



**PLEASE MUTE Your
MICROPHONES
and
Turn Off Your Cell
Phone Ringer**

**Do Not Answer Phone
Calls During Class.
Thank you!**

GBMC

Pre-Op Class Presentation: Neurosurgery at GBMC

Presented by: John Silver, RN4 & Emily Iseman, RN4
Created by April Asuncion Higgins, BSN, RN, CMSRN

Updated 1/24/2025

What is a **QR code**?

QR stands for quick response code.



- You will see these bar codes in your educational material, it is used to provide easy access to online information through a digital camera on a smartphone or tablet.
- **Open the built-in camera app. Point the camera at the QR code. Tap the banner that appears on your smartphone or tablet.**
- Use this to connect to GBMC web pages: Videos, Class Presentation pdf, Pre-op CHG Wash, Anesthesia Home Medication Guide, and other important information.

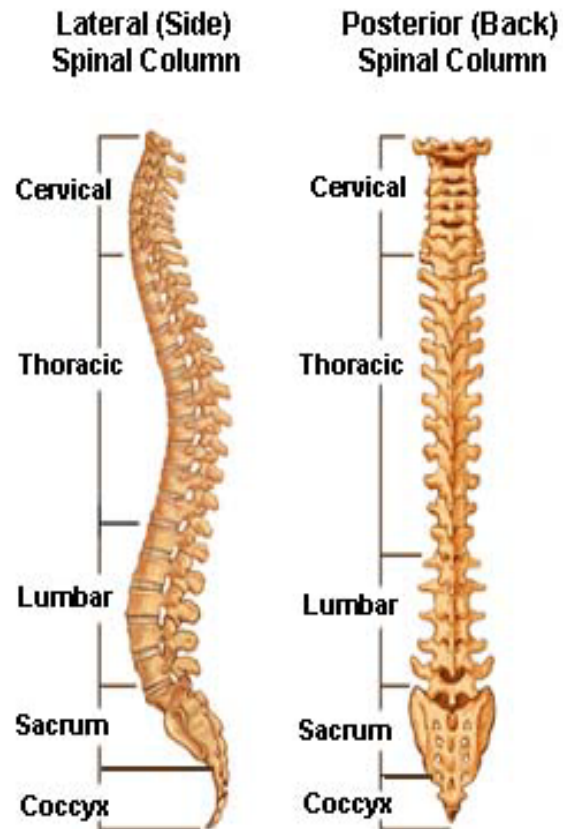
“To every patient, every time, we will provide the care that we would want for our own loved ones.”

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The Spine Anatomy

Divided into 3 sections

- Cervical spine-7 vertebrae
- Thoracic spine-12 vertebrae
- Lumbar spine-5 vertebrae

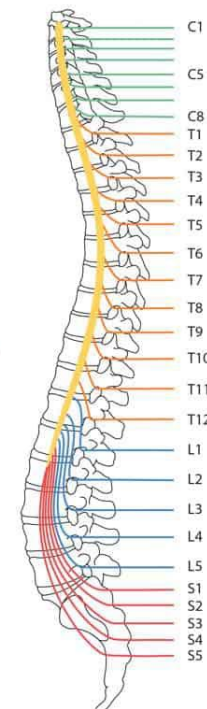
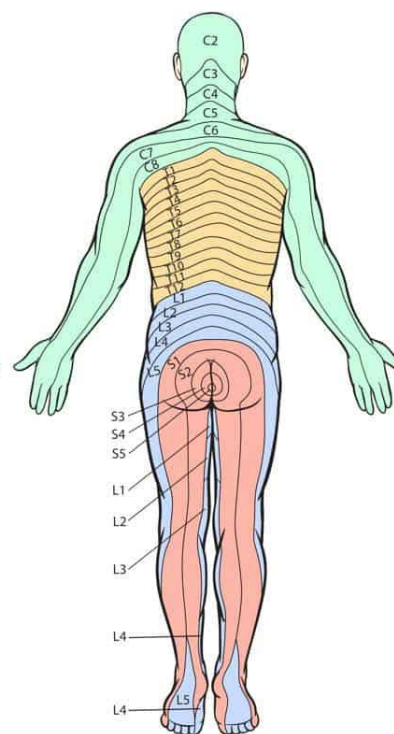
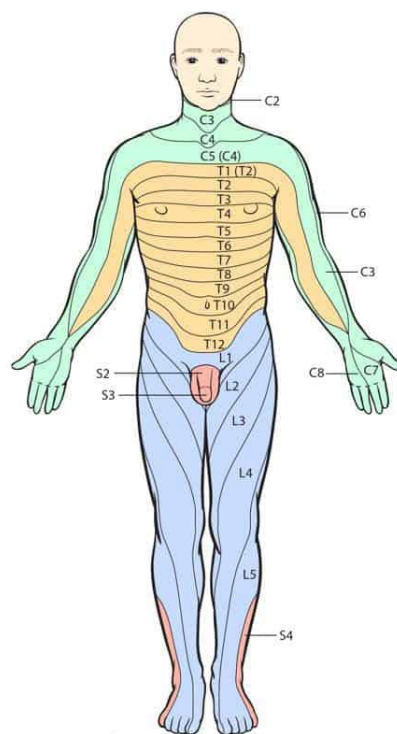
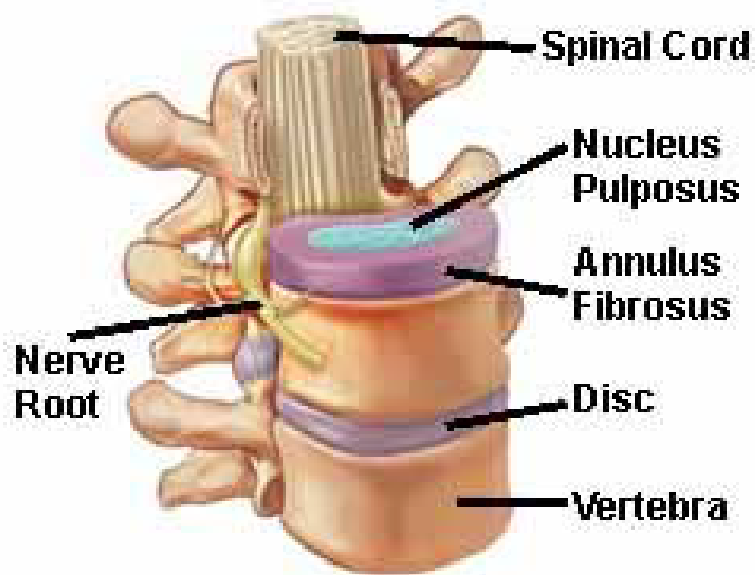


Anatomy of the Spine Video

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Spine Anatomy



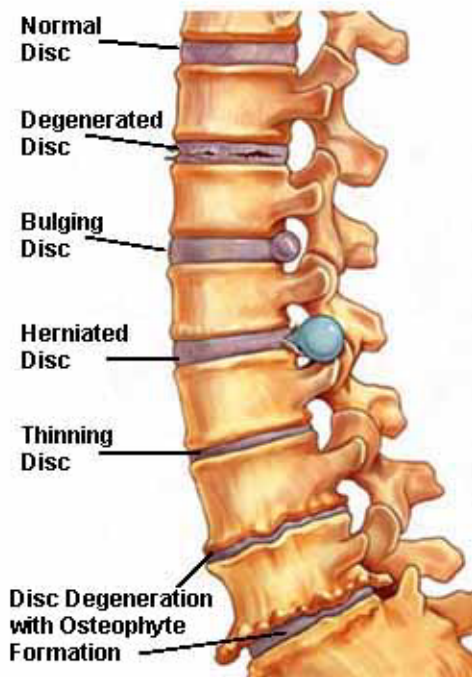
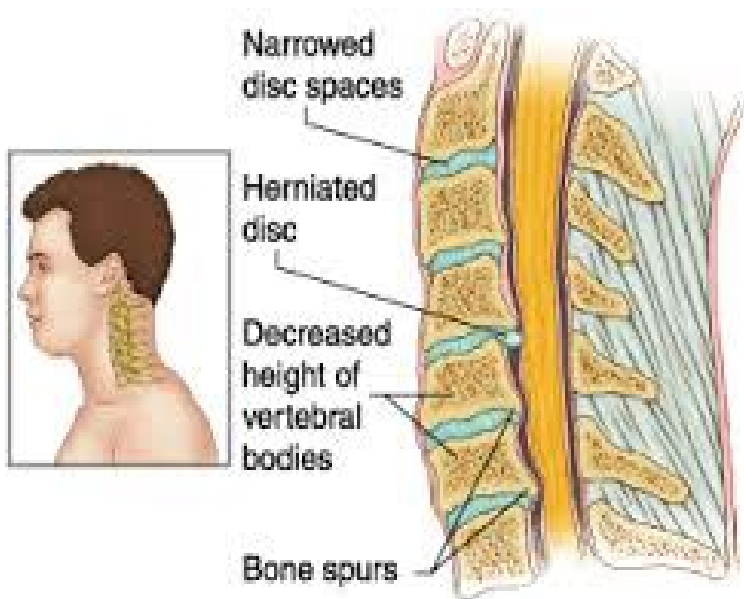
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Causes of Spinal Pain: Disc Problems, Bone Spurs, Vertebral Slipping

Examples of Disc Problems



Herniated Disk Video



Spinal Stenosis Video

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Video Resources from AAOS: OrthoInfo

Spinal Instrumentation Video:



Herniated Disk Video



Spinal Stenosis Video



Spinal Fusion Video:

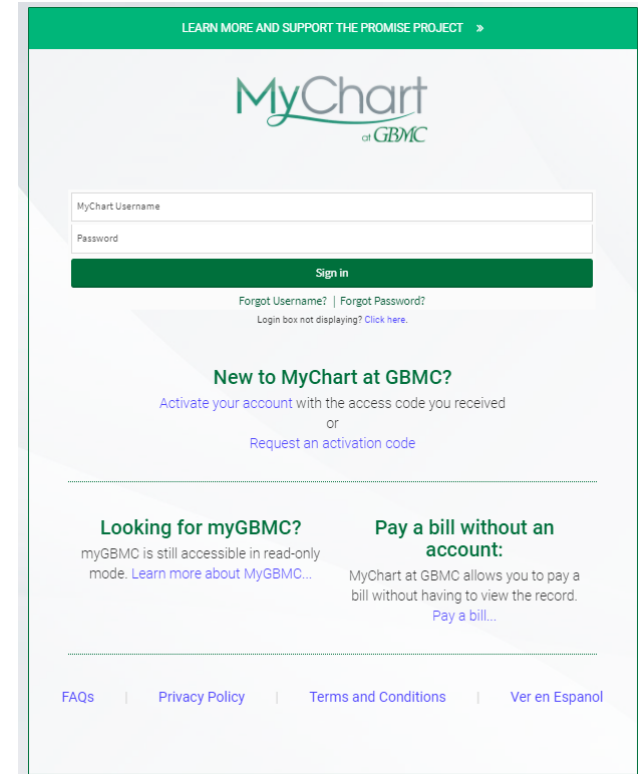


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Sign-up for GBMC MyChart

- **MyChart** will send reminders for your pre-op appointments and appointments while you are in the hospital.
- **MyChart** gives you access to your test results, allows you to communicate with your providers, pay your bill, and helps you to coordinate your healthcare needs.
- On the day of admission: **MyChart** will convert to **MyChart Bedside**, it is your portal for engaging with your care while admitted to the hospital. Empower yourself and your family with access to your care team, clinical data, and health education.



LEARN MORE AND SUPPORT THE PROMISE PROJECT >

MyChart
of GBMC

MyChart Username
Password

Sign in

Forgot Username? | Forgot Password?
Login box not displaying? [Click here.](#)

New to MyChart at GBMC?
[Activate your account](#) with the access code you received
or
[Request an activation code](#)

Looking for myGBMC?
myGBMC is still accessible in read-only mode. [Learn more about MyGBMC...](#)

Pay a bill without an account:
MyChart at GBMC allows you to pay a bill without having to view the record.
[Pay a bill...](#)

[FAQs](#) | [Privacy Policy](#) | [Terms and Conditions](#) | [Ver en Español](#)

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Time Sensitive Tasks to Complete Before Your Surgery

➤ Nasal swab for MRSA/MSSA

➤ **Golden window** for completion is within 10-30 days prior to surgery.

➤ **Kaiser Permanente** patients are to have their pre-op MRSA collected at the Kaiser PEEC Center.

➤ Non-Kaiser Permanente patients (GBMC Ortho, GBMC Neurosurgery, Ortho Maryland)

➤ Testing at GBMC Diagnostic Testing Center

➤ **Monday-Friday 8am-4pm, no holidays**

➤ Result valid for 60-days

➤ Preop CHG Wash Kit with directions

➤ Begin 3 nights before surgery

➤ Pre-op Questionnaires

➤ Pre-op Physical (with bloodwork)

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**NON-Kaiser Permanente
patients only****Diagnostic Center and Laboratory Medicine at GBMC**

GBMC Main Hospital 6701 N. Charles St./ Suite 3100/ Towson, MD 21204
MSSA/MRSA preop testing: Monday-Friday 8am-4pm ONLY, no holidays

GBMC Diagnostic Center

Suite #3100 (across from Einstein Bakery)

➤ Parking at **Iris Parking (closest)**

- For those entering from Iris Park at Pavilion East entrance, proceed down the hallway and turn right once you reach Einstein Bagels. The center will be the next office on your left.

➤ Parking at **Lily Park (near ER/ED)**

- Upon entering GBMC Lobby E walk straight down the hall until you reach the main concierge desk, turn left down the first hallway. The center is located before Einstein Bagels.





S SHUTTLE STOP **V** VALET PARKING N

V VALET SERVICES
Valet services (cash ONLY) will be available
Monday through Friday
at the following times/locations:
7 a.m. - 6:30 p.m.

- Louis and Phyllis Friedman Building entrance
- Labor & Delivery (OB entrance) the Yaggy Atrium

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- Physicians Pavilion West

S SHUTTLE SERVICES
Beginning 11/9/2023 GBMC will provide shuttle services on a continuous loop Monday - Friday 7 a.m. - 5 p.m.
The shuttle accommodates 4 passengers at a time and will pick up from 3 locations:

- Friedman Building entrance
- PPW, Physicians Pavilion West
- Bus loop, Physicians Pavilion East

S SHUTTLE STOP **V** VALET PARKING N



Getting Fitted For A Back Brace

- Patient of Dr. Rami or Dr. Dolitsky
 - If you received a prescription for a lumbar back brace or a posterior cervical collar for a multi-level fusion surgery
 - *Must get fitted for your brace prior to surgery*
 - The medical supply company will reach out to you to arrange a fitting date and time (*Bring brace with you when you come in for surgery*)
 - If you are an OrthoMD patient, Dr. Dolitsky, you will be fitted by your surgeon's office. (*Bring brace with you when you come in for surgery*)

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Preoperative Testing & Plan of Care for Discharge

- All pre-op testing and diagnostic tests **MUST** be completed 10-30 days from surgery date:
 - MSSA/MRSA nasal swab at the Diagnostic Testing center
 - Blood work, urinalysis, x-rays, etc
 - Kaiser Permanente patients are to have their pre-op MRSA collected at the Kaiser PEEC Center
- Need Surgical Clearance from:
 - Primary Care Physician
 - Specialist, only if applicable
- Designating your family/friends support person(s). Prepare your home environment.

Results and Surgical Clearance statements from your doctors will need to be available to GBMC **no later than 3-days** before surgery.

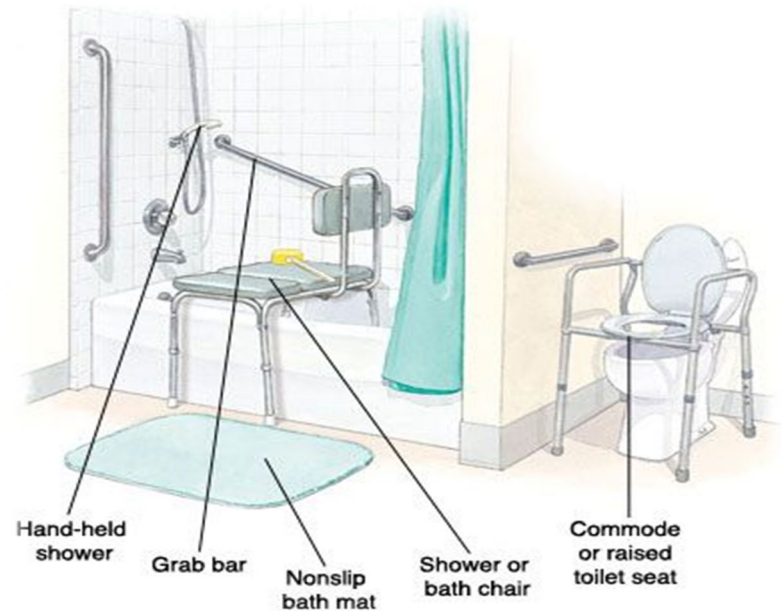
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Home Set-up

Before coming to the hospital

- Prepare meals ahead of time or arrange to have family/friends there to help
- Make frequently used items in the kitchen accessible for use
- Clean and clear home of clutter
 - Remove rugs out of bathroom and kitchen
- Make sure all equipment that you may already have is easily accessible, clean and in safe working order
 - Borrow from friends or family or community loan closets



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Preparing for Surgery: Health Condition Checklist

How to Prevent Infection and Complications

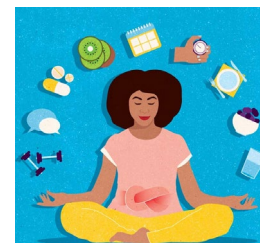


- Control your blood sugar before, during and after your surgery.
- Exercising and healthy weight loss.
- **You must STOP** smoking (including cigars, e-cigarettes and vaping) 2 weeks before surgery and at least 2 weeks after surgery
- *Keep pets and animals away from the incision site after surgery.*
- Applying fresh linens to bed before surgery. *No pets are to sleep in bed or on the sofa with you until cleared by your surgeon.*

Preparing for Surgery: Health Condition Checklist

How to Prevent Infection and Complications

- Advised no dental work within the 2-weeks prior to surgery and/or the first 3-months after surgery.
- Frequent UTI's, notify your primary team & surgeon.
- Making sure skin is healthy and clean.
- **Recommend no gel/dip/shellac polish** on fingernails.
 - Artificial nails such as acrylics: must be unpolished, a light natural/nude polish is acceptable (can be removed with acetone).
 - Best to have only clear, clean nails.
- Good nutrition with adequate calories and protein.
- Stay hydrated
- Sleep Hygiene



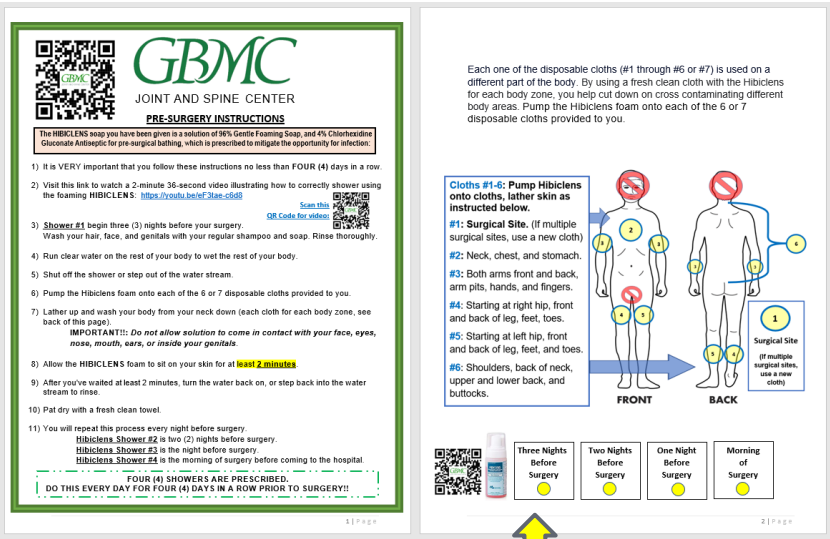
Resources:

- <https://orthoinfo.aaos.org/en/treatment/surgery-and-smoking/>
- [Preparing for Surgery: Health Condition Checklist - OrthoInfo – AAOS](#)
- <https://orthoinfo.aaos.org/en/treatment/preventing-infection-after-joint-replacement-surgery-video/>

Pre-surgery Hibiclens CHG Showers

Preventing Surgical Site Infection: Pre-Op Skin Preparation

- **Hibiclens Shower #1** begin three (3) nights before your surgery
- **Hibiclens Shower #2** is two (2) nights before surgery.
- **Hibiclens Shower #3** is the night before surgery.
- **Hibiclens Shower #4** is the morning of surgery before coming to the hospital.



The HIBICLENS soap you have been given is a solution of 98% Gentle Foaming Soap, and 4% Chlorhexidine Gluconate Antiseptic for pre-surgical bathing, which is prescribed to mitigate the opportunity for infection.

PRE-SURGERY INSTRUCTIONS

- 1) It is VERY important that you follow these instructions no less than **FOUR (4)** days in a row
- 2) Visit this link to watch a 2-minute 36-second video illustrating how to correctly shower using the foaming HIBICLENS: <https://youtu.be/af73ae-c5d8>
- 3) **Shower #1** begin three (3) nights before surgery.
Wash your hair, face, and genitals with your regular shampoo and soap. Rinse thoroughly.
- 4) Run clear water on the rest of your body to wet the rest of your body.
- 5) Shut off the shower or step out of the water stream.
- 6) Pump the Hibiclens foam onto each of the 6 or 7 disposable cloths provided to you.
- 7) Lather up and wash your body from your neck down (each cloth for each body zone, see back of this page).
IMPORTANT!!: Do not allow solution to come in contact with your face, eyes, nose, mouth, ears, or inside your genitals.
- 8) Allow the HIBICLENS foam to sit on your skin for at least **2 minutes**.
- 9) After you've waited at least 2 minutes, turn the water back on, or step back into the water stream to rinse.
- 10) Pat dry with a fresh clean towel.
- 11) You will repeat this process every night before surgery.
Hibiclens Shower #2 is two (2) nights before surgery.
Hibiclens Shower #3 is the night before surgery.
Hibiclens Shower #4 is the morning of surgery before coming to the hospital.
FOUR (4) SHOWERS ARE PRESCRIBED.
DO THIS EVERY DAY FOR FOUR (4) DAYS IN A ROW PRIOR TO SURGERY!!

Each one of the disposable cloths (#1 through #6 or #7) is used on a different part of the body. By using a fresh clean cloth with the Hibiclens for each body zone, you help cut down on cross contaminating different body areas. Pump the Hibiclens foam onto each of the 6 or 7 disposable cloths provided to you.

Cloths #1-6: Pump Hibiclens onto cloths, lather skin as instructed below.

- #1: Surgical Site. (if multiple surgical sites, use a new cloth)
- #2: Neck, chest, and stomach.
- #3: Both arms front and back, arm pits, hands, and fingers.
- #4: Starting at right hip, front and back of leg, feet, toes.
- #5: Starting at left hip, front and back of leg, feet, and toes.
- #6: Shoulders, back of neck, upper and lower back, and buttocks.

FRONT **BACK**

Surgical Site (if multiple surgical sites, use a new cloth)

Three Nights Before Surgery	Two Nights Before Surgery	One Night Before Surgery	Morning of Surgery
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Check off each yellow circle after your Hibiclens CHG shower



Hibiclens CHG Shower Video
Please note **GBMC J&S Center** requires patients to **complete 4 showers at home** before surgery



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4 Days of Pre-surgery CHG Showers



<https://youtu.be/eF3tae-c6d8>

Hibiclens Shower Video

Please note **GBMC J&S Center** requires patients to **complete 4-showers at home** before surgery

- Pre-Surgical Scrub: 4% Chlorhexidine gluconate (CHG).
- **Four (4) Total CHG Showers at home.**
- **Begin three (3) nights before surgery, the 4th shower is the last application on the morning of surgery** before coming to the hospital.
- Apply the CHG foam (two pumps) onto your 6 or 7 disposable cloths, lather the solution onto skin. **Leave on skin for 2-5 minutes.**
- Then rinse with shower water. Pat dry with a fresh clean towel.
- Avoid contact with your eyes, ears, mouth, and genitals.
- Do **NOT shave** or use **hair removal lotions, deodorant, perfume, lotion, creams, or oils** on your body.

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What if I do not have anyone to help wash my back?



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Review Your Home Medications Before Surgery

DO NOT STOP ALL MEDICATIONS.

Medications that need to be held before surgery will be reinstated after surgery.

➤ Joint Center Patient Guidebook:

➤ **Current Medication List** at the beginning of the book.

➤ Write the name of the Medication/Supplement/Vitamin.

➤ The dosage, frequency (how many time you take it in a 24-hour day), and why you take the medication.

➤ Read the **Anesthesia Guidelines for Home Medications**** section.

➤ Bring your Guidebook to ALL your Preop Appointments

➤ **With your Provider** you **MUST review and discuss current** medications, supplements, or vitamins you are taking.

➤ Show them the *Anesthesia Guidelines for Home Medications* section.

➤ Write down which medications to **stop** and **when to stop**.

➤ Use the **Medication Chart** at the beginning of the book.

➤ This chart will help you keep track of when to stop your daily or weekly medication(s), vitamin-E, supplements.

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Current Medication List

Bring completed form to your primary care team and on the day of surgery
 Refer to Pre-op Home Medication Guidelines (Anesthesia Home Medication Guidelines)
 for instructions regarding when to stop taking certain medication(s) prior to surgery.

Name:

Date of Birth:

Name of Medication	Dose	Frequency	Used for	Last Dose
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				

List all medication allergies, including Latex and IV contrast dye:

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____
- 6 _____

Date:		Stop 14-days before surgery date	Stop 10-days before surgery date	Stop 9-days before surgery date	Stop 8-days before surgery date	Stop 7-days before surgery date	Stop 6-days before surgery date	Stop 5-days before surgery date	Stop 4-days before surgery date	Stop 3-days before surgery date	Stop 2-days before surgery date	Stop 1-day before surgery date	Stop Morning of Surgery	Date and Time of the last dose taken:		
Daily/Weekly Medications	NSAIDs Non-Steroidal Inflammatory Drugs					X										
	As Needed Medications															
<p>Important Reminders for Pre-op Clearance: *Please refer to the pre-op packet from your surgeon's office/surgical scheduler</p> <p>*30-days prior to surgery date: History and Physical, Cardiac Clearance, Pulmonary Clearance</p> <p>*30-60 days prior to surgery date: your primary care team may order the following items for you to complete: EKG, Echocardiogram, labwork (BMP, CMP, CBC w/platelets, A1C, PT/INR, PTT, Serum Hcg, Urinalysis w/Micro (only if symptomatic for UTI))</p> <p>10-30 days before surgery date: MSSA/MRSA swab collected at GBMC's Diagnostic Center</p>										<p>Lumbar (lower back) Fusion, Thoracic Fusion, or a Multilevel (>2) Cervical (neck) Fusion.</p> <p>If you are a Dr. Rami or Dr. Iguchi patient having a fusion surgery please arrange to be fitted brace or hard collar before your surgery with Synergy Orthopedics. They are located in the Pavilion West, suite 705. Call Synergy 443-681-8971.</p> <p>If you are a Dr. Dolitsky patient having a fusion surgery you will be fitted for a brace or hard collar at an OrthoMD/CAO location.</p> <p>***You must bring this brace with you on the day of your surgery***</p>		<p>Begin antibacterial CHG skin prep</p> <p>1st CHG shower: 3 nights before surgery</p>	<p>2nd CHG Shower: 2 nights before surgery</p>	<p>3rd CHG shower: 3 nights before surgery</p>	<p>4th CHG shower: morning of surgery</p>	Notes:
Notes:																

Located in Your J&S Center
Neurosurgical Packet





Current Home Medications

Can continue until day of surgery

It is OK to take the morning of surgery with a sip of water at home:

- **BETA BLOCKER** and/or **CALCIUM CHANNEL BLOCKER** (**DO NOT STOP TAKING**)
- Tylenol (acetaminophen)
- Oxycodone, Tramadol, Dilaudid, Neurontin, Flexeril and Skelaxin
- Celebrex is the only NSAID that is OK
- **Non-MAIO** Anti-depressants, Anti-anxiety medications, Psychiatric medications
- Anti-Seizure medications
- Parkinson's medications
- Asthma Inhalers/medications
- Thyroid medications
- Steroids: oral or inhaled
- Cholesterol Medication-Statins: Zocor, Lipitor, Pravastatin
- Birth Control Pills
- Eye Drops

Current Medications

10 Days before surgery

- **Stop** anti-inflammatory drugs such as: **Celebrex**, **Nabumetone**, **Ketolorac**, **Mobic (Meloxicam)**, **Excedrin**, **Ibuprofen (Advil, Motrin)**, **Naproxen (Aleve)**, and **Robaxin**
 - It is important to stop as they **cause excessive bleeding** during your surgery and recovery period.
 - Patients taking any prescribed blood thinners such as **ASPIRIN** or **ASPIRIN products** like; **PLAVIX**, **TICLID**, **PRADAXA**, **ELIQUIS**, **COUMADIN** or **WARFARIN** should consult their prescribing physician or cardiologist in regard to stopping medication prior to surgery.

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Current Medications

7 Days before surgery:

- **Stop** Certain vitamins such as **Vitamin E** and **Glucosamine**
- **Stop** All herbal products: **fish oil, ginko biloba, ginseng, kava, dong quai, garlic, ma huang, St. john's wart and non-vitamin supplements.** **(These medications may cause excessive bleeding!)**
- **Stop Diet** medications

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Current Medications

3 days before surgery

- **Stop** topical medications
- **Stop** Viagra, Levitra & Cialis



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Current Diabetic Medications

4 days before surgery

- **Stop SGLT-2** Inhibitor medications: Steglatro

3 days before surgery

- **Stop SGLT-2** Inhibitor medications: Jardiance, Invokana, Farxiga, and

- ❖ Wearable continuous blood glucose monitoring systems: please notify your surgeon and/ or anesthesiologist as soon as possible. GBMC nursing staff will monitor your blood glucose per hospital policy.
- ❖ If you have a wearable insulin pump system, please notify your surgeon and/or anesthesiologist as soon as possible.

Patient's taking a GLP-1 Agonist medication**

24 hours before surgery

Semaglutide (**Ozempic**, *Rybelsus*), dulaglutide (**Trulicity**), exenatide (**Bydureon BCise**, *Byetta*), liraglutide (**Victoza**, *Saxenda*), lixisenatide (**Adlyxin**), etc.

- **Diabetic medication**, or
- ****off label use for weight loss**
- **STRICT PRE-op Diet Restrictions to be followed, failure to do so may cancel your surgery.**
- **CLEAR LIQUID DIET**** starting **24 hours before your surgery time**
 - Clear Liquids** for 24h before surgery**
 - Coffee and tea without milk or non-dairy creamer (sweetener is ok)
 - Clear, nonfat broths
 - Fruit & vegetable juices that are strained & pulp free
 - Sodas & Sports drinks
 - Pulp-free popsicles
 - Jell-O
- **12 Midnight before surgery: Nothing by mouth**



The Night Before Surgery

- **NO** heavy meals past 8 pm
 - You can snack up until midnight
- **NO** eating past midnight, only a small sip of water is permitted to take medications. When brushing teeth expel water with rinsing on the morning of surgery.
- If you keep a drink on your bedside table, remove it before you go to sleep. Old habits are hard to break!
- **NO** chewing gum or mints after midnight.

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Morning of Surgery

Blood Pressure Medication

➤ **Stop ACE Inhibitors:**

➤ Examples: Lisinopril, Vasotec

➤ **Stop Angiotensin Receptor Blockers:**

➤ Examples: Cozaar, losartan, Benicar, Candesartan, Atacand, Valsartan

You must review your medications with your cardiologist or primary care provider.

Use your guidebook to discuss which medications you should STOP or which medications you are allowed to take the with a sip of water the morning of your surgery.

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Morning of Surgery...*Continued...*

- **Take** your **Beta blocker** and/or **Calcium Channel blocker**
 - These two medications help to treat abnormally rapid heart rhythms and other cardiac conditions.
 - Take them with a sip of water at home before leaving the house the morning of your surgery.
- Discuss with your primary care or cardiologist if they want you to take your diuretics the morning of your surgery
 - Examples: **HCTZ**, **Lasix**

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Morning of Surgery...continued.

Heartburn vs. ulcer medicine

- **Acid blockers should be taken** with a sip of water at home before leaving for the hospital; helps to reduce the risk of aspiration pneumonia.
 - Examples: **Zantac, Pepcid, Axid, Prilosec, Pantoprazole, Reglan**
- **Antacids** should **NOT** be taken they contain particulate material that may damage the lungs if aspirated
 - Examples: **Maalox, Tums, Carafate**

No CBD/THC products on the day of your surgery.

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What to Bring to the Hospital

- Your ID card and Insurance card/Medicare card
- Advance directive
- List of home medications (leave actual medications at home)
- Preop CHG wash form
- Bring in glasses, contact lenses, hearing aids, and dentures
- Regular clothing
 - Loose fitting shorts or pants; elastic waist is easiest, under garments
 - Walking shoes with good ankle support (no open heel shoes). Do not buy new shoes - bring something comfortable
- **Back brace** (For multi-level spinal fusions, your surgeon will order and have you fitted for one before your surgery date)
- Shoe inserts or splints that you normally use
- CPAP machine** (if you have sleep apnea)




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NORTH CHARLES STREET

S SHUTTLE STOP **V VALET PARKING**



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- Labor & Delivery (OB entrance) the Yaggy Atrium

8:30 a.m. - 5:00 p.m.

- PPW, Physicians Pavilion West

Labor & Delivery D

LA PETITE ACADEMY OF TOWSON

SANDRA R. BERMAN PAVILION

BERMAN LOT P

BLUEBELL PARK P
CLOSED

SANDY'S WAY

LOUIS AND PHYLLIS FRIEDMAN BUILDING

GOR 4th floor

EMERGENCY DEPARTMENT

LILY PARK P

TULIP PARK P

GATEHOUSE DRIVE

DAFFODIL PARK P
CLOSED

Diagnostic Center LAB

PHYSICIANS PAVILION EAST

PHYSICIANS PAVILION NORTH

Pavilion West

Pavilion East

S SHUTTLE STOP **V VALET PARKING**



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- PPW, Physicians Pavilion West
- Bus loop, Physicians Pavilion East (PPE)

IRIS PARK P

NORTH CHARLES STREET

Arriving to the Hospital on the Day of Surgery



- Arrive at the hospital at least **2 hours** before your surgery time.
- Park in **Lily Garage**.
- Take elevator to the main floor to enter Lobby E.
- Lobby E is on the 3rd floor of main hospital.

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Directions to the General Operating Room (GOR)

- Once inside, **Lobby E**, walk down the corridor, you will pass a sitting area on the LEFT.



- Continue until you reach elevator E.
- Take **Elevator E** on the left to the 4th floor



- When you exit the elevator walk straight forward to the GOR registration desk.



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The Pre-operative/Intra-op Areas

In Pre-Op

- You will be given a hospital gown to change into
- You will be given in this pre-op area:
 - CHG wipes to clean your skin a 5th time
 - Nozin Nasal Sanitizer to begin your antimicrobial intranasal coverage
- Meet your surgical team: surgeon, nurse, anesthesiologist, tech
- Admission database will be completed
- Vital signs, IV will be started; IV fluids and antibiotic(s)
- 1 visitor is allowed in the pre-op area



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Pre-op Infection Prevention

Nozin.
LEADER IN NASAL DECOLONIZATION.

How It Works
Increased Protection Against Risk of Infections

The nose is a reservoir for bacteria that escape typical hygiene protocols such as hand washing. Nozin® Nasal Sanitizer® antiseptic equips health professionals, patients and individuals with a safe and effective nasal shield that helps decrease bacteria on nasal vestibule skin. Importantly, Nozin Nasal Sanitizer antiseptic is clinically shown to reduce nasal bacteria carriage without antibiotics.

Nozin.
✓ Clinically proven
✓ Kills 99.99% of germs

Nozin® Nasal Sanitizer® is specially formulated to effectively address nasal carriage of bacteria:

- Effective – kills 99.99% of germs and is clinically proven to decrease nasal bacteria carriage
- No Antibiotics – alcohol-based antiseptic
- Safe, Fast-Acting – the active ingredient is ethyl alcohol, a well-established, trusted, broad spectrum antiseptic
- Pleasant – experience a soothing, moisturizing feeling and a soft smell of citrus
- 12-Hour Duration – soothing solution is well tolerated, safe for regular use and Nasal Sanitizer® effect lasts 12 hours
- Easy To Use – with the multiple use bottle, application of Nozin is simple and convenient

Think hand sanitizer for your nose.

RECOMMENDED BY HEALTH PROFESSIONALS

Do you have an **orange fruit oil allergy**?

***You will receive the Nozin at GBMC

Nozin.
NASAL SANITIZER.
NOZASEPTIN® FORMULA ADVANCED ANTISEPTIC
PreOperative Pack How to Apply



AMPULE 1

Preparation Instructions:

Clean nostrils with a tissue. Discard.



Application Instructions:

RIGHT nostril



Ensure swab rotation covers all surfaces, including the inside tip of the nostril.

Rotations per nostril: 16



Total # rotations: 32

AMPULE 2

REPEAT
Repeat cycle with Ampules 2 and 3.

AMPULE 3

USE AND DISCARD
Use all three (3) Ampoules consecutively.
Discard after use.

Do not use if you have allergy to citrus oil, or you have nasal bleeding or irritation.
Intended Use: Nozin® Nasal Sanitizer® is a topical antiseptic used to decrease bacteria on the nasal vestibule skin.
Active Ingredients: Alcohol 62%
Precautions: Use ONLY with sleeve on ampule. Do not extend ampule into nose beyond swab tip. Refer to Instructions for Use (IFU) for complete product information.

Nozin.

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After Surgery

PACU I (postanesthesia care unit)

- You will wake up and probably feel sleepy
- Your vital signs will be assessed every 15 minutes
- Cardiac and oxygen monitors will be in place
- Pain medications are available as needed
- Your anesthetist will evaluate your progress, once you have met the criteria for the next phase: vital signs are stable, pain is managed, and the room you will be transferred to is clean:
 - GBMC's pre-approved **Same-Day Discharge patients** will be **begin the PACU II phase**
 - GBMC's **hospital admit patient** will **be transferred to Unit 58**

Same-Day Discharge patients

PACU II phase for discharge home:

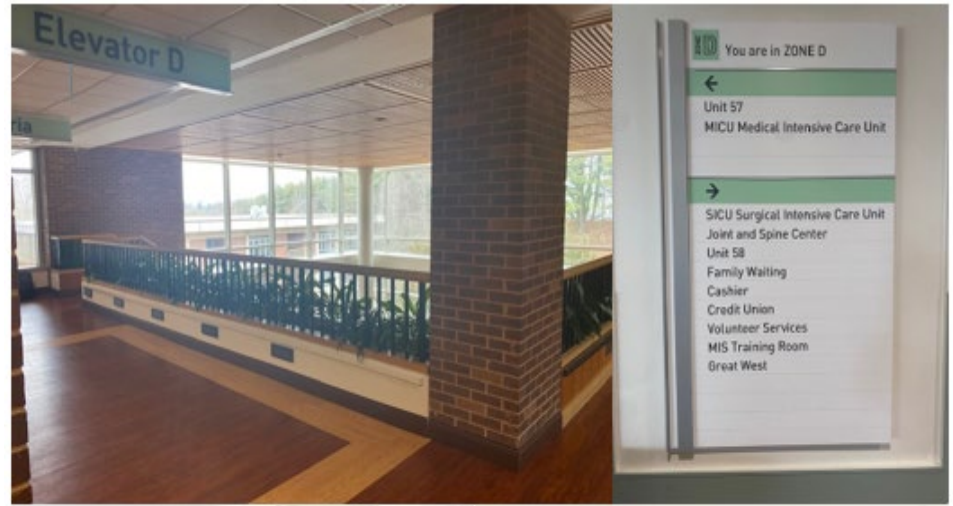
- Meet your Registered Nurse (RN)
- You will be given your Nozin 12 mL bottle kit; your nurse will teach you how to apply and when to apply the Nozin. Your first dose will be given at this time.
- **Goals for Discharge:** You will need to urinate, be medically stable (vital signs within normal limits, pain managed), and be given the final clearance for home by your surgeon/provider.
- Your Home Discharge Instructions (AVS) and post-op supplies will be provided to you and support person by your discharge nurse.

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Hospital Admission: *in-patient admit*

- Once your vital signs are stable and pain is managed. Your anesthesiologist will clear you for transfer from the PACU to Unit 58.
- Unit 58 is located on the 5th floor of Zone D (Labor & Delivery entrance)



Admission to Unit 58

- Private room
- Meet your RN (Registered Nurse) and NST (Nurse Support Tech)
- Communication Board updated
- Welcome Folder and your Nozin 12 mL bottle kit will be given to you when you arrive to U58.
 - Upon arrival, the nurse will be teaching you how to give yourself a dose of Nozin from your home kit.



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Post-op Infection Prevention

- First dose: after surgery upon arrival to U58
 - Same-day discharge given in PACU
- Next dose: at 9 pm, then every 12 hours
- Continue every 12 hours until your 1st post-op visit or until the bottle is empty (30 days)

Nozin.
LEADER IN NASAL DECOLONIZATION.

How It Works
Increased Protection Against Risk of Infections

The nose is a reservoir for bacteria that escape typical hygiene protocols such as hand washing. Nozin® Nasal Sanitizer® Antiseptic drops are health professionals, patients and individuals with a safe and effective nasal spray that helps decrease bacteria on nasal vestibule skin, importantly, Nozin Nasal Sanitizer Antiseptic is clinically proven to reduce nasal bacteria carriage without antibiotics.

RECOMMENDED BY HEALTH PROFESSIONALS

Nozin.
Clinically proven
Kills 99.99% of germs

Nozin® Nasal Sanitizer® is specially formulated to effectively address nasal carriage of bacteria:

- Effective – Kills 99.99% of germs and it clinically prevents or decreases nasal bacteria carriage
- Safe, Fast-Acting – the active ingredient is ethyl alcohol, a well-tolerated, broad-spectrum antiseptic
- 12-hour Duration – soothing solution is well-tolerated, safe for regular use and Nozin Sanitizer® effect lasts 12 hours
- No Antibiotics – alcohol-based antiseptic
- Pleasant – experience a soothing, moisturizing feeling and a soft smell of citrus
- Easy To Use – with the multiple use bottle, application of Nozin is simple and convenient

Think hand sanitizer for your nose.



Nozin® Nasal Sanitizer® Multidose 12ML Bottle
How to Apply

Clean nostrils with a tissue. Discard.



1. Shake



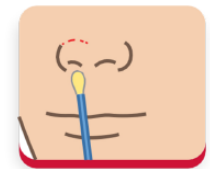
Shake bottle well.
Remove cap.

2. Saturate



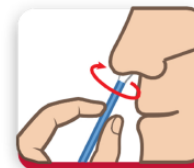
Apply **four (4) drops** of solution onto cotton swab tip.

3. Apply



Insert swab tip into **RIGHT** nostril. Swab **eight (8)** times clockwise and **eight (8)** times counterclockwise.

4. Swab



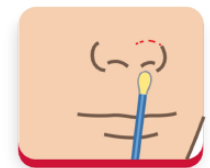
Ensure swab rotation covers all surfaces, including the inside tip of the nostril.

5. Saturate Again



Re-saturate the swab tip by applying **two (2) drops** of solution.

6. Apply Left Nostril



Repeat application **steps 3 - 4** in the **LEFT** nostril.

Do not use if you have allergy to citrus oil, or you have nasal bleeding or irritation.

Intended Use: Nozin® Nasal Sanitizer® is a topical antiseptic used to decrease bacteria on the nasal vestibule skin.

Active Ingredient: Alcohol 62%.

Precautions: Do not extend applicator into nose beyond swab tip.

Please also refer to Instructions for Use (IFU), product package and Nozin.com.

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©2017-2020 Global Life Technologies Corp. All rights reserved. Made in USA. Nozin®, Nasal Sanitizer®, Popswab® are trademarks of Global Life Technologies Corp. Patent Nos.: nozin.com/patents

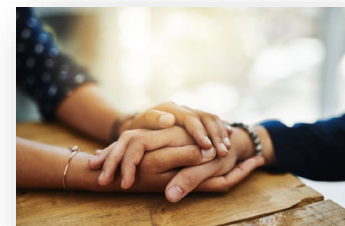
Do you have an **orange fruit oil allergy?**

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Visitor Policy: Inpatient Adult Units

- Visiting hours are from 8am-9pm
- 4 visitors are allowed at a time, **1-visitor can stay overnight (9p-8a)**.
 - *No children under 18 may stay overnight.*
- Visitors under the age of 10 years are now permitted to visit inpatient areas.
 - *They must remain under the supervision of a responsible adult who is not a patient.*
- Visitors under the age of 14 must remain under the supervision of a responsible visiting adult.
 - *A patient may not be the designated adult.*
- Visitation guidelines will reflect our Zero Tolerance policy as it relates to disruptive behavior.
- *Visitors with any respiratory symptoms must wear a mask covering the nose and mouth at all times*



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Pain Management

- Pain scale 0-10
 - “0” means no pain
 - “10” means the worst pain that you have ever had
- Remember: You should **not** expect your pain level to be “0” after surgery
- Pain medications are available as needed (prn), you must ask for your pain medications.
- **Call** your nurse when you are experiencing pain above your goal



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Sequential Compression Device

- Used on your lower extremities to help circulation
- Help prevent blood clots



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Lung Exercises: Before Surgery & After Surgery

Purpose:

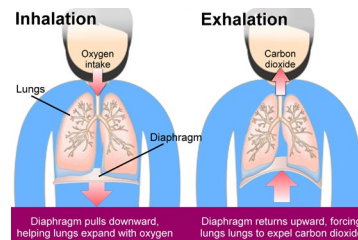
These exercises will help to optimize the functions of your lungs when breathing in and out, increasing oxygen and carbon dioxide exchange before, during, and after surgery.

Will help prevent complications such as pneumonia infection and/or collapse of lungs. Improves wound healing.

- **Before surgery:** At least 30 times throughout the day, starting in the morning.
- **After surgery:** 10 times an hour when awake.

➤ Deep Breathing & Coughing

1. Sit upright.
2. Take a few slow breaths, then take a slow, deep breath in through your nose.
3. Hold your breath for 2-5 seconds.
4. Gently and Slowly breathe out through your mouth making an "O" shape.
5. Repeat 10-15 times.



➤ Incentive Spirometer

1. Exhale.
2. Place mouth on mouthpiece.
3. Take a slow, **deep breath in** and hold for 5-10 seconds.
4. Exhale.

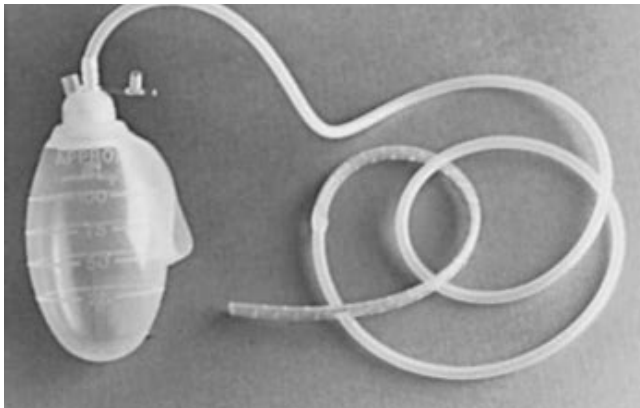


MyChart
of GBMC

How to Properly Use an
Incentive Spirometer

Surgical Drains

- A surgical drain is a tube used to collect blood or other fluids from a wound
- If you need a drain, it will be placed by your surgeon during your surgery



Jackson Pratt (JP Drain)



Hemovac

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Cervical Collar

- For patients having cervical surgery:
 - Your surgeon may order a soft collar or a hard collar depending on the type of surgery
 - Patients are usually ordered a soft collar for comfort and maintaining spine precaution



Soft Collar



Philadelphia



Aspen

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Lumbar Brace

- For patients having a lumbar fusion
 - Your surgeon may order a brace to wear when you are out of bed
 - You need to be fitted for your brace prior to surgery
 - Call **Synergy Orthopedics**: 443-681-8971
 - Bring your brace to the hospital



LSO



TLSO



Insurance only covers for one back brace -
Do not give or throw away your brace!

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Abdominal Binders



- These are supplied by GBMC on your day of surgery
- Lumbar fusions: worn while in bed for comfort
- Lumbar Laminectomy and Microdiscectomy: worn for comfort

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Fall Prevention Risk

- **Red** non-skid socks will be placed on you, signaling that you are at a high risk for experiencing a fall
- Do **NOT** get up without the help staff assisting you.
- Use walker
- Use your call bell

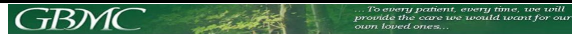


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SPINAL PRECAUTIONS



Greater Baltimore Center for Rehabilitation Medicine
Acute Care Physical & Occupational Therapy
Spinal Precautions



NO BLT



Spinal Precautions Video



Greater Baltimore Center for Rehabilitation Medicine Acute Care Physical & Occupational Therapy

Spinal Precautions

Log rolling to a seated position in the bed.

Log rolling will maintain spinal precautions to decrease pain and discomfort.

Spinal Precautions Video



Bend your knees while lying flat on your back.



Roll to your side while keeping your shoulders and hips aligned and without twisting your back.



Push up with your arms to slowly raise your body as you lower your legs to the floor.



Sit upright with a straight spine and both feet on the floor.

When moving from a seated to a lying-down position, replicate this process in reverse.

No Bridging
To prevent undue stress or strain on your spine, do not lift your hips off the bed while lying down.



Spinal Precautions Video:
<https://vimeo.com/856399511/d507073358?share=copy>



What to Expect in the Hospital

Post-op day 1

- If you have a urinary catheter, it will be discontinued
- You will be evaluated by physical therapy (PT) and occupational therapy (OT)
- You will have one individual therapy session every day starting the morning after your surgery

Post-op days 2 & 3

- More therapy - walking in halls and going to the gym to practice getting in and out of the tub/shower, in and out of the car, and going up and down stairs
- The drain may be removed before you are discharged.

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Rehabilitation: PT versus OT

Physical Therapy – helps you with functional mobility

- Walking
- Getting in/out of bed
- Transfers into/out of a chair
- Going up/down steps
- Doing your exercise program

Occupational Therapy – helps you with functional activities of daily living (ADL)

- Getting dressed and bathed
- Getting in/out of tub/shower
- Using the toilet
- Car transfers
- Getting items out of refrigerator/cabinets
- How to use adaptive equipment if needed

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Possible Medical Equipment Needs

Raised toilet seats, bedside commodes, and toilet seat frames



Raised Toilet Seat



Bedside Commode



Toilet Safety Frame



Tub/Shower Chair

Bedside commode

- Can be used next to your bed
- Can be used as a shower chair for your walk-in shower
- Can raise the height of your toilet

Tub Seat/Shower Chair

- Decreases the risk of falls in the shower or tub
- Allows you to safely sit while showering if you have pain, dizziness, or get tired easily
- Shower doors on bathtubs may need to be removed

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Possible Medical Equipment Needs



Approved

Long Handled Sponge



Not Approved

Reacher



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Case Management

The Case Manager on Unit 58 will visit you the day after your surgery to continue working on your discharge planning needs

- Home with Out-Patient Therapy
- Home with Home Physical Therapy
- Skilled Nursing Facility (SNF)
- Equipment for home
- Offering resources

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Medical Orders for Life-Sustaining Treatment (MOLST)

MOLST

- Portable medical order form covering options for cardiopulmonary resuscitation and other life-sustaining treatments
 - Does **not** expire
 - Medical orders are based on a patient's wishes about medical treatments
 - The advance practitioner or surgeon will have the paperwork.
- Are **not** Advance Directives
- All patients that are transferred to another facility will **require** a MOLST form prior to EMS transport

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Discharge Day (from Unit 58)

- Neurosurgical team and physical therapist will need to clear you for discharge or transfer.
- Occupation Therapy will teach you how to get in and out of the car maintaining your spinal precautions.
- You will need to know your spinal precautions.

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Average Length of Hospital Stay

- Microdiscectomy, laminectomy, etc: Same-day discharge home from the PACU
- Cervical Fusion: Anterior approach (from the front), 23 hour stay on U58
- Cervical Fusion: Posterior approach (from the back), 2 days on U58
- Lumbar Fusion: 2-3 nights stay on U58

*YOU WILL NEED SOMEONE TO DRIVE YOU HOME
WHEN YOU ARE RELEASED FOLLOWING SURGERY!*

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General Post-Op Care

- Allow approximately 6 weeks for lumbar surgery and 4 weeks for cervical surgery for healing.
- Surgical dressing and incision care follow instructions in your AVS.
- Walking is the only exercise encouraged.
- No lifting anything over **8-10 lbs.**
- Minimize the use of stair and cars.
- No driving until you are seen for your 6-week post-op visit, unless otherwise instructed.
- Use your Nozin nasal sanitizer twice a day, every 12 hours.
- Daily CHG showers (*no soaking in the bath*)
- You will be sent home with prescriptions for pain medication. If you need a refill, call the office 3 days in advance. Prescriptions will not be addressed on weekends or after hours.
- The Maryland Department of Health & Mental Hygiene, you will be prescribed an opioid antidote called Naloxone (Narcan) in the event of an overdose.

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Notify Your Nurse/Surgeon

- If weakness, numbness, or pain worsens
- If you have **trouble swallowing, swelling/mass, increase hoarseness** to your voice
- A temperature above **100.5**
- Notify the office immediately for any **drainage, redness, tenderness, swelling.**

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Wound Care

- Keep wound clean and dry.
- Your surgical dressing should be removed before discharge and redressed with gauze and tape by the surgical PA/NP. Follow your AVS (discharge instructions)
- If you have steri-strips, they will fall off on their own.
- You may take a shower, **if your incision is not draining**.
 - Do not scrub the incision.
 - Dry area completely after showering. NO tub bathing for at least 4 weeks after surgery.
- Do not use lotions or moisturizes on your incision.
- Do not manipulate (pick or probe) your incision in any way.
- Schedule your post-op visit 7-14 days after surgery for a wound check for suture/staple removal

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Wound Care

- A simple visual check for infection should be all that is needed each day
- Change dressing per your surgeon's instructions.
- Keep incision out of direct sunlight.
- Do not actively clean your incision unless you are specifically instructed to do so.

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Wound Care

- **Lumbar Incision (lower back) & Abdomen Incision:** Clear dressing will stay in place for 48h. During this 48h, you may only shower if dressing is intact. After 48h, you can get your incision wet, but pat dry and place a new, clean, dry dressing of gauze & tape. Change daily until wound check; *you may require another person's help.*
- **Cervical Incision (back of neck):** Clear dressing will stay in place for 48h. After 48h, you can shower and get your incision wet, but pat dry and place a new, clean, dry dressing of gauze & tape. Change daily until wound check ; *you may require another person's help.*
- **Cervical Incision (front of neck):** Clear dressing will stay in place for 48h, then can be removed and incision open to air. Steri-strips will be under dressing and can get wet, but pat dry.

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Preventing Surgical Site Infection

- Use Hibiclens Foam CHG with daily showers.
- Use each day for 5 days, for any concerns check with your surgeon if you need to use this past this point
- Nozin: Continue every 12 hours until your 1st post-op visit or until the bottle is empty (30 days, twice a day)



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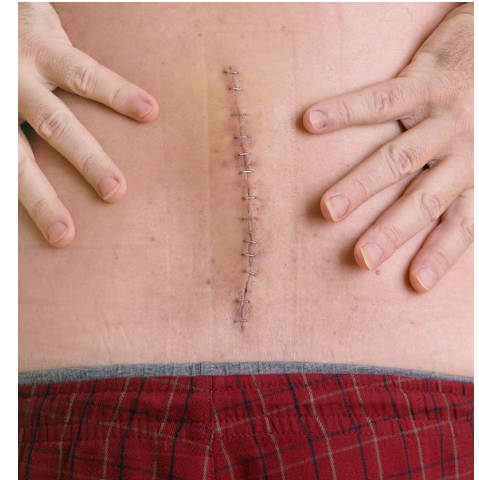
What Should My Incision Look Like? Minimal redness, no drainage and no swelling.



Anterior Cervical
Fusion



Posterior Cervical
Fusion



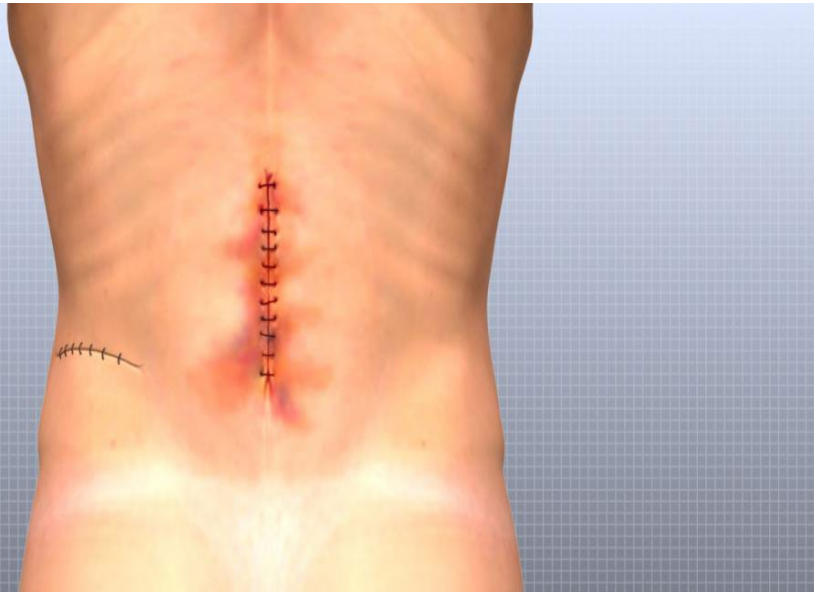
Lumbar Surgery

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What Should My Incision **NOT** Look Like?

Swelling, spreading redness, warm, and tender.

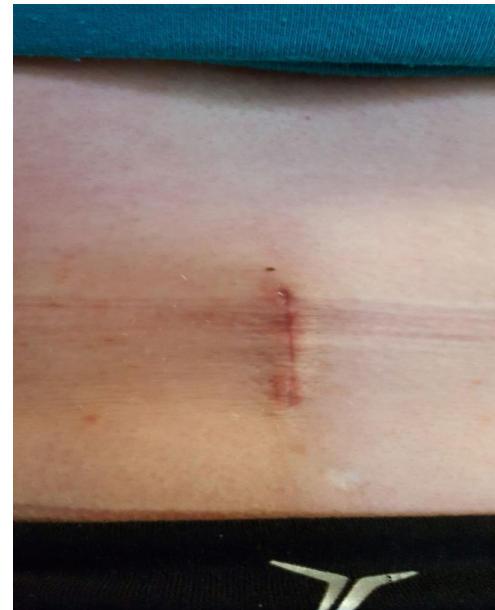


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What Should My Incision Not Look Like?

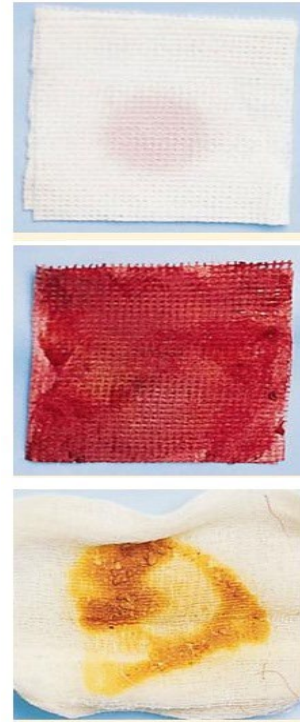
Do not let your waist band rub across your incision!



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Call Your Surgeon If You Have Drainage



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Discharge Day Checklist Guide - Spine

- ____ I have reviewed my discharge instructions with the nurse
- ____ I know who is my support person/help at home
- Post-op Physical Therapy/Occupational Therapy Agency: _____
 - Phone # _____
 - If I haven't heard from the Physical Therapy Agency 3-days after discharge or have any issues with scheduling, I will call my surgeon's office as soon as possible
- ____ Do I have my prescription(s)?
 - Medication(s) **MUST** be picked up the day of discharge
 - GBMC Walgreens can deliver your medications to your room, accepts cash or credit cards
- ____ Do I know the reason for and side effects of my prescriptions?
- I have my...
 - ____ Walker and/or cane (if you do not have one, insurance approval is needed)
 - ____ Dressing material: gauze and Tegaderm/tape (if needed)
 - ____ 5 Bottles CHG Solution and Disposable Wipes
 - ____ Nozin[®] Nasal Sanitizer[®] 12-mL bottle and starter cotton swabs
 - ____ Back brace or cervical collar (if ordered)
 - ____ Belongings that I brought into the hospital
- I will call my surgeon's office with any signs of infection such as, redness, swelling, tenderness, or puss-like drainage
- Please contact your surgeon's office with any questions at (_____)



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Thank you for choosing GBMC for your Spine Surgery!




Joint and Spine Center
6701 N Charles St
Towson, MD 21204
Phone: 443-849-6261
Email: jointspinecenter@gbmc.org
Website: www.gbmc.org/JointandSpine

ACTIVATE your **MyChart** today



NORTH CHARLES STREET

S SHUTTLE STOP **V VALET PARKING**



V VALET SERVICES

Valet services (cash ONLY) will be available Monday through Friday at the following times/locations:

7 a.m. - 6:30 p.m.

- Louis and Phyllis Friedman Building entrance
- Labor & Delivery (OB entrance) the Yaggy Atrium

8:30 a.m. – 5:00 p.m.

- PPW, Physicians Pavilion West

LA PETITE ACADEMY OF TOWSON

SANDRA R. BERMAN PAVILION

BERMAN LOT

BLUEBELL PARK

CLOSED

Labor & Delivery

EMERGENCY DEPARTMENT

LOUIS AND PHYLLIS FRIEDMAN BUILDING

GOR 4th floor

LILY PARK

TULIP PARK

PHYSICIANS PAVILION NORTH

GATEHOUSE DRIVE

DAFFODIL PARK

CLOSED

Diagnostic Center LAB

PHYSICIANS PAVILION EAST

Pavilion West

Pavilion East

S SHUTTLE STOP **V VALET PARKING**



S SHUTTLE SERVICES

Beginning 11/9/2023 GBMC will provide shuttle services on a continuous loop Monday - Friday 7 a.m. - 5 p.m.

The shuttle accommodates 4 passengers at a time and will pick up from 3 locations:

- Friedman Building entrance
- PPW, Physicians Pavilion West
- Bus loop, Physicians Pavilion East (PPE)

NORTH CHARLES STREET

IRIS PARK