#### PATIENT EDUCATION

## **PREP Planner**

### Your guide to a safer surgery

The **Pre-operative Readiness Education Program (PREP),** is designed to help you prepare for your surgery.

Use this Planner to keep important information about your surgery. Bring it with you on the day of your surgery. You will be asked to share some of this information many times. You can use this Planner as a handy place to keep that information ready. If you are missing information or have questions, ask your surgeon or PREP nurse.



Most patients will have a phone call with a PREP nurse about 3 weeks before surgery. Have this Planner with you to take notes during this phone call. If your surgery is less than 3 weeks away and you haven't had a PREP phone call, or if you missed their call, call them at **800-838-8217**. They are available M-F from 8:30 a.m.-6 p.m.

Get ready for y	our PREP	phone cal	ŀ
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- ☐ You will be asked whether you have any health conditions (heart, lung, kidney, etc.) and the name of the doctors who care for them
- ☐ You will be asked to list any allergies you have, and the reaction
- ☐ You will need to share all of the medicines you take, and the dose

Information about your Surgery:	
Date of surgery:	
Arrive at the hospital by:	
Where to park:	

If your surgery time or date is changed for any reason, please remember to change that here.

Where to check in:

# Ask for Help from Caregivers and Loved Ones:

Have someone prepared to:	Names & Phone Numbers:
☐ Drive you to the hospital and drive you home	
☐ Stay at the hospital during your surgery and share information with loved ones	
☐ Stay with you for 24 hours after you leave the hospital	
☐ Care for children, pets, or others	
☐ Help around the house	

Information about your health:
<b>Do you have sleep apnea?</b> □ No □ Yes
If yes, tell your PREP Nurse and surgeon. Bring your CPAP machine on the day of surgery.
Do you smoke or use tobacco? ☐ No ☐ Yes
If yes, call the Maine Tobacco Helpline for help quitting before surgery 1-800-207-1230.
Do you have concerns about pain or taking pain medicine after surgery? ☐ No ☐ Yes
If yes, ask your surgeon about alternate pain control.

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### What medicines do you take?

Name of the medicine & dose:	Directions from PREP on how to take it before surgery:

List any health conditions (heart, lung, kidney, etc.) and the name of the doctors who care for them.	
List the names and datests you have had	tes of any surgeries or
List any allergies you h plants, etc.) and the rea	
Allergy	Reaction

### **Get ready for your Surgery:**

### The Day Before Your Surgery

Hibiclens®, follow the directions. If not, use antibacterial soap.
Stop eating at this time:
Begin drinking only clear liquids at this time:
Other instructions:

Th	e Day of Your Surgery
	Do not have anything to eat. If you do, we may have to reschedule your surgery.
	Stop drinking clear liquids at this time:
	Take your medicines, as directed by PREP, with small sips of water.
	Take a shower again, using the Hibiclens® or antibacterial soap.
	Wear clean, comfortable clothes; such as sweat pants.
	Don't wear make-up, jewelry, or contact lenses.
	Bring your hearing aids and eye glasses.
	Other instructions:

Notes
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