - A consent form signed by a legal guardian for a patient who requires durable power of attorney (the guardian must be present or available by phone).
  - A parent or legal guardian for a patient who is under 18 years of age to confirm the consent and discuss care with the anesthesiologist.

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**Map for washing all areas of the body**

Wash with chlorhexidine soap each area of your body in the following order:

1. **Neck, chest and abdomen** — Wash your neck, entire chest and abdomen including belly folds, belly button and under breasts.
2. **Both arms** — Start at your shoulders and end at your fingertips. Thoroughly clean your arm pits.
3. **Back** — Start at the base of your neck and end at your waist. You may need help.
4. **Both legs** — Start at your hips and end at your toes. Thoroughly wash behind your knees. Wash ankles, feet and between toes.
5. **Groin** — Use a clean washcloth to thoroughly wash the folds in the groin area. Do not apply soap to the inner folds of the vagina.
6. **Buttocks.**
Please arrive at the hospital on time for your surgery/procedure.

Expect the nurse to examine your skin on all parts of your body for any signs of breakdown or infection.

Adult patients may have one person at a time with them in the pre-operative area. Patients under 18 years of age may have two adults with them. Children of patients or siblings of patients may not be left unattended and may not enter patient-care areas or pediatric patient playrooms.

**Surgery/procedure recovery**

In the recovery room, you will be cared for by specially trained registered nurses. Your time in recovery will vary, depending on the surgery/procedure. If you are going home the same day, your friends and family will be invited to join you for post-operative instructions.

**Planning for your return home**

Please plan for your discharge needs with family and/or friends prior to your surgery/procedure.

If you are scheduled to go home the day of your procedure, you MUST have an adult escort to accompany you. Failure to do so will result in your surgery/procedure being canceled. You may NOT drive yourself or travel home by bus. You may take a taxi if you have an adult escort.

If your doctor admits you to the hospital overnight, plan to be discharged early the next day, typically by 10 a.m. Going home early in the day enables you to obtain your prescriptions and settle into your home while your physician is available for questions. Depending on your procedure, you may be required to have an adult escort to accompany you home.

We suggest you have someone with you at home after your surgery/procedure to help with shopping, childcare, lifting, cooking, cleaning, etc.

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**Things to know before your hospital stay**

**Visitors during your stay**

Patients are our top priority at Swedish. We know it helps to have family and friends visit you in the hospital. However, staff may limit these visits because of the patient’s need for care and rest or if the room is shared. Please speak with your nurse about the best time and length for visits. Families and friends are asked to plan visits so not everyone is visiting at the same time.

**Visitor ID badges required after hours**

For the safety of our patients, visitors and staff, visitors who come to the hospital after 9 p.m. or before 5 a.m. will be issued a temporary badge. Please ask the nurse on the unit to help your visitor get an ID badge. Anyone without an ID badge after hours will be questioned by Security.

**Pets and service animals**

We know pets can be a part of a patient’s family. However, due to general health issues, only service and therapy animals may come to visit.

**If you use tobacco products**

Our mission at Swedish is to improve the health and wellbeing of each person we serve, including patients, families, visitors, staff, physicians, volunteers and others. Part of that mission is to provide a safe and healthy environment, which includes a smoke- and tobacco-free facility. Swedish is proud to say we are smoke and tobacco free inside and out, at all campuses and outpatient clinics. This policy includes the use of electronic cigarettes (e-cigarettes) or any similar device, as well as chewing-tobacco products. During your stay in the hospital, you are not allowed to leave the building to smoke. If you are dependent on a nicotine product, we offer nicotine-replacement therapies; these are readily available and billed as part of your insurance benefits.
Visitors who choose to smoke must not be on Swedish property or in parking garages, and must be at least 25 feet from building entrances, exits, windows that can open, air conditioners, vents or other air-intake systems, as outlined by state law.

Swedish supports a program to help you or your friends, family or visitors quit smoking. If you would like information about the program, call 1-800-QUIT-NOW.

**Use of electronic equipment**

In the hospital, the indoor use of a cell phone, pager or laptop computer is limited. You must be at least 10 feet from any medical equipment. Hallways and waiting rooms are the best places to use these devices.

**Preventing falls**

While you are in the hospital, you may be at greater risk for falling. This may be due to unfamiliarity with your surroundings; medications; altered sleep patterns; or tubes, cords and machines that make movement difficult. Because falls can cause new injuries or setbacks in your recovery, we want to do everything possible to prevent them. You can help by following these precautions:

- Ask for help to get out of bed.
- Move slowly to get up.
- Wear non-skid footwear.
- Report any spills.
- Use a nightlight.
- Use handrails in bathroom and halls.
- Learn proper use of hospital equipment such as walkers and canes.

**Communication assistance**

Swedish offers free language interpretation, including sign language interpretation, assistive devices, and translated and large-print patient materials.

If you, your visitors or your patient support person have any vision, speech and/or hearing loss, or if English is not your first language and you need communication support, please notify us.

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**Paying for take-home medications**

When you are discharged and ready to go home, your doctor may order one or more medications for you to take at home. The following information will help you plan ahead for this possibility:

- Bring a form of payment for discharge medication co-payments. Medication co-payments are a separate bill from the hospital bill. Your portion of the charge is dependent on your prescription drug coverage (including private insurance, Medicare, Medicaid and labor and industries claims). If you have prescription insurance, have your prescription insurance card available to ensure we have your correct billing information.

- You may choose to have your discharge prescriptions filled by one of our Swedish pharmacies on our campuses (Cherry Hill, Edmonds, First Hill, Issaquah or the Orthopedic Institute) or by an outside pharmacy.

- If you are going home the same day as your surgery, ask your doctor or nurse for the signed paper copy of your prescription(s) to take with you to the pharmacy. The paper copy is always required at any pharmacy you choose.

- If you will be staying overnight in the hospital after your surgery, many of your discharge prescriptions will be sent electronically to the pharmacy of your choice. It is important to tell your nurse and doctor where you would like to pick up these prescriptions.

- Some prescriptions, such as narcotic pain medications, cannot be sent electronically. We will fax these printed prescriptions to your pharmacy of choice so they can be prepared ahead of time for you. You must bring these signed paper prescriptions to the pharmacy to pick up those medications. Please, ask your nurse or doctor to give you those prescriptions before you leave.
10 tips for safer health care

*Be an active partner in your health care.*

*Good health care happens through a partnership between you and your health care provider. Here are some tips on how you can work with your providers to get the best health care.*

1. **Take part in your health care.**
   - Tell each provider about what health care you have had and who has provided it.
   - Let them know about any other treatments you have tried that were not prescribed by a doctor, such as herbal treatments, home remedies or acupuncture.
   - Tell your providers about any cultural and spiritual needs you may have.
   - To be sure you understand health care instructions, repeat them to a family member or friend.
   - Let any provider know if you are not sure about any part of your care. If you think something might not be safe, tell your providers immediately.

2. **Ask questions, ask questions, ask questions.**
   - When you choose a health care provider, pick one who is easy to talk with about your health care.
   - Ask your provider when and how you will get the results of any test or treatment. When you get the results, make sure you know what the results mean for you.
   - Have your provider explain your treatment choices, any treatment risks and how treatment may help.
   - Get a second opinion if you are not sure about what treatment to choose.
   - Learn what changes you need to make to help you get better.

   **Bonus tips:**
   - Make advance decisions about your health care by completing these Advance Directives:
     - A Power of Attorney form that lets you pick who you want to speak for you if you are not able to.
     - A Health Care Directive form, or Living Will, that tells your provider when or if to give you treatment to keep you alive.
   - For more help with Advance Directives, ask:
     - Your provider
     - Your nurse during your Preadmission Clinic appointment

3. **Bring a family member or friend with you to be your partner in care.**
   - Pick someone who will be an advocate for you and help get things done for you.
   - Show your partner in care where to find your medical records at home. Let them know what medicines you take and where they are located.
   - Plan for your partner in care to stay with you during exams, treatments and in the hospital.
   - It's okay for your partner in care to ask questions and take notes.

4. **Require each provider to know who you are before they treat you.**
   - Ask providers to check two forms of identification each time they care for you.
   - If you are given a wristband, be sure it has your name on it and that your name is spelled correctly.
   - Also, look for the name badge on all providers who are caring for you.

5. **Share a list of all medicines you take with your providers.**
   - Include all medicines, vitamins, herbs and supplements on the list.
   - Bring the list with you to every visit.
   - Let your provider know about your allergies.
   - Let your provider know if you have had a bad reaction to any medicines.
6. **Know about your medicines.**
   - Ask your provider about any new medication(s), the purpose of the medication and how it will help you.
   - Have the brand names and any other names for the medicine written down for you.
   - Learn how to take the medication and for how long.
   - Ask the pharmacist for written information about what to watch for when you take the medication.

7. **Prevent infection.**
   - Use alcohol hand gel or wash your hands regularly. Hand cleaning is the most important thing you can do to keep from getting sick.
   - Ask anyone who takes care of you, “Did you use alcohol hand gel or wash your hands?”
   - Tell family and friends not to visit or be with you if they have a cold, flu or cough.

8. **Prepare for treatments and operations.**
   - Before your treatment or operation, know what medicines to take or not take, what you can or cannot eat or drink, and what you should or should not wear.
   - Make sure you and your providers all agree on what will be done during the treatment or operation.
   - Help your provider find and mark the part of your body that will be operated on.
   - Make sure only the part of your body having the operation is marked. It can be confusing if other sites are marked.

9. **Ask your provider to explain what you need to do to care for yourself at home.**
   - Find out when you can start your usual activities again.
   - Get the phone number of who to call with questions.
   - Find out when and where you will have your next appointment.
   - Have a family member or friend listen to the instructions.

10. **Learn about your health care and treatment.**
    - Get as much information as you can about your health care and treatment.
    - Visit our Online Health Library at Swedish.org/healthlibrary. The online library is a rich resource with procedure and surgery fact sheets as well as information on many conditions, medications and treatment options.

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**IT’S OK TO ASK**

If you have questions about any part of your health care, we encourage you to ask. Be your own best advocate.
What is a Surgical Site Infection (SSI)?
A surgical site infection is an infection that occurs after surgery in the part of the body where the surgery took place. Most patients who have surgery do not develop an infection. However, infections develop in about 1 to 3 out of every 100 patients who have surgery. Some of the common symptoms of a surgical site infection are:
- Redness and pain around the area where you had surgery
- Drainage of cloudy fluid from your surgical wound
- Fever

Can SSIs be treated?
Yes. Most surgical site infections can be treated with antibiotics. The antibiotic given to you depends on the bacteria (germs) causing the infection. Sometimes patients with SSIs also need another surgery to treat the infection.

What are some of the things that hospitals are doing to prevent SSIs?
To prevent SSIs, doctors, nurses, and other healthcare providers:
- Clean their hands and arms up to their elbows with an antiseptic agent just before the surgery.
- Clean their hands with soap and water or an alcohol-based hand rub before and after caring for each patient.
- May remove some of your hair immediately before your surgery using electric clippers if the hair is in the same area where the procedure will occur. They should not shave you with a razor.
- Wear special hair covers, masks, gowns, and gloves during surgery to keep the surgery area clean.
- Give you antibiotics before your surgery starts. In most cases, you should get antibiotics within 60 minutes before the surgery starts and the antibiotics should be stopped within 24 hours after surgery.
- Clean the skin at the site of your surgery with a special soap that kills germs.

What can I do to help prevent SSIs?
**Before your surgery:**
- Tell your doctor about other medical problems you may have. Health problems such as allergies, diabetes, and obesity could affect your surgery and your treatment.
- Quit smoking. Patients who smoke get more infections. Talk to your doctor about how you can quit before your surgery.
- Do not shave near where you will have surgery. Shaving with a razor can irritate your skin and make it easier to develop an infection.

**At the time of your surgery:**
- Speak up if someone tries to shave you with a razor before surgery. Ask why you need to be shaved and talk with your surgeon if you have any concerns.
- Ask if you will get antibiotics before surgery.

**After your surgery:**
- Make sure that your healthcare providers clean their hands before examining you, either with soap and water or an alcohol-based hand rub.
- Family and friends who visit you should not touch the surgical wound or dressings.
- Family and friends should clean their hands with soap and water or an alcohol-based hand rub before and after visiting you. If you do not see them clean their hands, ask them to clean their hands.

**What do I need to do when I go home from the hospital?**
- Before you go home, your doctor or nurse should explain everything you need to know about taking care of your wound. Make sure you understand how to care for your wound before you leave the hospital.
- Always clean your hands before and after caring for your wound.
- Before you go home, make sure you know who to contact if you have questions or problems after you get home.
- If you have any symptoms of an infection, such as redness and pain at the surgery site, drainage, or fever, call your doctor immediately.

If you have additional questions, please ask your doctor or nurse.
Anesthesia care

What is anesthesia?
Anesthesiology is the practice of medicine in which special drugs are used to cause your entire body or part of your body to be desensitized to pain. Anesthesia will enable you to tolerate a surgical or invasive medical procedure comfortably. Today’s anesthesia practices allow a greater degree of safety and comfort than ever before, providing a smooth start to your healing and recuperation.

Who provides anesthesia?
Anesthesia care at Swedish Medical Center is provided by specialty-trained and board-certified physician anesthesiologists and certified registered nurse anesthetists or CRNAs. Our CRNAs work under the medical direction of a physician anesthesiologist. Some of our anesthesiologists and CRNAs have special interests and training in cardiac, pediatric, obstetric or neurosurgical anesthesia, and in the treatment of chronic pain.

Preadmission
Preparation for anesthesia begins with your Preadmission Clinic appointment. After your interview, an anesthesiologist or registered nurse will review your chart for any needed follow-up care or information. If you have specific concerns about your medical condition and anesthesia, our Preadmission Clinic can refer your questions to our anesthesia consultant.

Quitting smoking
Physicians Anesthesia Service is committed to your health. Quitting cigarettes and other tobacco products is one of the best actions you can take to protect your health. Quitting helps your body prepare for health-related treatment, improves your chances for optimal response and enhances your ability to heal following surgery. To learn more and to get help in quitting, visit Swedish.org/quitsmoking. Schedule an appointment for smoking and tobacco cessation counseling and treatment with your primary care provider. You may also consider scheduling an appointment with one of our certified tobacco treatment specialists by calling 206-386-6800.

Day of surgery/procedure
On the day of your surgery/procedure, you will meet your anesthesiologist who will review your medical record, clarify any questions about your medical history and perform a physical evaluation. You will then have an opportunity to express your preferences, discuss the management of your anesthetic care during your procedure, and have questions answered about the advantages, disadvantages and possible risks of your anesthetic.

You will be asked to sign an anesthesia-specific consent form acknowledging your discussion with the anesthesiologist and your understanding and acceptance of the agreed-upon anesthetic management of your procedure. A sample of that form is included here.

Until we see you
At Swedish Medical Center, we want you to have the best and safest experience possible. That starts with providing you information about anesthesia to better prepare you for your upcoming procedure. You will receive an email or phone notification from Emmi® Solutions, on behalf of Swedish, with instructions to watch an online video on anesthesia. We recommend you complete the program at least 48 hours before your procedure, and watch it as many times as you like with your loved ones. Once you receive your individual access code, go to Startemmi.com to start learning about anesthesia.

We look forward to meeting you and partnering with you in your health care.
Anesthesiology is a specialty of medicine. Your anesthesiologist is a doctor trained to provide you with anesthesia care during the course of a medical, surgical, or obstetrical procedure. Your anesthesia care will be provided by one or more anesthesiologists who are members of the Swedish Department of Anesthesiology. This Patient Consent Form is a supplement to the Consent for Surgery or Other Invasive Procedural Treatment Form.

The information that follows is a description of the anesthesia or sedation to be used and a listing of the risks that possibly could occur. The information will hopefully enable you to understand your anesthetic procedure and allow you to ask questions of your anesthesiologist. This list is not meant to scare you or discourage you from having your procedure, but rather to inform you that all medical procedures carry risk, and rare events do happen. Such risks and complications may include but are not limited to:

**General Anesthesia**: Nausea, allergic/adverse drug reaction, sore throat, hoarseness, injury to lips/teeth/vocal cords/airway, infection, pneumonia, aspiration, nerve injury, eye injury, injury to arteries or veins, awareness under anesthesia, seizures, paralysis, stroke, injury to the heart/lungs/brain, and death.

**Neuraxial Anesthesia** (Epidural or Spinal): Backache, headache, blood pressure changes, failure of epidural or spinal to be effective and need for general anesthesia, bleeding, drug reaction, respiratory distress, infection, nerve injury, paralysis, seizures.

**Regional Anesthesia**: Minor pain or discomfort, allergic reaction, failure of the regional block to work, bleeding, infection, nerve injury, injury to arteries or veins, residual numbness or weakness, respiratory distress, seizures, spinal or epidural block, headache, stroke, injury to heart/lungs/brain, death, and need for general anesthesia.

**Transesophageal Echocardiography**: Sore throat, injury to lips, teeth, mouth, throat, esophagus, or stomach, hoarseness, difficulty swallowing, painful swallowing, aspiration, and infection.

I understand that receiving anesthesia for any surgery or procedure involves risk, and no promises or guarantees can be made regarding my response to anesthetic agents, other drugs, or procedures associated with my anesthetic care. All procedures may carry unforeseen risks.

I understand that for certain procedures more invasive monitoring may be needed, such as arterial lines, central lines, or transesophageal echocardiography. During my procedure, my physical condition could change, and therefore the type of anesthesia and/or monitoring might need to be changed. Any change in my anesthesia plan would be made with my safety being the first concern of my anesthesiologist.

I certify that I have informed my anesthesiologist and other health care providers of all medications, including prescription, over the counter, alternative remedies and supplements, and any other recreational drug or alcohol use. I also certify that I have informed my doctor of all my known allergies, my medical history, as well as any problems with any of my past anesthetics. I understand that Swedish is a teaching facility, and that residents or fellows may be involved in my anesthesia care under the direct supervision of my anesthesiologist. I also can specifically refuse to allow them to participate in my care. UNLESS I have made it explicitly clear to my surgeon and my anesthesiologist that I wish for my DNR order to remain in effect, I understand that by consenting to anesthesia, I am also consenting to a temporary suspension of any “do not resuscitate” orders until I have made a complete recovery from the effects of anesthesia.

I understand that I have been informed of my anesthetic options, as well as the risks and benefits of the various options. I agree with the anesthetic plan, including the method of administration and monitoring that have been discussed with me. I understand that I have had or will have the opportunity to ask questions and discuss my anesthetic plan until I am satisfied with the answers and information provided. I understand I may withdraw this consent at any time before the anesthetic is begun.

Signature of Patient or Patient Representative _____________________________ Date __________ Time __________

Printed Name of Patient/Representative __________________________________________

Signature of Anesthesiologist _____________________________ Date __________ Time __________

Printed Name of Anesthesiologist ________________________________________
Directions and parking

Cherry Hill
500 17th Ave.
Seattle, WA 98122

From the south: Take I-5 northbound to the James Street Exit (164A). Turn right (east) on James Street. James Street will become Cherry Street. Turn right (south) on 18th Avenue. Turn right on Jefferson Street (west). Turn right into the main entrance (north).

From the north: Take I-5 southbound to the James Street Exit (165A). Turn left (east) on James Street. James Street will become Cherry Street. Turn right (south) on 18th Avenue. Turn right on Jefferson Street (west). Turn right into the main entrance (north).

Parking
Short-term parking is available in the Plaza Garage. Enter from the main driveway. Long-term parking is available in the 16th Avenue Garage, on 16th Avenue. From the main entrance of the hospital, turn right on Jefferson Street (west). Turn right on 16th Avenue (north). The garage entrance is up the block on the left.

Valet parking is available at the main entrance.

Preadmission and surgery
Check in for preadmission and surgery is located at the registration desk in the main lobby.

First Hill
Main hospital Orthopedic Institute
747 Broadway 601 Broadway
Seattle, WA 98122 Seattle, WA 98122

From the north: Take I-5 southbound to the James Street Exit (165A). Turn left (east) onto James Street.

From the south: Take I-5 northbound to the James Street Exit (164A). Turn right (east) onto James Street. Travel six blocks to the intersection of James and Broadway. Turn left (north) onto Broadway. The entrance to the main hospital is on Broadway, one-and-a-half blocks to the left. The entrance to the Swedish Orthopedic Institute is on Cherry Street, one block to the left.

Parking
For the main hospital, turn left into the circular drive of the front entrance and follow the signs to the garage. For the Orthopedic Institute, turn left onto Cherry Street; the garage entrance is on the left.

Preadmission
Check in for Preadmission (main and orthopedic) is located in the main hospital at the registration desk off the first floor lobby.

Surgery
Check in for surgery at the main hospital is located at the registration desk off the first floor lobby. Check in for surgery at the Orthopedic Institute is located on the second floor of the Orthopedic Institute.
Ballard
5300 Tallman Ave. NW
Seattle, WA 98107

From the north: Take I-5 southbound to the 85th Street Exit (172). Turn right (west) onto 85th Street. Travel 30 blocks to the intersection of 85th and 15th Avenue NW. Turn left (south) onto 15th Avenue NW. Travel 16 blocks to the intersection of 15th Avenue and Market Street. Turn right (west) onto Market Street. Travel three blocks and turn left (south) onto Tallman Avenue NW. Turn right into the entrance of the parking garage.

From the south: Take I-5 northbound to the 45th Street Exit (169). Turn left (west) onto 45th Street. (Note: 45th Street becomes 46th Street and then becomes Market Street.) Travel west on Market Street for 17 blocks to the intersection of Market Street and 15th Avenue NW. Cross 15th Avenue. Travel for three blocks and turn left (south) onto Tallman Avenue NW. Turn right into the entrance of the parking garage.

Preadmission and surgery
Check in for preadmission and surgery are on the third floor of the hospital in the south wing.

Issaquah
751 NE Blakely Drive
Issaquah, WA 98029

From the east or west: Travelling east or west on I-90, take exit 18 for E. Sunset Way/Highlands Drive.

• If travelling east, keep left at the fork and merge onto Highlands Drive NE.
• If travelling west, turn right (north) onto Highlands Drive NE/ E. Sunset Way; continue to follow Highlands Drive NE. Turn left (west) at the first traffic light onto NE Discovery Drive (492 feet). Turn left (south) at the next light onto 8th Avenue NE (approximately 500 feet). Travel down 8th Avenue until it turns into the Swedish Issaquah main entrance. Immediately turn right to enter the underground parking garage. Parking is also available on the surface lots.

Preadmission
Check in for preadmission is on the third floor.

Surgery
Check in for surgery is on the first floor.