MINNETONKA

PREPARING FOR SURGERY

A patient and family guide to surgical services

Children's
MINNESOTA
INTERPRETER SERVICES

Children’s Minnesota offers interpreter services for all languages to assist patients and their families. To provide the best possible care for all our patients, in-person and phone interpreters are available 24 hours a day seven days a week and are free of charge. You can reach the main interpreter services line by calling 612-813-7600.

**Spanish:** Children’s Minnesota ofrece servicios de interpretación en todos los idiomas a sus pacientes y sus familias. Para proporcionarle la mejor atención posible, nuestros intérpretes están disponibles, por teléfono y en persona, las 24 horas del día, los siete días de la semana y sin costo alguno. Hágale saber a su enfermera(o) si usted necesita intérprete. Para recibir ayuda inmediata, marque a nuestra línea directa de intérpretes de español al 612-813-7500.

**Somali:** Isbitaalku wuxuu idiin diyaariyay turjubaano luuqad kasta ah oo caawinaya bukaanada iyo qoysaskooda. Si aan u siino daryeelka ugu fiican dhamaan bukaanadayada, waxaa idiin diyaar ah turjubaano bilaash ah, 24 saac maalintii, todobada maalmood, haddii uu joogo qofku ama taleefan lagula hadlayo. Fadlan u sheeg kalkaaliyaasha haddii aad u baahantahay turjubaan. Wac laynka taleefanka qoysaska Somaalida oo ah 612-813-2020, si aad u heshid mucaawino deg deg ah.

**Hmong:** Tsev Kho Mob Me Nyuam Yaus muaj neeg txhais lus rau tag nrho txhua yam lus pab rau cov neeg mob thiab lawv cov tsev neeg. Muab qhov kev pab tu kho kom zoo tshaj plaws rau cov neeg mob, neeg txhais lus sib fim ntsej muag thiab hauv xov tooj muaj nyob rau 24 teev ib hnh xya hnhub ib lub lim tiam thiab tsis tsub nqi li. Thov hais qhia rau koj tus neeg tu mob paub yog koj xav tau ib tug neeg txhais lus.

**Deaf and Hard of Hearing:** 612-813-5826 (voice/TTY).
Dear parent or guardian,

Thank you for choosing Children’s Minnesota. At Children’s we believe that families and staff are partners, working together in the best interest of your child. Children’s surgical services cares for patients undergoing a surgery or a procedure requiring anesthesia.

Taking the time to prepare children and families for a visit can help reduce anxiety and create a more positive experience for everyone involved. This guide will:

• Help you get ready for your child’s procedure.
• Provide important eating and drinking information.
• Help you communicate with your child about their procedure.
• Offer a general overview of what will occur on the day of your child’s procedure.
• Provide a history and physical form and medication list.
• Provide maps, directions and contact information.

We look forward to your visit and are honored that you have chosen Children’s Minnesota for your family’s health care.

Sincerely,
The Surgery Staff of Children’s Minnesota
TO-DO CHECKLIST

Below are some helpful tips to prepare you for your child’s procedure:

☐ I called my insurance company to ask if I need prior authorization for the procedure or hospital stay. (If you have questions about cost of services or need financial resources, call 952-992-5650.)

☐ I have scheduled a pre-operative exam with my child’s primary care physician no more than 30 days prior to the procedure date. An H&P form is available on page 5 of this booklet for you to take to the exam.

☐ Pre-operative exam date: ________________________
   Time: _________________________________ a.m./p.m.

☐ My primary care physician completed and signed the medical history and physical exam (H&P) form.

☐ Urine for pregnancy test (for females 12 years and older, or menstruating) should be done within 7 days before procedure.

☐ I have pre-registered my child at childrensMN.org/surgeryregistration or called patient registration at 612-813-7900. Please inform them of any special communication (hearing, visual or language) support that is needed.

☐ I have asked the surgeon about any special equipment I may need at home after the procedure.

☐ I have made plans for someone to care for my other children while I’m at Children’s Minnesota.

☐ I have received the pre-procedure phone call from Children’s Minnesota surgery staff to review my child’s procedure, health history and medications. Pre-procedure calls start three days before the scheduled surgery date. If you have not received a call by the day before arrival, please call 952-930-8655.

☐ I have made a list of any medications, vitamins and herbal supplements. (Bring this list on the day of the procedure.)
**PREPARING YOUR CHILD FOR THEIR PROCEDURE**

Here are a few tips to help you prepare your child for their procedure. If you are interested in scheduling a tour, please call 952-930-8700.

**INFANT** (0 to 12 months old)
Familiar items are important to help comfort infants.
- Bring a favorite comfort item (washed).
- Bring a familiar bottle for after the procedure.

**TODDLERS** (1 to 3 years old)
Allow choices, such as which stuffed animal to bring or what to wear.
- Bring a favorite comfort item (washed).
- Help explain what the staff will do before they examine your child.
- Partner with staff by allowing them to “examine” your child’s stuffed animal before they examine your child to ease their fears.

**PRESCHOOLERS** (3 to 5 years old)
Prepare your child about three days before the procedure.
- Bring a favorite comfort item (washed).
- Talk to your child about the hospital.
- Be honest, give simple explanations such as:
  - Stretcher = “bed with wheels”
  - Blood pressure cuff = “arm hug”
  - Anesthesia = “sleepy air”
  - Recovery room = “wake up room”
- Play is how preschoolers learn, so playing hospital or doctor is very helpful.

**ELEMENTARY SCHOOL-AGE** (5 to 12 years old)
Prepare your child about a week before the procedure.
- Bring a favorite comfort item (washed).
- Allow your child the chance to ask questions and talk about concerns.
- Be honest.
- Explain what your child will see after the procedure (stitches or bandages).
- Tell your child they may need to take medicine to feel better.

**TEEN** (12 to 18 years old)
Teenagers are learning independence and decision-making. They are concerned with body image, privacy and relationships with friends.
- Bring a favorite comfort item (music/iPod®, cards, games, movies, books, cell phone, laptop, iPad®).
- Talk about what’s going to happen and encourage your teen to participate in decision-making.
- Be honest.
- Encourage your teen to ask questions of their doctor or nurse.

**MORE RESOURCES**
for preparing your child for their procedure

Patient/family education sheets about tests, illnesses, medicines, home care and a host of other information can be found at childrensMN.org/educationmaterials.

Visit childrensMN.org/planningforsurgery for additional resources:
- Register for an optional pre-operative tour or call 651-220-6116.
- Watch a video about Children’s Minnesota surgery services at childrensMN.org/surgery.
- Check out “My Surgery Story” books — customizable and printable stories to help children learn what to expect during their health care experience.
- Download a pre-surgery guide.
**IMPORTANT INFORMATION TO KNOW BEFORE YOUR CHILD’S PROCEDURE**

*To be completed during your pre-procedure phone call.*

Primary care physician _______________________________ Phone number (_____)____________________

Surgeon _____________________________________________ Phone number (_____)____________________

Date of procedure ________________________________ Arrival time _____________ a.m./p.m.

**Anesthesia/sedation eating and drinking guidelines**

For your child’s safety, it is very important to have an empty stomach when anesthesia or sedation medicines are given. **This is important because if vomiting occurs during the procedure, food or liquid can get into the lungs. If your child has had even a small amount to eat or drink, the procedure will be delayed or canceled.**

<table>
<thead>
<tr>
<th>Eat and drink as usual until:</th>
<th>a.m./p.m.</th>
<th>8 hours before scheduled arrival time</th>
</tr>
</thead>
<tbody>
<tr>
<td>This includes rice cereal and thickeners for milk or formula.</td>
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</table>

<table>
<thead>
<tr>
<th>Milk or formula until:</th>
<th>a.m./p.m.</th>
<th>6 hours before scheduled arrival time</th>
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<thead>
<tr>
<th>Breast milk until:</th>
<th>a.m./p.m.</th>
<th>4 hours before scheduled arrival time</th>
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<thead>
<tr>
<th>Clear liquids until:</th>
<th>a.m./p.m.</th>
<th>2 hours before scheduled arrival time</th>
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</thead>
<tbody>
<tr>
<td>Clear liquids include: clear Popsicles®, apple juice, Gatorade®, Jell-O®, Kool-Aid® or soft drinks</td>
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<table>
<thead>
<tr>
<th>Nothing by mouth:</th>
<th>a.m./p.m.</th>
<th>2 hours before scheduled arrival time</th>
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<tr>
<td>Including gum, candy and breath mints</td>
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**Can I give my child’s medicines?**

Talk with your child’s doctor about taking medicines before the procedure. If your doctor recommends a specific medicine (i.e., seizure or heart medicine), you may give it with a sip of clear liquid up until 2 hours before scheduled arrival time.

Do not give medicines with pudding, apple sauce, yogurt or other foods.
History and physical examinations must be completed no more than 30 days prior to admission or surgery, before any procedure, and not more than 24 hours post admission.

Primary Physician: _____________________________  Surgeon: ______________________

Date of Examination: ________________  Time: ____________  Date of Surgery: ________________

Procedure: _____________________________________________________________

Wt.: ________ lbs  ________ kg  Ht.: ________ in  ________ cm
Age: ________  OFC: ________ (< 24 months of age)  □N/A
BP: _________  Pulse: _______  Resp: _________  T: _______  Last Menstrual Period: ________________  □N/A

Urine for pre-op pregnancy: (for 12 years and older or menstruating) **Should be done within 7 days of procedure.

□ Negative  □ Positive

CHIEF COMPLAINT: _____________________________________________________________

HISTORY OF PRESENT ILLNESS:

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

PAST MEDICAL HISTORY (Pregnancy/perinatal history, medical, exposures, diet, transfusions, medications):

_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

PAST SURGICAL HISTORY:

_________________________________________________________________________
_________________________________________________________________________

ALLERGIES: _______________________________________________________________

CURRENT MEDICATIONS

□ No current medications  □ Information not available  □ Information available

NOTE: Please include all medications taken at home (vitamins, herbal remedies, homeopathic therapies and over-the-counter medications) in list of medications.

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<thead>
<tr>
<th>NAME</th>
<th>DOSE/ROUTE/FREQUENCY</th>
<th>START DATE</th>
<th>LAST TAKEN</th>
<th>PURPOSE</th>
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FAMILY HISTORY (Cardiac, cancer, respiratory, bleeding disorder, anesthetic reaction):

_________________________________________________________________________
_________________________________________________________________________

SOCIAL HISTORY (Current care taker, living situation, behavior-social adjustment):

_________________________________________________________________________
_________________________________________________________________________
**REVIEW OF SYSTEMS (All abnormal findings need comment)**

| Constitutional (fever, wt. loss, etc.) |  |
| Respiratory |  |
| Cardiovascular | A |
| GI/Hepatic | N B |
| Neuro | O N |
| Urinary Tract/Renal | R O |
| Endocrine | M R |
| Mental/Development | A M |
| Vision/Hearing | L A |
| Musculoskeletal | L |
| Skin |  |
| Bleeding Disorder |  |

Tobacco/Alcohol/Drug Use: □ N/A

Any use of aspirin or ibuprofen within 7 days of surgery? □ Yes □ No

Anesthesia concerns/family history? □ Yes □ No

Immunizations up-to-date? □ Yes □ Not sure □ No, describe:

**Exposure in the past 3 weeks to:**

- Chicken pox: □ No □ Yes, Date: __________
- Whooping cough: □ No □ Yes, Date: __________
- Fifth disease: □ No □ Yes, Date: __________
- Measles: □ No □ Yes, Date: __________
- Other: □ No □ Yes, Date: __________
- Tuberculosis: □ No □ Yes, Date: __________

**PHYSICAL EXAMINATION within 30 days of procedure (All abnormal findings need comment.**

| Head |  |
| Eyes |  |
| Ears |  |
| Nose |  |
| Throat/Mouth |  |
| Neck/Thyroid | A |
| Chest | N B |
| Lungs | O N |
| Breasts | R O |
| Heart/Blood Vessels | M R |
| Abdomen/GI | A M |
| Neurologic | L A |
| Mental Status | L |
| Muscular/Skeletal/Extremities |  |
| Skin/Hair/Nails |  |
| Genitalia/GU |  |
| Lymphatic |  |

**LAB (Hgb, A):**

**STUDIES (CXR, EKG, Head CT):**

**IMPRESSION:**

Provider Signature: ___________________________ Date: ___________ Time: ___________

Print Name Legibly: ___________________________ Phone/Pager #: ____________________

Children’s Provider has reviewed H&P from outside provider. □ No changes to documentation provided.

Patient ready for surgery/procedure. □ Changes noted as follows: ____________________________

Physician Signature: ___________________________ Date: ___________ Time: ___________

Place Patient Label Here
DAY BEFORE THE PROCEDURE

☐ Pre-register your child online at childrensMN.org/preregistration, or call us at 612-813-7900 from 7 a.m. – 6 p.m., daily.
  • Please register no later than 3 p.m. the day before your child’s visit.

☐ Review the anesthesia information and know the eating and drinking guidelines (page 4).

☐ Does your child have a cold, rash or fever? If so, please call your child’s doctor. The surgery may need to be done at a later date.

☐ Give your child a shower or bath the evening before surgery. Remove all:
  • Nail Polish and make up
  • Pierced or other jewelry
  • Scalp braids, beads, hair binders, barrettes or extensions

☐ Have plenty of clear liquids available for after the procedure such as water, Gatorade®, Kool-Aid®, Jell-O®, apple juice, breast milk, Pedialyte® and clear Popsicles®.

☐ Make plans to be with your child or have another adult present while your child recovers at home.

DAY OF THE PROCEDURE: What to bring

☐ List of medications, vitamins and herbal supplements

☐ Photo ID (and proof of guardianship if necessary)

☐ Insurance card(s)

☐ Pre-authorization (if required by your child’s insurance carrier)

☐ Completed history and physical exam (H&P) form

☐ Money and credit/debit card for incidentals, food, parking or medications

☐ Comfortable warm clothing for after your child’s procedure

☐ Favorite comfort item (washed)

WHAT TO EXPECT WHEN YOU ARE AT CHILDREN’S MINNESOTA

Checking in at the surgery desk
You’ll be asked to verify the spelling of your child’s full name and birth date.

Preoperative area
Surgery staff will place an ID bracelet on your child and ask you to check it to be sure your child’s name and birth date are correct. (Staff check the ID bracelet before each procedure or medicine.) The nurse will ask what type of procedure your child is having and where on your child’s body the procedure will occur. These checks are done frequently to assure we are providing the safest possible care.

The care team will check your child’s health, including:
  • Breathing
  • Weight
  • Temperature
  • Blood pressure
  • Pulse
  • Oxygen level
  • Time of last food or drink

☐ Pregnancy test for females 12 or older, or menstruating

☐ Lab or x-ray tests, if needed

Your child will then change into hospital pajamas.

Surgical Site Infection and CHG Bath
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, all surgeries do carry a risk. At Children's Minnesota, we take precautions to prevent infections. Some procedures require that the patient’s body is wiped with 2% Chlorhexidine Gluconate (CHG) disposable cloths. This will occur in the preoperative area with the assistance of parents.

Additional information can be found here:
**Frequently Asked Questions about Surgical Site Infections:** [www.cdc.gov/hai/pdfs/ssi/ssi_tagged.pdf](http://www.cdc.gov/hai/pdfs/ssi/ssi_tagged.pdf)

**CHG Bath:**
[childrensMN.org/CHGbath](http://childrensMN.org/CHGbath)

**Child life specialist**
Child life specialists help your child, of any age, understand what to expect during the anesthesia and surgery experience. They teach your child coping strategies specific to their age and development level.
Child life department: 651-220-6465

**Care team**
You will meet with your child’s preoperative nurse, surgeon, anesthesiologist, nurse anesthetist (CRNA), and operating room (OR) nurse. The care team will check your child’s ID bracelet and answer any questions and concerns you may have about your child’s procedure.

**Surgeon**
The surgeon will explain the procedure and answer any questions that you and your child have before surgery. Then the surgeon will ask you to sign an informed consent form, which states that you understand the procedure, the risks and benefits, and gives your permission to perform the procedure. The surgeon may mark the site or side where the procedure will be done.

**Anesthesiologist**
The anesthesiologist will ask some medical history questions and answer any questions you or your child may have. Then you and your child’s anesthesiologist will work together to decide what is the best method of anesthesia administration for your child, either by anesthesia mask or IV. The anesthesiologist works with a nurse anesthetist (CRNA) who is monitoring your child through the entire surgery.

**Children’s Comfort Promise**
We’ve made a promise to our patients — we call it Children’s Comfort Promise. It means we will do everything possible to prevent and treat pain. Evidence supports that if we follow four steps children will have less pain with needle procedures.

1. Numb the skin
2. Sugar water or breastfeeding (for babies 12 months or younger)
3. Comfort positioning
4. Distraction

To learn more about what is possible, go to [childrensMN.org/comfortpromise](http://childrensMN.org/comfortpromise).

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**WHAT TO EXPECT DURING THE PROCEDURE**

After your child is asleep and in the care of their surgical team, you will be escorted back to your child’s room and will be asked to wait there or in the family waiting room. You can bring your laptop, books or other items to help occupy your time. It is important that at least one parent remain in the Surgery Center at all times in case the surgeon or other care team member needs to talk with you. If this is difficult for you, please discuss with your nurse.

**WHAT TO EXPECT AFTER THE PROCEDURE**

After the procedure is completed, your child will be transferred to the recovery room to wake up from anesthesia. Each child and procedure is unique, so the length of time spent in recovery varies. Your child may have an IV after surgery.

The nurse will check your child’s temperature, pulse, breathing and blood pressure and monitor pain using a pain scale. Once awake enough and feeling ready to drink, your child may start with some ice chips, Popsicles® or clear liquids.
Your child will be monitored for side effects, which may include:

- Sleepiness
- Irritability or dizziness
- Occasional nausea/vomiting
- Sore throat
- Headache
- Muscle aches

**LEAVING THE SURGICAL SERVICES AREA**

**Outpatient (same day) surgery – Going home**

When your child is ready to leave the surgery center, you will receive discharge instructions from your care team to help prepare you for caring for your child at home. Patient/family education materials are available at childrensMN.org/educationmaterials.

**PATIENT RIGHTS AND RESPONSIBILITIES**

Every child and family has rights and responsibilities. The Federal and Minnesota Patients’ Bill of Rights are posted on the wall in the surgery family waiting room for your review. You may also ask your nurse or the front desk for a copy of any of these brochures: “Notice of Privacy Practices,” “Patient Rights and Responsibilities,” and “Federal Patients’ Bill of Rights.” Family liaisons at Children’s Minnesota can help answer any questions you may have. Contact them at 612-813-7393.

**MYCHILDREN’S**

MyChildren’s is an online resource offered by Children’s Minnesota to give you secure access to your Children’s medical records on your computer or phone, including immediate access to lab results, immunizations, medications and more. To enroll in MyChildren’s, ask the front desk staff or visit childrensMN.org/MyChildrens for more information.

**CONTACTING CHILDREN’S MINNESOTA**

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone</th>
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<tbody>
<tr>
<td>General information</td>
<td>952-930-8600</td>
</tr>
<tr>
<td>childrensMN.org</td>
<td></td>
</tr>
<tr>
<td>Patient registration</td>
<td>612-813-7900</td>
</tr>
<tr>
<td>childrensMN.org/surgeryregistration</td>
<td></td>
</tr>
<tr>
<td>Pre-op information</td>
<td>952-930-8655</td>
</tr>
<tr>
<td>(patient illness, pre-procedure nurse line)</td>
<td></td>
</tr>
<tr>
<td>History and physical exam (H&amp;P) form</td>
<td>952-930-8690</td>
</tr>
<tr>
<td>(Fax)</td>
<td></td>
</tr>
<tr>
<td>Family relations liaison</td>
<td>612-813-5826</td>
</tr>
<tr>
<td>(compliments, concerns, complaints)</td>
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</tr>
<tr>
<td>Hearing communication coordinator</td>
<td>612-813-7600</td>
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<tr>
<td>(voice/TTY)</td>
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</tr>
<tr>
<td>Language translation</td>
<td>612-813-6432</td>
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<tr>
<td>Financial services</td>
<td>952-992-5650</td>
</tr>
<tr>
<td>(patient accounts, financial counseling)</td>
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<tr>
<td>Revenue management</td>
<td>952-992-5627</td>
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<tr>
<td>(cost estimates)</td>
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<tr>
<td>Security services</td>
<td>612-813-5416</td>
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**GETTING TO THE CHILDREN’S MINNESOTA MINNETONKA DAY SURGERY CENTER**

6050 Clearwater Drive
Minnetonka, MN 55343
952-930-8600

**A FINAL WORD**

Here at Children’s Minnesota, we have found that taking the time to prepare children and families for a visit helps reduce any anxiety and ensures a more positive experience for everyone involved. We look forward to your visit and are honored you have chosen us for your family’s health care.
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to surgical services