PRE-OPERATIVE TEACHING CHECKLIST

A. Pre-op teaching to all surgery patients.

Exception: 1. Emergency admission for Emergency Surgery
2. Patients with apparent inability to understand instructions without family member.
3. Patients admitted directly to O.R.

B. Pre-op teaching to include following:

Yes	No	
		1. Reinforcement of physician explanation of surgical procedures.
		2. Explanation of how to deep breathe and cough.
		a. Demonstration and return demonstration.
		b. Incentive spirometer.
		3. Explanation of O_2 drainage tubes, intravenous fluids and specific reasons for having these.
		4. Patient informed regarding how often blood pressure, pulse and temperature will be taken and the reason.
		5. Explanation of pain medicine given. Patient informed of need to request pain medicine when needed.
		6. Patient informed about what will take place the night before surgery. (enema, bath, prep, sleeping pill, etc.)
		7. Patient informed about what will take place early morning of surgery. (bath, vital signs, and gown).
		8. Patient shown how to turn from side to side. Turning encouraged every 2 hours for 24 hours or longer after surgery. Patient encouraged to move himself. (Except: spinal surgery).
		9. Patient shown how to move foot in circle and how to flex his leg slowly but often.
		10. Pre-op medication explained to the patient and reason for giving.
		11. Patient instructed in need to void prior to pre-op.
		12. Patient instructed to stay in bed after pre-op medication given and side rails be kept up.
		13. Explanation of "Nothing by Mouth" which usually is in effect after midnight.
		14. Patient instructed on how to record I & O and purpose.
		15. Patient instructed in self peri care and cath care if applicable.

Yes	No

16. Patient instructed in removal of following:

    a. Dentures
    b. Jewelry: watch, earrings, rings and necklace
    c. Contact lens and eye glasses
    d. Fingernail and toenail polish
    e. Wigs, hairpieces and hair pins
    f. Hearing aid
    g. Extra clothing

17. Specific information given to relatives on where to wait and when and where to see the doctor.

I have received the above pre-op instructions and I understand them.

Patient's Signature

Nurse's Signature