Welcome To Winthrop Hospital

Neuroscience Department
Pre Operative
Spinal Education Program
Mission Statement

It is the mission of Winthrop-University Hospital to provide high quality, safe, culturally competent, and comprehensive health care services in a teaching and research environment which improve the health and well-being of the residents of Nassau County and contiguous county areas... based on a profound commitment to an enduring guiding principle –

“Your Health Means Everything”
To Our Patients,

We would like to welcome you to the Winthrop-University Hospital Neuroscience Department Spinal Program. It is our goal to provide you with total patient care and a return to optimal health.

This program has been designed to provide a guide to your hospitalization. Please use it as a reference and share it with your family and support network.

If you have any questions or unanswered concerns, please, feel free to contact me.

Sincerely,

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How does my spine work?

- The spine is a flexible, very strong and stable complex mechanical structure. It’s primary functions include:
  - Protection of the spinal cord and nerve roots
  - Provide flexibility of motion
  - Provide structural support

- There are 33 vertebrae divided into 7 cervical, 12 thoracic, 5 lumbar and 9 fused vertebrae forming the sacrum and coccyx. In between each vertebrae is an intervertebral discs.
How do I prepare for surgery?

- **Pre Admission Testing (PAT)** - will contact you for an appointment. Bring your same day surgery packet, insurance information, list of medications that you take, and any advance directives. Plan to be there for several tests. When this appointment is made, make an appointment with your medical doctor for surgical clearance.

- **Blood Donation** - discuss blood donation with your M.D. when you discuss scheduling surgery. If blood donation is recommended, contact New York Blood Services 1-800-439-6876.

- **Pharmacy** - Antibiotics (for infection) and Analgesics (for pain) are commonly prescribed. Please advise your doctor of any allergies that you have. For effective and appropriate pain control, it is important that you relay your level of discomfort accurately.

- **Brace Information** - depending on your surgery your M.D. may order a brace for you. The purpose of the brace is to provide stability for your spine, while preventing or limiting some movement in the post operative period.

- **Smoking** - there are multiple health risks with smoking. If you are planning surgery, you need to stop. Research studies have shown that nicotine stops the growth of bone cells, which are needed for post operative recovery.
Which hospital staff will work with me?

Assisting your surgeon, who has diagnosed and scheduled your surgical treatment, are many members of the hospital staff.

- **Assisting Surgeon** another specialty surgeon **MAY** assist your M.D. during the surgical procedure.
- **Physician Assistants (P.A.)** work with your M.D. perform examinations, order tests, write in your medical record, monitor your recovery, change dressings and remove drains.
- **Nurse Manager** and **Assistant Nurse Manager** coordinate care for the Neuroscience Units.
- **Nursing Staff** is committed to providing quality patient care and are an integral part of your hospital care. They are assisted by the
- **Nursing Assistant** in providing you help with daily needs (bathing, going to the bathroom, getting out of bed).
- **Social Workers** are available to help you cope with your hospitalization by providing emotional support, information on entitlements and assistance programs.
- **Physical and Occupational Therapists** will work with your medical team, headed by the surgeon, to establish a personalized therapy plan for you to regain your muscle strength and tone with daily therapy and instruction on proper movement.
- **Dieticians** will monitor your diet, making recommendations and adjustments to your meal plan.
What do I do the day before surgery?

1. Between the hours of 12:00 noon and 3:00 pm, you need to call the Same Day Admit Unit (516-663-2293) and confirm your arrival time. (Call Friday for a Monday admission).

2. Pack a hospital bag. Include: toiletries, glasses, hearing aids and denture cases. Clothing is not needed. The hospital will provide hospital gowns (for back and front coverage) and non slip socks. Bring no valuables! A small amount of cash only for the hospitality cart.

3. You may pack a second bag for a possible rehab stay after your hospitalization. Here you will need lose fitting comfortable clothing, undergarments, pajamas, shoes, socks and toiletries.

4. Check over your home. Have you prepared for your arrival home? Clear objects off the stairs, floor and pathways, remove loose throw rugs, place grab bars in the bathtub and toilet areas, slip resistant strips in tub, shower chair and shelf or basket for toiletries to eliminate need for bending.

5. Try not to overdo it. Relax and get a good night sleep. No eating or drinking after midnight.
Where do I go the day of surgery?

1. Enter the Emergency Parking Area, on Second St. Tell the security guard you are here for Same Day Surgery and he will direct you to parking.

2. Go to the Same Day Surgery Unit by taking the Potter elevators to the 4th floor. Entering the waiting area, give your name to the volunteer and have a seat. Relax.

3. Bring all papers provided to you by your doctors with you.

4. Leave your bag in the car, give any belongings to your companion.

5. The nurse will bring you to the next area, complete the nursing assessment and the admission documentation. You will change into a hospital gown, an IV will be started, antibiotics will be started and you will be taken to the holding area, where your companion will rejoin you.

6. You will meet your anesthesiologist, OR nurses and see your surgeon prior to being taken into the O.R.

7. Your family will be returning to the lobby or going home. Their contact information will be on the front of the chart. The Surgical Information desk is located in the lobby and assists with contacting the doctor.
What about Anesthesia and Pain Management?

- You will meet the Anesthesiologist prior to your surgery. He will review with you your medical history including your previous surgeries, allergies and medications.
- The anesthesiologist will explain to you the type of anesthesia you will be receiving. If you receive general anesthesia, you will be given IV medication to put you in a controlled unconscious state, maintained with inhaled medications. During this time your vital signs are closely monitored and at the end of surgery you will be brought back to consciousness.
- Nassau Anesthesia Associates, P.C. render anesthesia services at Winthrop-University Hospital. While they are affiliated with Winthrop they are a separate entity. They do separate billing for patients. For questions call 516-741-0570.
- Winthrop Pain Management Center uses a multidisciplinary approach to patient pain management. After surgery your doctor may order a pain management consult where an anesthesiologist will create a personalized plan of pain care.
You are finally here!

When you arrive in the O.R. A team member will again review your chart and check your consents. They again will ask questions about allergies, medications, contact lens, dentures and prosthetic devices. You will be asked when you ate last. If you have any questions **DO NOT** hesitate to ask. After anesthesia is administered a foley catheter will placed in your bladder. You will be positioned and your skin washed down with an antiseptic agent.

Some doctors will utilize neurological monitoring during the surgery to monitor nerve functioning.
When the surgery is completed, you will be transferred to the **PACU (Post Anesthesia Care Unit)**. You may have a drain coming out of the surgical site. Your vital signs will be taken every 15 minutes until you are fully recovered from anesthesia. When you have recovered from anesthesia, you will be moved to a neuroscience patient care unit on either **Hoag 2 or 4 Main**.

You will have **compression cuffs** on your calves to promote circulation of the blood. You will be provided with an **incentive spirometer** to encourage you to breathe deeply and prevent pneumonia. **PA’s and nurse’s** will be checking your dressing, pain level, drainage, vital signs and providing medications. They will be constantly assessing your condition and level of comfort. Family members can contact the Winthrop operator at **516-663-0333** and request to be transferred to the unit where you are located.
Physical and Occupational therapies are essential components to the healing and rehabilitative processes. Your surgeon will determine which therapy consults are needed. The day after surgery, your doctor will write an order for a physical therapist to come to your bedside to do a functional assessment. From this he will establish a plan of care specifically for you to include:

- Proper body mechanics
- Transfer and gait training
- Proper use of assistive devices and braces
- Stair climbing
- Therapeutic exercises
- Discussion of safety for post hospitalization

Your active participation in physical therapy is IMPERATIVE for an optimal surgical recovery.
What about my nutrition?

Good Nutrition is important. It is a major contributing factor to good health. Rebuilding your body after surgery requires optimal nutrition. Therefore, Winthrop-University Hospital’s Department of Food and Nutrition will be available to assist you in education and dietary needs.
When am I ready to leave and where do I go?

Discharge Planning begins before your surgery and will be addressed by your surgeon.

Once in the hospital you will be followed by a Discharge Planner/Case Manager. It is her job to work with the medical team to create a safe and appropriate discharge plan. This plan is affected by many variables including the patients home situation, medical needs, physical therapy needs and insurance benefits. Discharge Planning options include:

- **Inpatient Rehabilitation**- There are 2 types - Acute and subacute, depending again on multiple factors.
  
  Placement Workers- carry out the placement of a patient into a rehab setting.

- **Home with Home Care**- to be covered by an insurance company, you must have a Skilled Nursing Need (i.e. complicated wound care, foley catheter, physical therapy).
  
  If you require assistance for housekeeping, shopping, or child care, the discharge planner will be able to provide lists for private hire services.
What did the staff member just tell me?

**Glossary**

- **Analgesic** – drug that alleviates pain
- **Biopsy** – removal of small amount of tissue to make a diagnosis
- **CAT Scan** – diagnostic image of bone and soft tissue read by a computer to make a 3D image.
- **Cerebrospinal Fluid (CSF)** – fluid that bathes and protects the brain and spinal cord.
- **Disc** – intervertebral disc, cushion of cartilage between the vertebrae. Slipped, bulging, ruptured and herniated are interchangeable, to describe movement of the disc.
- **Edema** – excessive accumulation of fluid
- **Extension** - bending backwards
- **Flexion** – bending forward or sitting
- **Fusion** – permanently joining the vertebrae together
- **Hematoma** - blood clot
- **MRI** – diagnostic test that produces a 3D image of internal body structures using magnets and computers
What did he say?

Glossary

- **Nerve Compression** – pressure on the nerve which can cause damage and weakness
- **Nerve Root** – start of the nerve from the spinal cord
- **Osteomyelitis** – bone inflammation due to infection
- **Radiotherapy** – treatment of a lesion with radiation
- **Spinal Canal** – bony channel that contains the spinal cord
- **Spinal Cord** – bundle of nerve fibers in the spinal canal that carries messages from the brain to the rest of the body.
- **Spinal Stenosis** – narrowing of the spinal canal
- **Ultrasound** – use of high frequency sound to create images of the internal body structures.
- **Vertebra** – a bone in the spinal column
Who do I contact with a question?

Important Phone Numbers:

Case Management 516-663-2075
Main Switchboard 516-663-0333
Patient Information 516-663-2244
Patient Relations 516-663-2058
Pharmacy 516-663-2101
Pre Admission Testing 516-663-8850
Security 516-663-2520
Social Work 516-663-2341
Web Site www.winthrop.org
Our Surgical waiting area is located in the Main Lobby. There is a surgical information desk with volunteers that are available to assist you with information about your loved one.

The Lobby Café is open 7 days a week for your convenience.

Visiting Hours for the Neuroscience ICU and Stepdown Units are:

- 12pm-2pm, 4-5 pm, 8:30-10:30 pm
- Hoag 2:
  - 1pm- 8 pm

Our Serenity Chapel is located off the Main Lobby for a quiet spot.