

John Reeves, M.D.

Your Hospital Stay: Thorascopic Sympathectomy

Your surgery is scheduled to start approximately 2 hours after your arrival. This gives the hospital staff time to prepare you for surgery. If you are late your surgery may have to be delayed or cancelled.

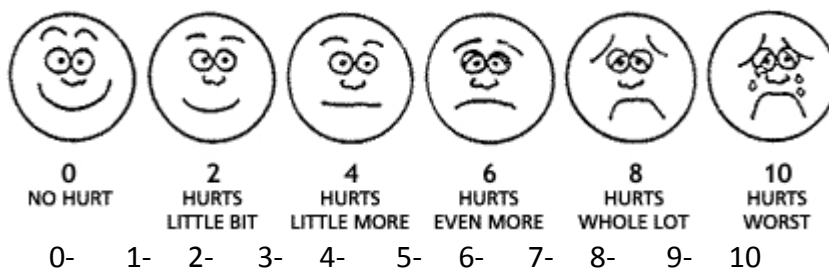
Do not eat or drink anything after midnight.

If you are scheduled in the afternoon you may have one glass (4-6 oz) of clear liquid before 6 am. **If you normally take morning medication for your heart, high blood pressure, or seizures take your medication with a sip of water the morning of surgery.** If you are a diabetic please take the medication as your ordering doctor recommended.

- The morning of surgery you will check in as instructed during your pre-admission appointment.
- You will be taken to a room where you will be readied for surgery. Your procedure will be verified, an IV started, you will put on a hospital gown and TED hose, if ordered.
- You will have sequential (squeezey) hose on your legs, they are normally put on right before surgery and removed in recovery room or as soon as you are able to be up.
- If you need any additional blood drawn it usually is done when your IV is started.
- You will stay in your hospital room, until the surgery is scheduled to start. At that time you will be moved to a surgical holding area before being taken to the surgical suite.
- Your family will go to the surgical guest seating area where volunteers will keep them updated on your progress.
- You will be in surgery 1 ½ to 3 hours or more. After surgery you will go to recovery for **at least 1 hour** then will be transferred to a room.
- The doctor will talk to your family after surgery. Your family may join you when you go to your room.
- Please keep in mind that everyone tries stay on schedule, however, surgery times do vary and sometimes surgeries are delayed due to unforeseen events.

Following surgery:

- You will have a dressing on the front of your neck. If you had a bone graft you may also have a dressing on your front hip area.
- You may awaken with a brace or collar around your neck. You will wear the brace home.
- You may also have a drainage tube coming out of your neck. This drainage tube is removed before you go home.
- Your throat may be sore. You also may have a feeling of difficulty swallowing and/or hoarseness for a few weeks.
- You may also have a Foley catheter in your bladder. If you do it will be removed as soon as you are able to get up and about.
- You can expect to walk the day of surgery or first thing the next morning. Nurses and/or physical therapy assist you the first few times you get up, since you may be dizzy or unsteady.
- It is normal to have some pain, numbness and/or tingling sensations in the incision area, and in your arms and/or legs, please let the nurses and Dr. Reeves know about any discomfort you may be having. If you need pain medication or become nauseated please let the nurses know so you can receive your medication promptly, before it is severe.
- You should be familiar with the pain scale (VAS), the nurses will assess your pain frequently, this helps determine if your pain medication is effective.



0= no pain, 5=borderline tolerable and not tolerable, 10- the worse pain you can imagine, *your goal is 5 or less.*

Discharge from the Hospital: Your length of stay in the hospital will be determined by your progress and by your home situation. Normally you can expect to go home within 1-3 days of surgery. If you are having trouble getting up and down by yourself after 2 days you may be asked to consider going to a rehab hospital for a few days before going home.