

DISCHARGE INSTRUCTIONS - GENERAL

If you have any questions or problems call Dr _____ at _____

If you are unable to reach your Doctor call SOUTH COAST SPECIALTY CENTER at 714-708-3737

ONLY FOLLOW THOSE INSTRUCTIONS THAT HAVE BEEN SPECIFICALLY MARKED FOR YOU

DIET:

- ☐ 1. Regular/General diet: The foods you normally eat.
- ☐ 2. Progress your diet. Begin with small amounts of clear liquids for the first few hours and slowly progress to full liquids and then a light, bland meal and then a regular diet.
Clear liquids: 7-up, apple juice, cranberry juice, broth, plain Jell-O, water, Popsicle, ginger ale, electrolyte solutions (i.e. Gatorade, pedialyte).
Full Liquids: Mild, milkshakes, yogurt, soups, formula.
Light/Bland diet: Poached eggs, toast, crackers, etc.
- ☐ 3. No alcohol with pain medication. Do not drink alcohol for 24 hours after surgery.
- ☐ 4. Encourage fluids.
- ☐ 5. Avoid constipating foods & fluids. Rice, banana, boiled milk, cheeses.
- ☐ 6. If you are sick to your stomach, you should have nothing at all for at least one hour, then start all over again with small amounts of clear liquid and then slowly progress to full liquids, then a regular diet.

ACTIVITY:

- ☐ Rest and then help to the bathroom.
- ☐ Quiet indoor activity.
- ☐ No vigorous play, lifting or straining.
- ☐ Quiet today, your usual activity tomorrow.
- ☐ Normal, your usual activity.

PRESCRIPTIONS: TAKE ALL MEDICATIONS AS ORDERED

LIST MEDICATIONS: _____

WOUND CARE:

- ☐ Keep bandages dry and intact. You may sponge bath around bandages. If tapes come loose, they may be trimmed.
- ☐ You may remove bandages after _____ hours and shower. Leave skin tapes on and just pat dry.
- ☐ You may bathe. If dressings fall off, that is okay.
- ☐ Ice to wound as much as possible. (Example: 20 minutes on then 20 minutes off)
- ☐ Notify Dr. for excessive bleeding or signs of infection such as redness, swelling, discharge, or temperature > 100 F.
- ☐ Elevate the affected extremity above your heart to reduce swelling.
- ☐ Some patients have a clear coating over the incision. This dressing will peel off by itself in 4 to 7 days.

SIGNS OF IMPAIRED CIRCULATION: NOTIFY YOUR DOCTOR IF ONE OR MORE OF THE FOLLOWING SIGNS OCCUR:

1. Extreme coolness in affected extremity.
2. Inability to move the fingers or toes of affected extremity.
3. A bluish or white coloring of the fingers or toes of the affected extremity.
4. An increasing numbness or tingling of the affected extremity that is not relieved by changes to your position.

Please see further instructions regarding your condition on a separate sheet.

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Ear, nose & throat | <input type="checkbox"/> Gynecological | <input type="checkbox"/> Ophthalmology | <input type="checkbox"/> Gastro-intestinal (GI) |
| <input type="checkbox"/> Plastic surgery | <input type="checkbox"/> Oral Surgery | <input type="checkbox"/> Pain Management | <input type="checkbox"/> Podiatry |
| <input type="checkbox"/> Orthopedic | <input type="checkbox"/> General Surgery | <input type="checkbox"/> Urology | <input type="checkbox"/> Other _____ |

Post Op Visit: _____

Comments: _____

It is not unusual to feel somewhat dizzy or sleepy following surgical procedure. DO NOT DRIVE AN AUTOMOBILE, operate equipment or perform any skills requiring coordination, make important decision or drink alcoholic beverages for the remainder of the day. I hereby acknowledge receipt of the instructions indicated above and will arrange for follow-up as indicated above.

Patient Signature

Witness

Date



Patient label