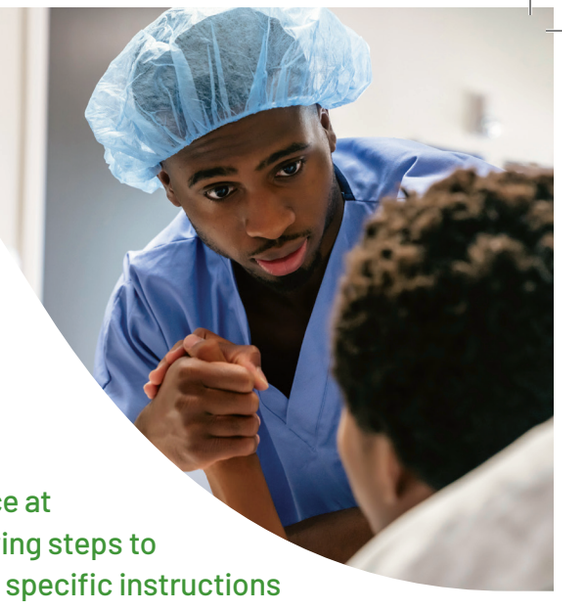
Providence SWEDISH



Providence Swedish Guide to Surgical Procedures

Welcome to Providence Swedish. Our goal is to ensure your experience at Providence Swedish is excellent in every way. Please review the following steps to prepare for your upcoming surgical procedure. You may have received specific instructions from your provider for your surgery that are different than those outlined in this document. Please refer to their instructions for any information specific to you and your procedure.

Preparing for your surgical procedure

STEP 1 Call to preregister

Procedure location	Phone Number
Ballard campus	206-215-3200
Cherry Hill campus	206-215-3200
First Hill campus	206-215-3200
Swedish Orthopedic Institute	206-215-3200
Issaquah campus	206-215-3200
Edmonds campus	425-640-4220
Toll-free for all campuses	866-851-5111

- After confirming your procedure date and Swedish location, call to complete your preregistration as soon as possible to provide your personal and insurance information to our team.
- Please return any voice messages requesting a callback.
- Be ready with your insurance card information.

STEP 2

Schedule your preadmission clinic interview

Procedure location	Phone Number
Ballard campus	206-386-2314
Cherry Hill campus	206-386-2314
First Hill campus	206-386-2314
Swedish Orthopedic Institute	206-386-2314
Issaquah campus	206-386-2314
Edmonds campus	Will call you directly

- After completing your preregistration, call to schedule a preadmission clinic phone interview as soon as possible. For patients having a procedure at our Edmonds campus, a caregiver from our Edmonds campus preadmission clinic will call you directly within seven days of your scheduled procedure.
- Please return any voice messages requesting a callback.
- Procedures, surgery and anesthesia can affect all organ systems. At Swedish, we are committed to minimizing your procedural risk.
- The preadmission clinic phone interview will ensure you are ready for your procedure and will help avoid a delay or cancellation on the day of your procedure.
- The preadmission clinic phone interview generally takes 30-60 minutes. During the call, a nurse will review your health history, medications and provide preprocedural instructions.

To prepare for your preadmission clinic appointment:

- Complete any ordered labs and tests as soon as possible so the results may be reviewed by the preadmission clinic team. Many procedures and most surgeries require labs within six months of your procedure. Please consult with your provider or surgeon if labs have not been ordered.
- Schedule a preoperative evaluation with your primary care provider or specialist, such as your cardiologist or pulmonologist, so these records may be reviewed by the preadmission clinic team.

Please prepare information regarding:

- Your current medications, including dosages.
- Any respiratory illness within the last 8 weeks.
- Any recent emergency department visits or hospitalizations.
- Any history of anemia, low blood counts or ongoing bleeding.
- Stroke within the last 12 months.
- Heart attack within the last 12 months.
- Heart surgery, heart stent placement or other heart procedure in the last 12 months.
- Heart failure symptoms.
- Results from heart tests, such as stress tests, ultrasounds or multiday rhythm recorders.
- Results from recent lung function tests.
- Implantable devices in the heart such as pacemakers, defibrillators or loop recorders.
- Other implantable devices such as deep brain stimulators, vagal nerve stimulators, spinal cord stimulators or stomach/bowel/bladder stimulators.
- Current recreational drug use, including opioid use, opioid replacement therapy, alcohol use or alcohol substitution therapy.
- A list of previous surgeries and approximate dates.

Medication Management

The following recommendations represent general instructions for preprocedural medication management. Recommendations may differ depending on your procedure and your health history. Prior to your procedure, please go through these recommendations with your health care provider.

STEP 3

Managing your medications before your surgical procedure

- Do not use tobacco products, alcohol or any recreational drugs on the day of your procedure. Refraining from tobacco use, recreational drug use and excessive alcohol use for 1 to 3 weeks prior to your procedure is highly recommended. Studies have shown that this may decrease the risk of complications related to your procedure.
- For smoking cessation assistance call 1-800-QUIT-NOW.

The last dose of these medications is to be taken 7 *days* before the day of surgery (do not take on day of surgery):

- All herbals and supplements **EXCEPT** for the following:
  - Calcium
  - Folic acid
  - Iron
  - Magnesium
  - Melatonin
  - Potassium
  - Sodium Chloride
  - Phosphorus
  - Vitamin D

**Do not take any herbals or supplements on the day of surgery, unless specifically instructed otherwise.*

- Anti-addiction agent: Disulfiram
  - Disulfiram may cause flushing, nausea and palpitations because of alcohols present in some medications.
- Weekly-dosed GLP-1 receptor agonists may increase the risk of aspiration while under anesthesia due to delayed gastric emptying.
  - Semaglutide (Ozempic, Wegovy), Dulaglutide (Trulicity), Exenatide ER (Bydureon BCise)
  - Combination GLP-1 and GIP receptor agonists: Tirzepatide (Mounjaro, Zepbound)
  - Instructions regarding GLP-1 receptor agonists change frequently. Please confirm these instructions with the preadmission clinic staff.

The last dose of these medications is to be taken *3 days* before surgery (do not take on day of surgery):

- NSAIDS (anti-inflammatory medications) may increase bleeding risk. Please coordinate with your provider or surgeon.
  - Diclofenac (Voltaren), Ibuprofen (Advil, Motrin), Ketorlac (Toradol), Meloxicam (Mobic), Naproxen (Aleve, Anaprox, Naprosyn)
  - All NSAIDS, including those not listed above, should be held 3 days before open heart surgery.
- SGLT2 inhibitors for diabetes management and heart failure may increase the risk of acidosis (too much acid in the blood).
  - Bexagliflozin (Brenzavvy), Canaglifozin (Invokana), Dapaglifozin (Farxiga), Dapagliflozin/Metformin (Xigduo XR), Empaglifozin (Jardiance), Empagliflozin/Metformin (Synjardy XR), Empagliflozin/Linagliptin (Glyxambi) Sotagliflozin (Inpefa)
  - **Ertuglifozin (Stelagro)**: the last dose of this medication is to be taken **4 days** before surgery (do not take on day of surgery).
- Anti-addiction agent: Oral Naltrexone (ReVia, Depade), an anti-addiction agent, may interfere with pain management.

The last dose of these medications are to be taken *the day before* surgery (do not take on day of surgery):

- Patients undergoing **open heart surgery** should stop taking ACE Inhibitors and angiotensin receptor blockers (ARBs) **24 hours before surgery** as these medications will increase the risk of very low blood pressure on the day of surgery.
  - -Lisinopril (Prinivil, Zestril), Benazepril (Lotensin), Quinapril (Accupril), Catopril
  - -Losartan (Cozaar), Olmesartan (Benicar), Telmisartan (Micardis), Valsartan (Diovan), Candesartan (Atacand), Irebesartan (Avapro)
- Metformin (diabetes management) may increase the risk of acidosis (too much acid in the blood)
- Daily-dosed GLP-1 receptor agonists may increase the risk of aspiration while under anesthesia due to delayed gastric emptying.
  - Exenatide IR (Byetta), Liraglutide (Saxenda, Victoza), Lixisenatide (Adlyxin), Orforglipron (Foundayo), Oral Semaglutide (Wegovy), Semaglutide (Rybelsus)
  - Instructions regarding GLP-1 receptor agonists change frequently. Please confirm these instructions with the preadmission clinic staff.
- Diuretics taken for high blood pressure management or heart failure may affect your blood pressure and electrolytes.
  - Loop diuretics - Furosemide (Lasix), Torsemide (Demadex), Bumetanide (Bumex)
  - Potassium sparing diuretics - Amiloride, Spironalactone (Aldactone), Triamterene (Dyazide)

Medications recommended to alter prior to your surgical procedure:

If you are using any of the following medicines, discuss with your prescribing provider or surgeon if and when you should stop taking them:

- Aspirin
- Blood thinners

If you are having a spinal or epidural anesthetic (total hip or total knee replacement or open abdominal/chest surgery), the hold times for these medications will follow the American Society of Regional Anesthesia Guidelines and may be longer than what is recommended by the prescribing provider. Please discuss with your surgeon and the preadmission clinic nurse.

- Anti-platelet medications
  - -Clopidogrel (Plavix)
  - -Ticagrelor (Brilinta)
- Anti-coagulants
  - Warfarin (Coumadin)
  - Dabigatran (Pradaxa)
  - Apixiban (Eliquis)
  - Rivaroxaban (Xarelto)
  - Edoxaban (Savaysa)
  - Betrixaban (Bevyxxa)

The morning of surgery:

- **Oral diabetic medications:** Do not take these the morning of surgery.
- **Lantus/glargine, Levemir/detemir:** Type I diabetics should take the usual morning dose. Type II diabetics should take 75% of the usual morning dose.
- **NPH insulin:** Take half of the usual morning dose.
- **Novolog/aspart, Humalog/lispro, Apidra/glulisine:** Do not take morning of surgery.
- **Mixed insulin (70/30, 75/25):** Take 1/3 of the usual morning dose.
- **Insulin pump:** Type I diabetics should take usual AM rate and Type II diabetics should take 75% of the usual basal rate.

If you have an insulin pump:

- Change your set and site the day before surgery. Do this early in the day — **not at bedtime** — to ensure that it is infusing well.
- Program the basal rate per the instructions on page 3, and continue wearing it.
- Bring any insulin pump supplies, including insulin, to the hospital with you in case you need to change your set while in the hospital. We recommend that you 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 that you have a family member or friend available to take possession of your pump if you need to remove it.

Medications to continue on the morning of your surgical procedure if not already discussed with the preadmission clinic:

(Take with a small sip of water.)

- Pain medications
- Asthma/COPD medications
- Thyroid hormones
- Anti-seizure medications
- Anti-depressant medications

STEP 4 24 hours before your surgery

What time do I need to arrive for surgery?

The surgeon's office will call you 1 to 2 days prior to your surgery to tell you what time to arrive at the hospital. Arrival time is approximately 2 hours prior to your scheduled surgery time. Please call your surgeon's office the day before your procedure if you have not been told what time to arrive at the hospital.

What if I feel sick within the week of my surgery?

Call the surgeon's office if you develop a cold, sore throat, cough, fever, skin infection, open cuts, scrapes or bites or other illness.

Presurgery showers for infection prevention FOR ALL PROCEDURES:

Before your surgery, you will shower with a special antiseptic soap to help reduce the risk of infection. Because skin is not sterile and has germs, the special soap, called chlorhexidine gluconate (CHG, Hibiclens) will help to clean your skin and reduce germs. You will shower with this antiseptic soap on the night before your surgery, and the morning of your surgery.

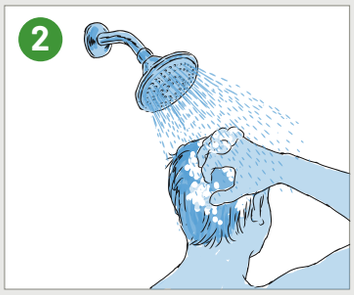
CHG (Hibiclens) can be found at your local pharmacy, clinic or online retailer. If not available, use Dial antibacterial soap.

- Follow these instructions carefully to help reduce the risk infection.
  - **72 hours prior: Do not** remove hair (shave, wax, etc.) on the part of your body where your surgery will take place. Shaving with a razor can irritate your skin and increase your risk of developing an infection.
  - **24 hours prior: Do not remove hair on any part of your body**.
  - You will be taking 2 special presurgery showers at home: shower No. 1 the night before and shower No. 2 the morning of surgery. (Detailed shower instructions on page 5).
  - Place clean sheets on the bed and wear clean clothes to sleep the night before surgery.
  - Avoid contact and sleeping with pets after your presurgery showers.
  - On the day of surgery, we will apply antiseptic products to your nose and skin to remove germs.

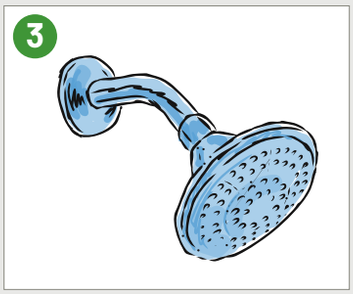
SHOWERING STEPS

You will be taking 2 special presurgery showers at home: shower No. 1 the night before and shower No. 2 the morning of surgery. Do not take a bath.

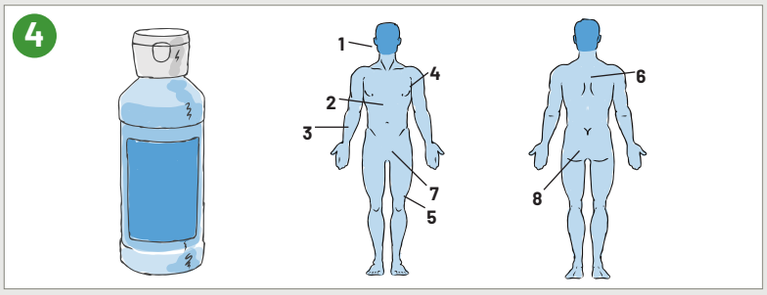
For each shower, you will need a clean towel, and your chlorhexidine gluconate (CHG, Hibiclens) antiseptic or Dial antibacterial soap. Also have fresh, clean clothes or pajamas to put on when done.



Remove all jewelry. Wash your face and hair as you normally would with regular soap and shampoo. Rinse shampoo and soap completely from your hair and body.



Turn water off.



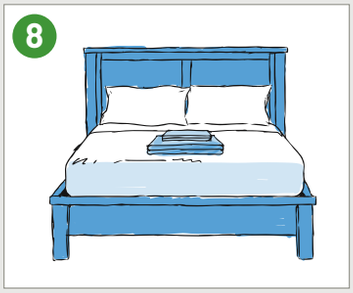
Using your hands, apply CHG (Hibiclens or Dial antibacterial soap) directly to your body in the following order:

1. Neck. **Do not apply the soap to your face.**
2. Chest and abdomen
3. Arms (starting at shoulders to fingertips)
4. Arm pits
5. Legs (starting at thighs to toes)
6. Back (base of neck to waist)
7. Hips and groin (start with hips, end with groin). Thoroughly wash the folds in the groin area. **Do not apply the soap to your genital area.**
8. Buttocks

After applying to all areas, wait 2 minutes before rinsing.

Turn on the shower and rinse well. Do not rewash with regular soap.

Pat skin dry with a fresh, clean towel. Do **NOT** apply makeup, perfume, cologne, lotions, powders, creams, nail polish, hair products or deodorant after your shower.



Sleep on clean bedding the night before your procedure. Avoid contact and sleeping with pets after your presurgery showers.

STEP 5

What to do the day of your surgery

Follow the presurgery instructions about your diet, medications and presurgery showers.

If you do not follow these instructions, your surgery could be delayed or canceled.

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 **NO** protein containing drinks 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.

When is the last time I can eat or drink before surgery?

- Unless instructed otherwise by your doctor, you must follow these diet instructions before your surgery.
- If you were told by your doctor to drink a carbohydrate-rich drink, please drink **2 1/2 hours** before you arrive at the hospital. This drink can not contain protein.
- **STOP drinking all fluids 2 hours prior to your scheduled arrival time.**
- Medications you have been told to take on the morning of surgery may be taken with a small sip of water.

What do I bring to the hospital?

- **Bring only what you absolutely need for your stay.**
- Wear loose, comfortable clothing and shoes.
- Your medical and pharmacy insurance cards.
- A government or state-issued photo ID.
- ID card and/or remote for any implanted medical device you may have.
- Limited money for parking and possible discharge medication co-payments, which are separate from the hospital bill.
- **Your CPAP machine and notation of your settings.**
- Cell phone to communicate with family and friends.
- Any legal documentation for power of attorney or legal guardian.
- Advance directives.

What NOT to bring to the hospital?

- Electronics (cell phones are okay).
- Remove **ALL** jewelry (including piercings and rings).
- **When possible, leave valuable items at home**. Valuables will be returned to accompanying friends and family for safe keeping. Providence Swedish is not responsible for lost items, including medications.

When do I meet my anesthesiologist?

You will meet your anesthesia clinician on the day of your procedure. At that time they will review your medical and surgical history, review your medications and allergies and perform a physical evaluation. Your anesthesia clinician will discuss options for anesthesia, determine an anesthetic plan and discuss the risks, benefits, and alternatives to this plan. You will have the opportunity to ask questions and discuss any concerns with your anesthesia clinician.

STEP 6

Things to know about your hospital stay

Why am I getting my blood sugar checked?

- The stress of a procedure can cause high blood sugar in both people who have diabetes and those who don't have diabetes, which can affect wound healing.
- It is important to control your blood sugar before, during and after surgery, so you may be receiving a blood sugar test in the preoperative area and may receive insulin to treat high blood sugar.
- 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.
- If you have diabetes and were told to drink a carbohydrate-rich drink 2 1/2 hours before you are to arrive at the hospital, make sure you have done so. If you normally take rapid-acting insulin with meals, take half the normal dose you would take for a meal or 60 grams of carbohydrate. **Stop drinking all fluids two hours prior to your scheduled arrival time.**

Clean hands are the best way to prevent infections.

- Please use alcohol hand rub gel and/or soap and water. Also, ask your visitors to do so as well. Please clean your hands often.
- All Providence Swedish caregivers are expected to clean their hands before caring for you. **It is okay to ask your health care provider to clean their hands.** For example:
  - "I didn't see you clean your hands when you came in; would you mind cleaning them again before you care for me?"
- **Ask your visitors to clean their hands.**

Who can be with me in the preoperative area?

- Only **1** designated patient supporter to provide mobility assistance, interpretation, emotional support, or medical decision-making support is allowed per patient.
- Pediatric patients are allowed **2** patient supporters, (parents or guardians). Pediatric parents or guardians must not be sick.
- Patient supporters will be required to follow current infection prevention standards.

What happens after my procedure?

- Patient supporters will be provided visitation guidelines on the day of procedure.
- Patient supporters will not be permitted in the first phase of recovery.
- Overnight stays for patient supporters are restricted and only permitted if coordinated with the nurse manager.
- Please remind your family and friends not to visit or be with you if they are ill with a fever, cough, cold or diarrhea to prevent further spread of infection.

What if I have a service animal?

- Providence Swedish staff is not permitted to care for your service animal during your surgery.
- Please make arrangements for a family member or friend to care for your service animal during this time.

What if I use tobacco products?

- Providence Swedish is smoke and tobacco free at all campuses and outpatient clinics.
- This includes no usage of electronic cigarettes (vaping) or any similar device, as well as chewing tobacco.
- While you are in the hospital, we can offer nicotine replacement therapies; these are available and billed as part of your insurance benefits.
- Visitors who choose to smoke must do so off Providence Swedish property. Please note that you cannot smoke in the parking garages.
- Providence Swedish supports a program to help you, your friends, family or visitors quit smoking. If you would like information about the program, call 1-800-QUIT-NOW.

STEP 7 Planning for after your surgery and your return home

Please plan for your discharge needs with family or friends prior to your surgery

- If you are scheduled to go home the same day as your procedure, you **must** have an adult escort to accompany you. Failure to do so will result in your surgery being canceled. You may **not** drive yourself or travel home by bus. You may take a taxi or car service, but you still must have another adult go with you.
- If your doctor admits you to the hospital overnight, you may be discharged early the next day. Depending on your procedure, you may be required to have an adult accompany you home.
- We strongly recommend you have someone with you at home after your surgery to help with shopping, childcare, lifting, cooking, cleaning, etc.
- If you have questions after you are discharged, contact your surgeon.

Postoperative hygiene

- Postoperative hygiene is an important part of your care after surgery and can help prevent infections. It is important to follow the instructions outlined by your provider.
- In general, the following are important steps you can take:
  - Wash your hands thoroughly
  - Daily bathing to the extent your comfort and mobility allow
  - Wearing clean clothes, using clean bedding and towels

Facts about opioid pain medications after surgery

What is an opioid?

An opioid is a strong prescription pain medication. Some possible side effects include nausea/vomiting, sleepiness/dizziness, and constipation.

Common names of opioids

- Hydrocodone (Vicodin, Norco)
- Oxycodone (Percocet, OxyContin)
- Morphine
- Codeine (Tylenol #3, Tylenol #4)
- Fentanyl
- Tramadol (Ultram)
- Methadone
- Hydromorphone (Dilaudid)
- Oxymorphone (Opana)

Only use your opioids for the reason they were prescribed.

Using opioids safely

- Ask your surgeon if it is okay to use over-the-counter acetaminophen (Tylenol) or ibuprofen (Motrin, Advil).
- Use your opioids if you still have severe pain that is not controlled with over-the-counter medications, or other non-opioid prescriptions.
- As your pain gets better, wait longer between taking opioids.
- Let your doctor know if you are currently taking any benzodiazepines (e.g., Valium, Xanax).
- Do not mix opioids with alcohol or other medications that can cause drowsiness.
- Taking too much of the opioids and/or mixing opioids with alcohol or benzodiazepines may cause dangerous side effects including sleepiness, confusion or trouble breathing. An overdose of opioids can cause you to stop breathing and lead to death.

Getting the facts about opioid addiction

You are at higher risk of developing a dependence or an addiction to opioids if you:

- Have a history of depression or anxiety.
- Have a history of using or abusing alcohol, tobacco or drugs (including prescription or street drugs).
- Take opioids for longer than a week.
- Take more pills, more often, than your doctor prescribed.

Understanding pain goals after surgery

Our goal is to control your pain enough to do the things you need to do to heal: walk, sleep, eat and breathe deeply.

Things to know:

- Pain after surgery is normal.
- Everyone feels pain differently.
- Pain is usually worse for the first 2 to 3 days after surgery.
- Keep your pills safely locked up or stored away from others.
- You may not need all of your opioids after surgery or being in the hospital. Please have a plan for disposing of your unused medication.

Other things to try for pain relief:

- Relaxation, meditation and music can help control your pain.
- Consider using ice packs or heat. Check with your doctor or nurse.
- Talk to your doctor if your pain is not controlled.

Safely dispose of unused opioids

- Check with your local pharmacy; many have drop boxes.
- Medication disposal kiosks are located at each Providence Swedish campus.
- To find a list of additional drop-off locations and mail-in options for unused opioids, visit:

https://med-project.org

Washington State Department of Health Safe Medication Return Program

www.takebackyourmeds.org

- Medication take-back drives.
- If no other option is available, mix drugs (do not crush) with used coffee grounds or kitty litter in a plastic bag, then throw away.

Safely store opioids out of reach of infants, children, teens and pets

- Lock your pills if possible.
- Try to keep a count of how many pills you have left.
- Do not store your opioids in places that allow easy access to your pills, for example in kitchens or bathrooms.

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

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

First Hill

Main hospital
747 Broadway
Seattle, WA 98122

Orthopedic Institute
601 Broadway
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.

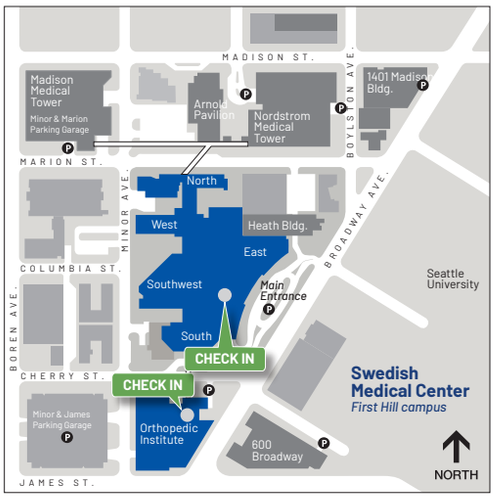
Preadmission check-in

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

- 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.

CHERRY HILL CAMPUS



FIRST HILL CAMPUS

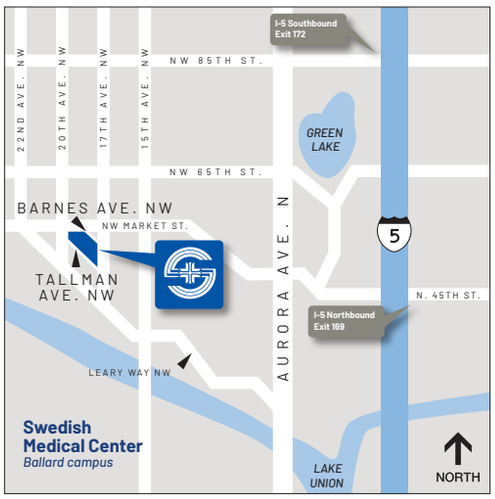
Ballard

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.

Surgery check-in
Check-in for surgery is on the third floor of the hospital in the south wing.



BALLARD CAMPUS

Issaquah

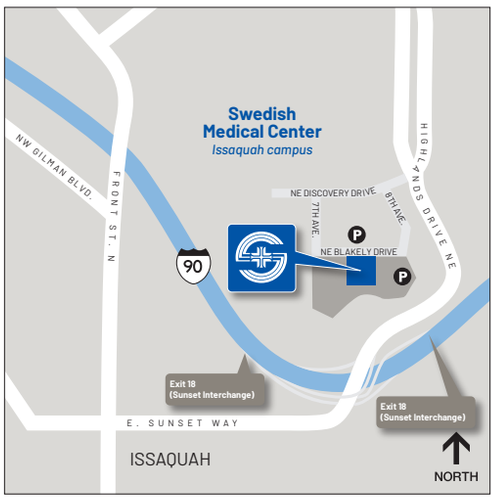
751 NE Blakely Drive
Issaquah, WA 98029

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

- **If traveling east,** keep left at the fork and merge onto Highlands Drive NE.
- **If traveling 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.

Surgery check-in
Check-in for surgery is on the first floor.



ISSAQUAH CAMPUS

Edmonds

21601 76th Ave. W.
Edmonds, WA 98026

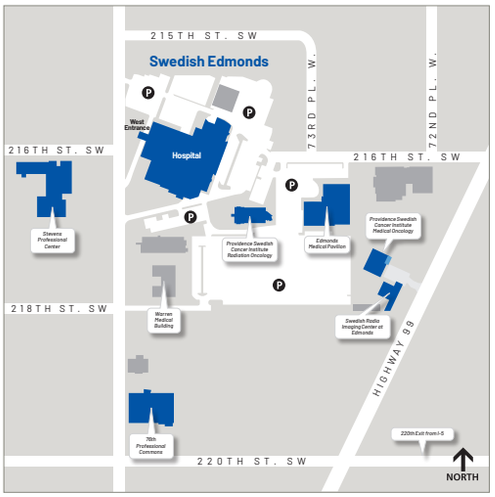
From the south: Take I-5 northbound to the 220th St./Mountlake Terrace Exit (179). Turn left (west) onto 220th St. SW. Turn right onto Pacific Highway 99. Turn left onto 216th St. SW. Either turn left at the first stop sign for the free parking garage or continue straight and veer left for the patient drop-off near the main entrance.

For the emergency entrance, follow the same directions (the emergency entrance is left of the main entrance).

From the north: Take I-5 southbound to the 220th St./Mountlake Terrace Exit (179). Turn right (west) onto 220th St. SW. Turn right onto Pacific Highway 99. Turn left onto 216th St. SW. Either turn left at the first stop sign for the free parking garage or continue straight and veer left for the patient drop-off near the main entrance.

Surgery check-in

You will need to enter the hospital through the **main entrance (first floor)**, located next to the Emergency Department and Starbucks. Upon entering the facility, please check in at patient registration. Once registration is completed, you will be directed or escorted to your preprocedure/surgery location.



EDMONDS CAMPUS

Notes

Notice of nondiscrimination and accessibility rights

Providence St. Joseph Health and its Affiliates[1] (collectively "PSJH") comply with applicable Federal civil rights laws and do not discriminate against, exclude or treat differently any individuals accessing any PSJH Program or Activity on any basis prohibited by local, state or federal laws, including but not limited to on the basis of race, color, religious creed (including religious dress and grooming practices), national origin (including certain language use restrictions), ancestry, disability (mental and physical including HIV and AIDS), medical condition (including cancer and genetic characteristics), marital status, age, sex (including pregnancy, childbirth, breastfeeding and related medical conditions), gender, gender identity, gender expression and sexual orientation, genetic information (including family medical history), or military/veteran status as those terms are defined under federal and state laws and rules.

In compliance with the Americans with Disabilities Act (ADA), PSJH provides qualified interpreters and other auxiliary aids and services free of charge:

(1) to people with disabilities to communicate effectively with us, such as: (a) Qualified sign language interpreters; and (b) Written information in other formats (large print, audio, accessible electronic formats, other formats); and

(2) to people whose primary language is not English, such as: (a) Qualified interpreters; and (b) Information written in other languages.

If you need any of the above services, please contact the Civil Rights Coordinator below. If you need Telecommunications Relay Services, please call 1-800-833-6384 or 7-1-1.

If you believe that PSJH has failed to provide these services or discriminated in another way on the basis of race, color, religious creed (including religious dress and grooming practices), national origin (including certain language use restrictions), ancestry, disability (mental and physical including HIV and AIDS), medical condition (including cancer and genetic characteristics), marital status, age, sex (including pregnancy, childbirth, breastfeeding and related medical conditions), gender, gender identity, gender expression and sexual orientation, genetic information (including family medical history), or military/veteran status, you can file a grievance with PSJH by contacting the Civil Rights Coordinator for your location listed below:

Swedish Civil Rights Coordinator
Civil Rights Coordinator, Department of Risk Management & Patient Safety, Swedish Health Services 747 Broadway, Seattle, WA 98122 Tel: 1-844-469-1775; Interpreter Services: 1-888-311-9127 Email: Nondiscrimination.swedish@providence.org

You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, the above-noted civil rights coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Avenue SW.,
Room 509F, HHH Building,
Washington, DC 20201
1–800–368–1019, 800–537–7697 (TDD).

Complaint forms are available at:
http://www.hhs.gov/ocr/office/file/index.html.

[1] For purposes of this notice, "Affiliates" is defined as any entity that is wholly owned or controlled by Providence St. Joseph Health (PSJH), Providence Health & Services, St. Joseph Health System, Western HealthConnect, Covenant Health Network, Inc., or is jointly owned or controlled by PSJH or its Affiliates and bears the Providence, Swedish Health Services, Swedish Edmonds, St. Joseph Health, Covenant Health Network, Covenant Health, Kadlec Regional Medical Center, or PacMed Clinics name.

ATTENTION: If you speak another language, language assistance services, free of charge, are available to you.
Call 888-311-9127 (TTY: 711).

Scan for information about Swedish's nondiscrimination policy

Español (Spanish)	ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 888-311-9127 (TTY: 711).
繁體中文 (Chinese)	注意：如果您講中文，我們可以給您提供免費中文翻譯服務，請致電 888-311-9127 (TTY: 711)
Tiếng Việt (Vietnamese)	CHÚ Ý: Nếu bạn nói Tiếng Việt, các dịch vụ hỗ trợ ngôn ngữ miễn phí có sẵn dành cho bạn. Gọi số 888-311-9127 (TTY: 711).
Tagalog (Tagalog – Filipino)	PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 888-311-9127 (TTY: 711).
(Korean)	주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 888-311-9127 (TTY: 711) 번으로 전화해 주십시오.
Русский (Russian)	ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 888-311-9127 (телетайп: 711).
Հայերեն (Armenian)	ՈՒՇԱԴՐՈՒԹՅՈՒՆ. Եթե խոսում եք հայերեն, ապա ձեզ կարող են տրամադրվել լեզվական աջակցության անվճար ծառայություններ: Զանգահարեք 888-311-9127 (հեռատիպ (TTY)՝ 711).
العربية (Arabic)	يُرجى الانتباه: إذا كنتم تتكلمون اللغة العربية، فأعلموا أن خدمات المساعدة اللغوية متوفرة مجاناً لكم. اتصلوا برقم الهاتف 888-311-9127 [أو برقم الهاتف 888-311-9178 عند الاتصال بالمركز الطبي السويدي في إدموندز (Swedish Edmonds)] (أو بخط المبرقة الكاتبة TTY لضعاف السمع والنطق على الرقم 711).
فارسی (Farsi) Persian (Farsi)	**توجه**: اگر به زبان فارسی صحبت می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با شماره 888-311-9127 (TTY:711) تماس بگیرید.
日本語 (Japanese)	注意事項：日本語を話される場合、無料の言語支援をご利用いただけます．888-311-9127 (TTY:711) まで、お電話にてご連絡ください.
ਪੰਜਾਬੀ (Punjabi) Panjabi*	ਧਿਆਨ ਧਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਿ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਧਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫ਼ਤ ਉਪਲਬਿ ਹੈ। 888-311-9127 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ।
ខ្មែរ (Cambodian) Mon-Khmer, Cambodian	សូមចាំអារម្មណ៍៖ ប្រសិនបើលោកអ្នកនិយាយភាសាខ្មែរ នោះសេវាជំនួយផ្នែកភាសានឹងមានផ្តល់ជូនលោកអ្នកដោយឥតគិតថ្លៃ។ សូមទូរស័ព្ទទៅលេខ 888-311-9127 (TTY: 711)។
हिंदी (Hindi)	ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 888-311-9127 (TTY: 711) पर कॉल करें।
Hmoob (Hmong)	LUS CEEV: Yog tias koj hais lus Hmoob, koj tuaj yeem siv cov kev pab txhais lus pub dawb. Hu rau 888-311-9127 (TTY: 711).
ภาษาไทย (Thai)	**โปรดทราบ: หากคุณพูดภาษาไทย คุณสามารถใช้บริการความช่วยเหลือทางภาษาได้โดยไม่มีค่าใช้จ่าย โทร** 888-311-9127 (TTY: 711)
Deutsch (German)	ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 888-311-9127 (TTY: 711).
اردو (Urdu)	توجہ: اگر آپ اردو بولتے ہیں، تو آپ کو زبان کی مدد کی خدمات مفت میں دستیاب ہیں ۔ کال کریں 888-311-9127 (TTY: 711).
Українська (Ukrainian) Ukrainian*	УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером 888-311-9127 (телетайп: 711).
Français (French)	ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 888-311-9127 (ATS: 711).
Diné Bizaad (Navajo)	**Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída' áwo'dęę', t'áá jiik'eh, éí ná hóló, kojį' hódíílnih 1-888-311-9127 (TTY: 711.)**
ພາສາລາວ (Lao) Laotian	ໝາຍເຫດ: ຖ້າ ທ່ານ ເວ້ົ້າ ພາສາລາວ, ມ ີການ ບໍ ລ ິການ ຊ ່ວຍ ເຫ ຼ ືອດ ້ານພາສາໂດຍບ ໍ ່ເສ ຍ ຄ ່າ ທ ່ານ. ໂທ 888-311-9127 (TTY: 711).
ગુજરાતી (Gujarati)	**સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો** 888-311-9127 (TTY: 711).
Cushite*	XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 888-311-9127 (TTY: 711).
አማርኛ (Amharic) Amharic*	ማስታወሻ: የሚናገሩት ቋንቋ አማርኛ ከሆነ የትርጉም እርዳታ ድርጅቶች፣ በነጻ ሊያግዝዎት ተዘጋጀተዋል፡ ወደ ሚከተለው ቁጥር ይደውሉ 888-311-9127 (መስማት ለተሳናቸው: 711)
Română (Romanian) Romanian*	ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la 888-311-9127 (TTY: 711).
Gagana fa'a Sāmoa (Samoan) Samoan*	MO LOU SILAFIA: Afai e te tautala i le Gagana Samoa, o loo iai auaunaga fesoasoani, e leai se totogi mo oe, Telefoni mai i le: 888-311-9127 (TTY:711)
Ilokano (Ilocano) Ilocano*	AGATENSION: No agsasaokayo iti Ilocano, dagiti serbisio para ti tulong iti pagsasao nga awan ti bayadan ket siaadda para kadakayo. Tawagan ti 888-311-9127 (TTY: 711).
Italiano (Italian)	ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 888-311-9127 (TTY: 711).
Polski (Polish)	UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 888-311-9127 (TTY: 711).
Norsk (Norwegian) Norwegian*	MERK: Hvis du snakker norsk, er gratis språkassistansetjenester tilgjengelige for deg. Ring 888-311-9127 (TTY: 711).
Deitsch (Pennsylvania Dutch)	Wann du schwetzscht, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schprooch. Ruf selli Nummer uff: Call 888-311-9127 (TTY: 711).
Somali	OGAYSIIS: Hadaa ku hadasho luuqada Soomaaliga, waxaa kuu diyaara caawisyo xaga luuqa daada oo kuu bilaahsh ah Fadlan Wac taleefaankaan. 888-311-9127 (TTY: 711)
Tigrigna/Tigrinya	ኣትተንትኦን: እፍ ዮኡ ስጌኣኽ ትግርኛ፣ ላንጉኣገ ኣስስስታንጭኤ ሰርቪጨስ፣ ፍረአ ኦፍ ቻርገ፣ ኣረ ኣቨላብለ ቶ ዮኡ። ጨልፈ: 1-888-311-9127 (ትትይ: 711)
American Sign Language	

Providence SWEDISH

swedish.org

We do not discriminate on the basis of race, color, national origin, sex, sexual orientation, gender identity or expression, age, or disability in our health programs and activities.

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 888-311-9127(TTY:711)

注意：如果您講中文，我們可以給您提供免費中 文翻譯服務，請致電 888-311-9127(TTY:711)

Preadmission Clinic/System SU-25-0120 Rev 4/26