



My Surgery Guide

Important Instructions
and Information About Surgery



AT THE FOREFRONT

UChicago
Medicine

Get Ready for Surgery

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Share this Guide with your family and care providers.

My Appointments

Go to all pre-surgery appointments your doctor sets up for you.

Anesthesia Appointment:

If you have an anesthesia appointment, fill out and bring the **Patient Medical History form** to your appointment.

Anesthesia Appointment Location:

Duchossois Center for Advanced Medicine, (DCAM)
University of Chicago Medicine 3rd Floor, Room 3E
5758 South Maryland Ave. Chicago, IL 60637

Date:

Time:

Other Appointments:

Date:

Time:

Location:

Date:

Time:

Location:

Date:

Time:

Location:

My Health Care Team

Your health care team at the UChicago Medicine is here to care for you. Here are some of the things members of your health care team do.

My Surgery Team

Doctors

You will be cared for by a team of doctors (physicians). A senior doctor will supervise your treatment and decide when you are ready to go home. They are a faculty member of the University of Chicago (also called attending physician or physician of record).

Physician Residents and Fellows

The team of doctors caring for you will include doctors called residents and fellows. These are licensed doctors getting more training in a medical specialty.

Physician Assistants (PA)

Physician Assistant (PA) is a licensed medical professional working under the direction of a doctor and with the healthcare team. They diagnose (find conditions and the cause of symptoms) and treat illnesses, get patient's medical history, do physical exams, order and give test results, make treatment plans, prescribe medicine, assist in surgery and do surgical procedures in the clinic.

Advanced Practice Nurses (APN)

An APN is a nurse with extra training who works with your doctors and treats many medical problems. They can also provide you with information and help plan your care with other members of the health care team.

Medical Students

Medical students help take care of you as part of their training to become doctors. They can be important resources for you. Students are supervised by doctors.

My Anesthesia Team

The anesthesia team includes anesthesiologists, CRNAs, and physician residents and fellows in training. Anesthesia keeps you from having pain during surgery. (see page 8)

Anesthesiologists

Anesthesiologists are doctors with special training to give anesthesia and manage pain. They make sure that you are safe and comfortable during surgery and recovery from anesthesia. They will work with you before, during and after surgery.

Certified Registered Nurse Anesthetists (CRNA)

A CRNA is an advanced practice nurse with special training to give anesthesia and manage pain. They work with the anesthesiologist and will also work with you before, during, and after surgery.

My Inpatient Team

Nurses

Nurses are an important link between you and other people caring for you. They help share your needs with your health care team and explain your treatment to you.

Nurses give out medications and intravenous (IV) fluids, give treatments and plan your daily care. They can also teach you about your condition and how to keep up treatment after you leave the hospital.

Nursing Assistants

Nursing assistants check your vital signs. This include blood pressure, temperature, and pulse. They also help with daily living activities such as meals and bathing. They provide basic care to help you be comfortable during your stay. Nurses oversee nursing assistants.

Social Workers

Social workers can help you plan for when you leave the hospital, find financial support, refer you to community resources, give you advice about your illness and your plan for care after you leave the hospital.

Therapists: There are many kinds of therapists

Physical Therapists help to maintain and restore physical function (how well your body works). They help you learn to use your body with exercise.

Occupational Therapists help you build up and get back the skills needed for daily life. They work to help you be as independent as possible as quickly as possible.

Respiratory Therapists provide care to patients with breathing and heart problems. They help give oxygen and breathing treatments, and do tests that show how well the lungs are working.

Care Coordinators

Care Coordinators are specially trained nurses who help make a plan of care that includes you as the main decision maker. The Care Coordinator is a link between you and your insurance company. They can help ask for approval from your insurance company for services you will need after you leave the hospital.

Patient Service Coordinators

Patient Service Coordinators are the front desk staff who help check you in for your surgery. They provide updates to your family during your surgery, and can help you and your family with any needs during your stay.

Section 1: The Days and Weeks Before Surgery

Preparing for Surgery – The Days and Weeks Before Surgery

Getting ready for surgery is very important for your health and recovery. Follow the instructions in this section for what to do in the days and weeks before surgery. **Contact your healthcare team if you have any questions.**

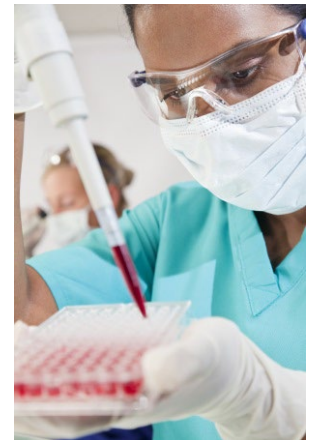
Appointments and Tests Before Surgery

Your doctor may want you to have more tests or see an anesthesiologist or other doctors before your surgery.

Go to all the appointments your doctor sets up for you before your surgery. If you do not go to these appointments, your surgery may be cancelled.

Any lab work or other tests you need done before surgery must be done at least one week before surgery. If these are not done, or your surgery may be cancelled and be planned for another day.

If your tests are done some place other than UChicago Medicine, contact your doctor's office for information about where to send your test results. You can send the results or bring copies with you on the day of your surgery.



Patient Medical History for Anesthesia

It is important that your doctor and anesthesia team know about all of your medical history. If you do not have an anesthesia appointment before surgery, your anesthesiologist will ask you for a detailed medical history the morning of surgery.

Medical Problems

Tell your doctor and anesthesiologist about any allergies or medical problems you have, including other infections. Health problems such as allergies, diabetes, and obesity may affect your surgery and treatment.

Talk to your doctor or anesthesiologist at least one week before surgery about all medications you take including:

- How much you take
- How often you take them
- When you take them
- Any medication you stopped taking and when you stopped taking it.

It is possible your surgery may be cancelled if your doctor does not know about all your medications.



Section 1: The Days and Weeks Before Surgery

Follow Instructions From Your Doctor and Your Anesthesiologist

Your doctors may need to make changes to your medication for the weeks or days before surgery and for the day of surgery.

Talk to your doctor about when to take your medications.

- Ask your doctor if you need to change when you take any of your medications before your surgery. This includes medications for diabetes, hypertension, and pain. It also includes medications for your heart, lungs, or eyes.
- If are told to take your morning medications on the day of surgery, drink only as much water as you need to take them.
- If you have lost your medication instructions, call **(773) 834-3531**.
- Get any prescriptions filled **before** surgery that you will need to take after your surgery. Then, you can begin taking them as soon as you get home.



Advance Directive

You always have the right to choose what you want done with your healthcare. This includes your right to say no to any treatment offered to you.

You can make what is called an **advance directive**, such as a **living will** or **Healthcare Power of Attorney (HPOA)**.

An advance directive tells us what you want done in the future in case something happens and you cannot speak for yourself.

If you have an advance directive, bring a copy with you at the time of surgery.

If you do not have an advance directive and want to make one, you can call Social Work at **(773) 702-6243** before your surgery and ask them for help.



Section 1: The Days and Weeks Before Surgery

Insurance and Your Surgery

At the UChicago Medicine we know how difficult it can be planning for the cost of going to the hospital and paying for a doctor visit or for surgery.

This information is provided to help you plan for any cost you may have.

All insurance plans are different. Make sure to contact your insurance company with questions about your coverage. This will help you know what your insurance will pay for and what you may have to pay on your own.

Some insurance plans may want you to have written permission before you have surgery. Learn more about this by calling your insurance company's customer service phone number. This phone number may be on the back of your insurance card.



For Questions Call Patient Financial Services or Visit our Websites

Monday to Friday 8am to 4:30pm

Phone Number: **(773) 702-6664**

You can also Visit our Websites:

www.uchospitals.edu/visitor/patient-financial.html

www.uchospitals.edu/visitor/managedcare.html

www.uchospitals.edu/billing

www.uchospitals.edu



UChicago Medicine is committed to giving quality care to all of our patients.

Thank you for choosing University of Chicago Medicine for your health care needs.

Section 1: The Days and Weeks Before Surgery

Healthy Food and Liquids

Eat healthy food in the weeks and days before your surgery.

Medical research shows that you can get better surgery results if your nutrition is at its best.

Include food with quality protein such as beans, lentils, tofu, chicken, seafood and dairy products.

Protein is important and helps your body to heal after surgery.

Most patients must limit what they eat and drink beginning the day before surgery. Read more about this in Section 4.



Follow the food and drink instructions in your My Surgery Folder. This goes over the directions from your doctor. If you are not sure what foods or liquids you can or cannot have, call the Anesthesia Department at **(773) 834-3531**.

Smoking, Alcohol and Drugs

Do not smoke before your surgery.

Stop smoking at least **2 weeks** before surgery. Smoking increases your risk of heart and breathing problems.

- Patients who smoke have a higher risk of getting an infection.
- Smoking can cause you to have more nausea, that feeling of wanting to vomit.
- Smoking can also cause your wound to take more time to heal.

Ask your doctor if you need help to stop smoking.



Do not drink alcoholic drinks 24 hours before your surgery.

Drugs and alcohol can cause problems with your anesthesia and surgery.

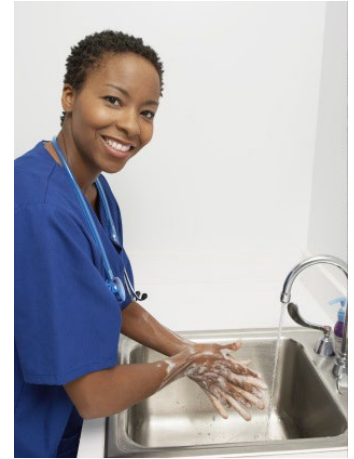
It is very important not to use drugs or drink alcohol within 24 hours of your surgery.

Section 2: Getting Ready – What to Expect

Things Your Doctors, Nurses, and Healthcare Providers are Doing

Surgical site infections after surgery are possible in the part of your body where the surgery took place. Most patients who have surgery do not get an infection.

- You may be given a special cleaning cloth to be used at home the night before and the morning of surgery. The cleaning cloth kills germs in the area where you will have surgery.
- At the time of your surgery we will also have this body area cleaned using a special soap that kills germs.
- Depending on the kind of surgery, we may give you antibiotics before your surgery starts.
- Some of your hair may be removed right before your surgery. Hair is removed if it is in the same area where your surgery will be. This is done using electric clippers.



To Help Prevent Infections Your Surgery Team:

- Follows good hand hygiene practices (things to keep hands clean and kill germs)
- Wears special hair covers, masks, gowns, and gloves during surgery to keep the surgery area clean.

Anesthesia to Keep You Comfortable

Anesthesia is a medicine to make you feel comfortable during surgery. Your doctor will decide what kind of anesthesia you will need.

- One kind of anesthesia will keep you asleep and free from pain during surgery. This can be given from an IV, breathed in from a mask or from a tube placed in your throat.
- Another kind of anesthesia will just numb the body area where the surgery will be done. When the area is numb you do not feel any pain. You will also be given medication to keep you relaxed (sedated).



Tell us if you or anyone in your family has ever had problems with anesthesia.

Section 2: Getting Ready – What to Expect

Your Pain Management

Pain is common after surgery and affects each person in different ways. There are many different kinds of pain treatments. Using more than one kind is the best way to manage pain. Treatments may include medicines called opioids, epidurals or nerve blocks. Non-medication pain management is also important.

Use this pain scale to describe the level of pain you are having. Pick a number based on how it affects your daily activities. Our goal is for your pain to be mild and controlled.

You feel normal. Treatment is not needed.			Pain is annoying but does not keep you from daily activity.		Pain keeps you from normal activity. You need something for your pain.			Pain keeps you from doing any activity.		
0	1	2	3	4	5	6	7	8	9	10
Mild Pain					Moderate Pain			Severe (very bad) Pain		
Controlled					Not Controlled					

Non-Medication Pain Management

Relaxation and meditation can help lessen pain, stress, and anxiety. **Slow, deep breathing** can help relax your body and mind. These activities and distractions block the pain pathways that send signals to your brain.

Make Your Room Comfortable

- Change the lighting or temperature
- Use extra blankets
- Use heat or ice packs
- Take a shower or wash your hair
- Change positions in bed or use pillows for support
- Have friends or family give you a massage

Distract Yourself

- Watch TV or videos
- Listen to relaxing music
- Read or use your phone or computer

Talk With People Who Care

Your care team, friends, family or spiritual leader.



Do Relaxing Activities

- Pray or meditate
- Do word or number puzzles
- Do crafts

Get Moving

- Raise your legs or do stretches
- Get out of bed and walk around
- Sit in a chair
- Do physical therapy exercises as directed

Section 2: Getting Ready – What to Expect

Your Arrival Time and How Long you will be at the Hospital

It is very important to arrive on time. You will not go directly into surgery. It will take some time to get you ready for your surgery and to see the surgical team.

How long you stay at the hospital depends on many things such as the kind of surgery you are having and your overall health. Some patients must stay in the hospital (be admitted) after surgery. Others will go home the same day.

Your Family and Visitors in the Hospital

On the day of surgery your family or visitors can wait in the patient reception area when they are not with you.

Children under 18 must be with an adult who is not the patient.

The patient reception area has large electronic information screens that track your progress from one area to another.

Your family or visitors will also get a pager so our staff can reach them when needed.

When you are ready for surgery, one to two visitors can stay with you in the holding area until you go into surgery.

Your doctor will talk with your family after your surgery. One to two visitors may be able to see you in the Recovery Room when you are awake and ready for visitors.

Visiting hours are 24 hours a day as long as it does not get in the way of patient care and safety.

The hours and number of visitors can change depending on the unit you are in and your needs. Intensive care units limit visitors and only allow 2 at a time.



Section 2: Getting Ready – What to Expect

Waiting for Your Child

If you are the parent or guardian of a child having surgery, you must be here for your child whenever you are needed and when they wake up.



Planning for Your Ride Home

Most patients are discharged to go home on the day of surgery or at 12 noon the day after surgery.

Whenever you go home, **you will not be able to drive or take public transportation alone.** You will need an adult to take you home or travel with you.

If you have sedation or anesthesia:

- An adult must be with you to get instructions for what you will need to do at home.
- You must have a responsible person to stay with you for 24 hours after surgery.

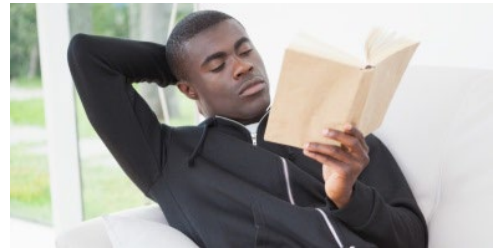
If you do not have anesthesia, we must be able to contact someone by phone to have them pick you up. You must provide their contact information when you check in.



Section 3: What to Bring and What to Leave at Home

Things to Read

You may want to bring a book or some magazines to read when you are waiting or do not have anything to do.



Walker or Crutches

If you are having surgery on your leg and you do not have crutches or you do not know how to walk on crutches, let us know before your surgery.

Bring your walker or crutches to the hospital on the day of surgery. You may need to use them during physical therapy and when you are walking in the room, in the hallways, and to and from the bathroom during your stay.

Write your name on your crutches, walker, or cane so you will not lose them on the day of surgery. If you are not able to write your name on these items ask your healthcare provider for a label with your name on it.

Be sure to **practice using your crutches** several days before your surgery.



Clothing

Wear comfortable clothing on the day of your surgery.

You do not need to wear a hospital gown after surgery.

- Most patients are more comfortable in their own clothing.
- You can bring things such as a button-down shirt or blouse, loose fitting T-shirt, gym shorts, jogging pants or sweat pants, and a robe.
- Walking shoes or gym shoes are comfortable and help prevent slipping.
- If you are having **surgery on your leg**, it is best to wear loose-fitting pants or shorts and supportive shoes.
- If you are having **surgery on your stomach**, wear loose elastic waist or drawstring pants.



Section 3: What to Bring and What to Leave at Home

Personal Care Items

If you are staying in the hospital, you may bring personal items such as slippers and a robe. Bring a few days' supply of your own personal care items such as a toothbrush and toothpaste, comb or hair brush, cosmetics, and a razor.



Dentures

If you wear dentures, you may be given a denture cup to leave them in when you are in surgery. **Write your name on the cup or ask for a label with your name on it** from your healthcare provider.

You can also bring your own cup to place your dentures in and give them to your family or friend.



Contacts or Corrective Lenses

Wear your glasses on the day of surgery. Do not wear contacts. Give your glasses to your family member or friend when you are in surgery.



Valuables

Talk with your healthcare provider about how to keep your valuables safe during your hospital stay. We do not have security for these items when you are at the hospital.

On the day of your surgery, do not bring any valuables unless you have someone who will keep the items for you.

Do not bring cash or credit cards.

Do not bring jewelry or rings. Remove any body piercings.

You cannot wear any jewelry in the operating room including body piercings.

Do not bring electronics such as a cell phone, laptop or tablet.



Section 4: The Day Before Surgery

Limiting Your Food and Liquids

You must have an empty stomach before any surgery that uses anesthesia.

If you have food or fluid in your stomach during your surgery, you can vomit. This can cause serious problems including pneumonia and difficulty breathing.

Find and follow the **Food and Drink Instructions Before Surgery** in your My Surgery Folder. This will tell you when to stop eating your regular food and when to stop drinking all liquids.

Talk with your doctor about what you can and cannot eat and drink if you are Diabetic or on a Special Diet.

If you are not sure what foods or liquids you can or cannot have call the Anesthesia Department at **(773) 834-3531**.



Your Personal and Skin Care Before Surgery

Shaving

Do not shave near the place where you will have surgery for at least 48 hours before the surgery.

Shaving with a razor can irritate your skin and make it easier to get an infection.



Showering and Cleaning Your Skin

The night before surgery you must shower or take a bath using your normal soap.

If your doctor told you to use **disposable wipes or a special soap**, follow the instructions for Getting Your Skin Ready For Surgery found in your Surgery Folder. Clean your skin with the wipes on the **night before and the morning of** your surgery.



Skin

Do not use makeup, heavy lotion or hair products on the day of your surgery. Do not wear nail polish.

Teeth and Mouth

Brush your teeth in the morning on the day of your surgery.



Section 5: Checklist Before Surgery

Sleep

Get a good night's sleep before your surgery.



Checklist Before Surgery



1.	Follow instructions for Food and Liquids Before Surgery (in folder).	
2.	Do not drink alcoholic drinks or smoke 24 hours before your surgery.	
3.	Do not shave near the place where you will have surgery.	
4.	Complete any special skin care instructions. Do not put any lotion, moisturizer or makeup on your body or use hair care products.	
5.	Brush your teeth the morning of your surgery, do not swallow any water.	
6.	Follow all instructions from your doctor and anesthesiologist. This includes if you need to take or when to take your medications. If you do take medication, only use small sips of water.	
7.	Wear comfortable clothing on the day of your surgery.	
8.	Leave all jewelry and valuables at home.	
10.	Bring these items with you: <ul style="list-style-type: none">• Photo ID and all insurance cards.• Patient Medical History for Anesthesia (in folder) including a list of all your medications. Fill out before you arrive.• Instruction sheet for Getting Your Skin Ready for Surgery (in folder).• Copy of any tests done outside of UChicago Medicine that you did not already give to your doctor or anesthesiologist.• Copy of your Healthcare Power of Attorney (HPOA) or Living Will if you have one. (See page 4, Advance Directive).• Any questions you want to ask your doctor. Bring something to write down important information you do not want to forget.• Cases for your glasses, contacts or dentures as needed.	

Call If You Are Sick or Cannot Come for Your Surgery

If you have a cold or the flu, **call your doctor's office right away** to reschedule or cancel your surgery appointment.



Section 6: The Day of Surgery

Arriving at the Hospital

Information in your My Surgery Folder will tell you the **time to arrive** for your surgery and **where to check in**, or a team member may call you the day before to confirm.

Give yourself plenty of time to get to the hospital.

- A map (in the folder) shows the building where you need to go and gives walking directions from the parking garage.
- Valet parking is located at the entrance of each hospital.

Family and visitors can get discount parking passes at the Patient Reception desk where you check in. Rates are listed in the Resources section of this book.

Checking In

When you arrive give your name to the person at the **Patient Reception desk**.

- They will check you in and let our team know you have arrived.
- A patient service coordinator will call you. They will show you to the area called Holding to get ready for your procedure.
- After you are ready, 1 or 2 family members can wait with you.

Your Privacy and Communicating with your Family and Visitors

You will be given a private code when you check in.

- Give this code to people who have your permission to talk to the doctors and nurses about your care.
- The code allows your loved ones to check your status on the information screens as you move from one area to another.

During the surgery, the nurse in the operating room will call the patient reception area to give your family an update.

When your surgery is over, your doctor will ask to meet your family in a private consult room in the patient reception area. We will page your family when the doctor is ready.

Speak Up - Take an Active Role in Your Care

1. Ask everyone involved in your care to say who they are.
2. Everyone involved in your care must know your name and what surgery you are having.
3. Make sure your doctor or care team marks the place on your body to show where you are having surgery.
4. Ask your doctor or nurse to explain:
 - Medications ordered for you
 - What you need to do when you go home



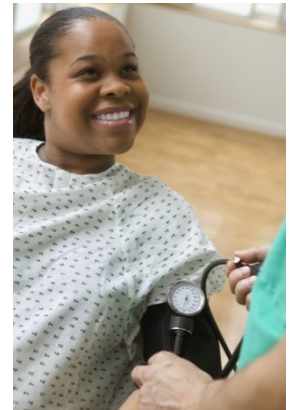
Section 6: The Day of Surgery

Getting Ready for Surgery

In the Holding area, a member of the healthcare team will ask you to put on a hospital gown. For most procedures, no street clothing or underwear are allowed.

The nurse will do some tests including taking your vital signs, and putting in an IV line.

- **Vital Signs:** Your vital signs include your body temperature, blood pressure, pulse (heart rate), and breathing rate. Sticky pads are placed on your skin to keep track of your heart's electrical activity.
- **Pulse Oximeter:** A red light sensor will be put on your finger. This tells us how much oxygen is in your blood. This is one of the things we will watch before, during and after your surgery.
- **Intravenous Line (IV):** A small tube may be put into a vein in your arm. It is used to bring fluids your body needs during surgery and to give you medicine.
- **Pregnancy Testing:** All patients who can become pregnant will be asked to give a urine sample the morning of surgery. This test is a hospital policy.
- You will need to tell the nurse how you plan to get home after surgery and give the driver's contact information to hospital staff in Holding.



Seeing the Medical Team Before Surgery

As part of a large medical center there will be many people who are part of your care. Many will ask your name, the surgery you are having, your allergies and other questions. This is for your safety and to make sure you get the proper care you need.

Your doctor and your anesthesia provider will talk to you before surgery to answer any questions you may have.

Signing Consent Forms Before Surgery

You or a close family member will be asked to sign legal forms giving permission for surgery and anesthesia. Your medical team will explain the information on the consent forms. The surgery consent form includes information about the surgery:

- Name of the surgery and the part of your body where it will be done
- Planned kind of anesthesia (medication to keep you asleep or from having pain)
- Common and rare risks of having the surgery and anesthesia. It also goes over risks of not having the surgery

A copy of the anesthesia consent form is at the back of this booklet (page 25 and 26). Please read it before surgery.

Make sure all your questions are answered before you sign a consent form.

Section 7: Getting Better After Surgery

Operating Room

- You may be given medication right before surgery to help you feel relaxed or sleepy.
- You will be taken to the operating room where surgery is done and moved to a bed or table.
- You may be given anesthesia in the IV line. This will keep you asleep and free from pain during surgery
- You may breathe the anesthesia in from a mask or a tube placed down your throat. The tube may cause you to have a sore throat when you wake up.
- A catheter may be put into your bladder to drain your urine.

Recovery Room

You will go to the Recovery Room after surgery where we can watch you until you are fully awake. **Do not** get out of bed without asking permission.

When you are awake and ready for visitors, the nurse may call for one or two of your visitors to come into the Recovery Room. Visitors can take turns seeing you.

You will go home after recovery or be admitted to your hospital room.

Prevent a Fall

Falls can be serious. Everyone who has surgery is at risk for falls because of weakness, confusion, changes in diet, medications, and being tired.

Falls can lead to longer stays in the hospital or injuries.

What you can do:

- Do not stand up if you feel weak or dizzy
- Sit on the edge of the bed several minutes before standing
- Wear non-skid slippers
- Do not lean on furniture for support.
- Always ask for help.
- Ask if your medications increase your risk of falling



Activity

- You may be asked to walk on the day of surgery.
- Walking on the day of your surgery improves your lung function and helps you keep from losing body strength.
- Walking also lessens your risk for blood clots and pneumonia.
- Follow your doctor's instructions about your activity.



Section 7: Getting Better After Surgery

Tips for a Faster Recovery

A member of our team is always here to talk with you about any questions or concerns.

- Get plenty of sleep. Sleep helps your body heal.
- Take your medication as directed. Be sure to finish all of your antibiotics if ordered.
- Eat healthy foods. Good nutrition including lean protein is important for healing.
- Stay hydrated (get plenty of water). Staying hydrated can help with problems like constipation (problems having a bowel movement).
- Do not smoke after your surgery. Smoking can cause healing to take longer.
- Go to all your follow up appointments. It is important for your doctor to check your progress and healing.



Prevent a Surgical Site Infection

Things you can do after surgery to keep from getting infection:

- Wash your hands really well touching any kind of soiled items or body fluid. This is very important after you have used the bathroom.
- Tell family and friends to wash their hands with soap and water or an alcohol-based hand rub before and after visiting you. Ask them to wash their hands if you do not see them doing so.
- Ask your visitors not to visit if they feel sick.
- Always wash your hands before and after caring for your wound.
- If the bandage on your wound is loose or wet when you are in the hospital, let your healthcare providers know right away so they can look at it.
- Before you go home, your doctor or nurse will explain what you need to know about taking care of your wound. Make sure you or a family member know how to care for your wound before you leave the hospital.
- Before you leave the hospital, make sure you know who to contact if you have questions or problems after you get home.

If you have any questions – ask your nurse or doctor.

Resources at UChicago Medicine

Important University of Chicago Medicine Phone Numbers

Admitting Office: Adults	(773) 702-6233
Admitting Office: Children	(773) 702-6234
Billing: Clinic and Hospital Bill	(773) 702-6664
Billing: University of Chicago Physicians Group Bills	(773) 702-1150
Chaplains and Spiritual Care	(773) 702-6246
General and Patient Information	(773) 702-1000
Intepreter Services	(773) 702-6330
Patient Experience	(773) 834-0500
Security	(773) 702-6262
Social Work	(773) 795-4835
Parking Office	(773) 702-4381

ATM Locations

ATM machines are in the lobby of Bernard A. Mitchell Hospital (second floor), Goldblatt Pavilion, Duchossois Center for Advanced Medicine (DCAM), and Comer Children's Hospital.

Bookstore

The Barnes and Noble University of Chicago Bookstore is at 970 East 58th Street.
Phone: (773) 702-7712

Chaplaincy and Spiritual Care

Clinically trained chaplains offer spiritual, emotional, and religious support for patients and family members.

Chaplains are here 24 hours a day and 7 days a week. They come from many diverse religious and spiritual backgrounds.

Social workers are also here to talk with you.

We have devotional material, sacraments, rosaries, electrical Sabbath candles and prayer rugs. Let us know what you may need.

We can also help with any special needs and finding other resources in the local community. For more information, call **(773) 702-6246**.

There are three chapels for patients and visitors. One is in Bernard Mitchell on the second floor, another is in Comer Children's Hospital and the third is on the 7th floor of the Center for Care and Discovery (CCD).



Resources at UChicago Medicine

Gift Shop

The gift shop has many kinds of gifts and other items, including magazines, newspapers and snacks.

The Gift Shop is in the lobby of Bernard A. Mitchell Hospital on the second floor.

The gift shop is open every day from 8am to 9pm Phone: **(773) 834-1360**

The gift shop accept MasterCard, Visa, and American Express for orders made by phone. Delivery to patient rooms is free only when you buy something that is over \$5 dollars. When you call you must have the patient's first name, last name and room number before an order can be placed.

Patients in Intensive Care (ICU), oncology, and transplant units and patients with higher risk of infection cannot have live flowers or plants in their room.

Information Desks

There is an information desk in the lobby of each building where our staff can provide wheelchairs, directions to clinical areas, and any other help you may need.

Internet Access

Wireless Internet access is free of charge across the University. Internet accessible computers that you may use free of charge are on the 7th floor of the Center for Care and Discovery (CCD).

Language Interpreters

UChicago Medicine provides free American Sign Language interpreters and Foreign language interpreters for patients.

When you arrive, let a member of your healthcare team know you need an interpreter. To make plans for an interpreter before you arrive, call Interpreter Services at **(773) 702-6330**.

Mail or Gifts for Patients should be Addressed to:

Adult Patients:

The University of Chicago Medicine
5700 South Maryland Avenue
Patient First Name and Last Name
Patient Room XXXX, MC 8047
Chicago, IL 60637-1470

Pediatric Patients:

Comer Children's Hospital
5721 South. Maryland Avenue
Patient First Name and Last Name
Patient Room XXXX, MC 8047
Chicago, IL 60637-1470

Resources at UChicago Medicine

Parking Rates at UChicago Medicine Hyde Park Campus

Self- Parking

Regular Rate	Validated Rate	Prepaid Rate
Under 1 hour \$10	Under 1 hour \$6	5 prepaid tickets \$30
1 hour to 3 hours \$16	1 hour to 3 hours \$8	
3 hours to 6 hours \$20	3 hours to 6 hours \$12	
6 hours to 24 hours \$26	6 hours to 24 hours \$18	
All parking rates are subject to change.	To get the Patient and Visitor Discount, you must get your parking ticket validated at the clinic, admission office or any information or security desk.	Each ticket is good for one 24-hour period. Buy Prepaid Tickets in any of our Parking Offices.

Valet Parking

Regular Valet Rate	Validated Valet Rate	Prepaid Valet Rate
Under 6 hours \$20	Under 6 hours \$15	5 prepaid tickets \$60
6 hours to 24 hours \$30	6 hours to 24 hours \$25	
All parking rates are subject to change.	To get the Patient and Visitor Discount, you must get your parking ticket validated at the clinic, admission office or any information or security desk.	Each ticket is good for one 24-hour period. Buy Prepaid Tickets in any of our Parking Offices.

Pay Station Locations

Pay stations accept cash, credit or debit cards. Parking exits do not accept cash.

Self-Parking Pay Stations

- Parking A Level 1 East elevator lobby
- Parking A Level 1 North elevator lobby
- Parking A Level 2 North elevator lobby near bridge to DCAM
- Parking A Level 2 bridge to Mitchell Hospital
- Parking B Level 1 elevator lobby
- Parking B Level 2 bridge to CCD

Valet Parking Pay Stations

Level 1 Lobby of:

- DCAM
- CCD East
- CCD West
- Mitchell Hospital
- Comer Children's Hospital

No Cashiers at Exit. Pay for Parking Before Going to Your Car.

For parking questions call **Parking Services at (773) 702-4381**.

Parking Offices are open Monday to Friday from 9am to 5pm.

A customer service attendant is here 24 hours a day and 7 days a week.

UChicago Medicine is not responsible for items left in vehicles.

Resources at UChicago Medicine

Parking Services

UChicago Medicine provides the following services to patients and visitors within our parking garages between the hours of 7am and 8:30pm

A customer service parking attendant is here 24 hours a day and 7 days a week.

You can reach the attendant from any parking pay station. **For parking questions call Parking Services at (773) 702-4381.** Parking Offices are open Monday to Friday from 9am to 5pm.

Air for Tires When in the garage, parking staff can help inflate tires if needed. Stop by the Parking Services Office or call **(773) 702-4381** for more help.

Emergency Jump Start If your car does not start because of a problem with the battery the Parking Staff has a portable battery to help start your car.

- Between 7am and 8pm, call the Parking Office **(773) 702-4381**
- During overnight hours between 8pm and 7am, call Security at **(773) 702-6262.**

Finding Your Car Each parking level has pull tabs near the elevator to take with you to help you remember where you parked your car. If you need more help go to the Parking Office.

Lock-Out Services If you get locked out of your car the parking staff can call road side assistance or a locksmith. You are responsible for any charges from these services.

Parking Safety For your safety we have alarms on every floor and TV cameras in all areas of the parking garages. We can walk visitors to their car if needed.

Call Security if it is safer having someone walk with you to your car. **(773) 702-6262.**

Paying Your Hospital Bill

You may pay both your University of Chicago Medicine and Physicians Group bills:

- By credit card online at <http://www.uchospitals.edu/paybill>
- In person at the Outpatient Registration Office on the first floor of the Duchossois Center for Advanced Medicine (DCAM), Monday to Friday. 8am to 4:30pm.
- By mail.

For University of Chicago Medicine bill questions call **(773) 702-6664.**

For University of Chicago Physicians Group bill questions call **(773) 702-1150.**

Resources at UChicago Medicine

Pharmacy

The pharmacy is in the Duchossois Center for Advanced Medicine (DCAM) on the first floor. The pharmacy is open 8am to 5:30pm Monday to Friday. **(773) 834-7002**.

There is a 24 hour Walgreens pharmacy at 1554 East 55th Street (On the corner of 55th Street and Lake park Ave.) The phone number is (773) 667-1177.

Social Work Services

Being in the hospital or having a family member in the hospital can be difficult for the whole family. Social workers at the University of Chicago Medicine provide the best possible care for every patient. Some clinics offer Outpatient Social Work services on a case by case basis. Not all clinics have social workers.

Our social workers can help you and your family by offering:

- Counseling and support
- Help to understand a medical condition and how it impacts you and your family
- Access to needed resources
- Help in planning for ongoing care needs after you leave the hospital
- Help with Advance Directives
- Crisis intervention and assessment of personal safety needs

For more information, call the Department of Social Work at **(773) 795-4835**.

Telephones

Calls within Chicago and nearby suburbs are free. For details on making an outside phone call, see the information on the patient's bedside telephone.

Volunteer Services

The Volunteer Department provides many services including delivering patient mail and daily newspapers upon request. They also help visitors in the Surgery Waiting Lounge and make room visits to inpatients. Call **(773) 702-4421** for information.

Child Life volunteers are here to spend time with pediatric patients for bedside play. Call **(773) 702-6481**.

Consent to Anesthesia and Other Pain Management

Patient Sticker

I (patient name) _____ have been told about the benefits and risks of my anesthesia care plan. This is to keep me asleep or from feeling pain during my surgery or procedure.

I agree to have anesthesia or other pain management for my surgery or procedure.

This will be given by my anesthesia care team. The anesthesia care team includes a doctor (anesthesiologist) trained in giving anesthesia. They may work with other anesthesia providers. These include residents or fellows in training and certified registered nurse anesthetists (CRNAs).

The following have been explained to me:

- The kind and purpose of sedatives, pain medications, or anesthetics
- The methods or way the sedation or anesthesia will be given
- Risks and possible problems from the anesthesia

I have been able to talk with the care team about my anesthesia plan. I have been able to ask questions and all my questions have been answered.

I know anesthesia and other pain management are very safe. I know there are still risks related to my overall health. **Common risks include** nausea (feeling like throwing up), feeling very tired, or a sore throat. **Risks that are not as common include:**

- | | |
|-------------------------------------|--|
| • Lower rate of breathing | • Medication leaking out of the vein at the IV site |
| • Low oxygen level | • Pain, discomfort, itching, or redness in the vein where medication is given |
| • Breathing problems | • Allergic or other harmful reactions to medications used |
| • Low blood pressure | • Being aware of what is happening during the procedure (but not feeling pain) |
| • Changes in heart rate and rhythm | |
| • Throwing up | |
| • Stomach acid going into the lungs | |

Other risks include: _____

Depending on how the anesthesia is given, there may be other risks.

- For **general anesthesia**: There may be injury to teeth, lips, tongue, or other parts of the mouth and windpipe. This is a risk of putting in or taking out airway devices, or using other medical tools to see the mouth or airway.
- If an **arterial or central venous catheter** is used, risks include:

○ Injury to blood vessels	○ Bleeding
○ Infection	○ Damage to surrounding areas
- For **neuraxial regional (spinal or epidural)** anesthesia, risks include:

○ Headache	○ Bleeding	○ Bowel or bladder problems
○ Back pain	○ Infection	○ Damage to other body parts around the procedure area
○ Low blood pressure	○ Spinal cord injury	
○ Low heart rate		

Consent to Anesthesia and Other Pain Management

Patient Sticker

- For **non-neuraxial regional anesthesia (nerve block)**, risks include:
 - Bleeding
 - Nerve injury from injected medications
 - Infection
 - Not able to give pain anesthesia or pain control
 - Damage to other body parts around the procedure area.

My plan for non-neuraxial regional anesthesia (nerve block) is:

- ☐ Left ☐ Right ☐ Bilateral (both sides) ☐ Midline (in the middle)
☐ Other (area and kind of injection): _____

- I know the University of Chicago Medical Center (UCMC) is a teaching hospital. Other providers may take part in my anesthesia care. These include Certified Registered Nurse Anesthetists (CRNAs), and trainees. They also include fellows, residents, and medical students. All other providers are supervised or directed by the anesthesiologist over my care.
- I know that medical staff who are not doctors may provide important parts of my care or the giving of anesthesia. I know they are professional medical staff and have been given permission to provide this care by UCMC.
- I told my care team about any loose teeth and dental devices I may have. If asked to, I have removed all dentures and removable dental devices before the procedure.
- I told my team about any jewelry or body piercings. If I do not remove these, I know I may have more risk of injury.
- I know other rare but serious risks include organ damage, blindness, stroke, heart attack and death. I know this document does not include a list of all known risks and problems from the procedure.
- If there is any change in my condition during my care and I must have other procedures that were not planned, I give the team members permission to do whatever they believe is medically needed to provide the right care.
- I have read and fully understand the contents of this consent form before signing.

Signatures

Printed Name of Patient or Representative: _____

Signature: _____ Date: _____ Time: _____

Printed Name of Anesthesia Provider getting Consent: _____

Signature: _____ Date: _____ Time: _____

☐ **Consent Given by Phone** (Patient or Representative not able to give consent in person)

Name of Person Giving Consent for Patient: _____

Witness Printed Name _____

Witness Signature: _____ Date: _____ Time: _____

☐ If Interpreter used, Printed Name of Interpreter _____

Interpreter Signature _____ Date: _____ Time: _____

ID Number _____ Language _____

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



Health Literacy and Plain Language Translation by
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