



## **PRE-OPERATIVE CHECKLISTS**

Preparing for spine surgery is a physical, mental, and emotional process. There are many important matters which you will probably need to attend to before you are admitted to the hospital. Allowing yourself ample time to get these tasks done helps to reduce the stress and worry which are common before surgery.

You may check off these tasks as they are completed. (Please note: this checklist does not bind you to any agreements whatsoever.)

### **PERSONAL MATTERS**

1. The following personal matters in my life are in order:

- Bills/correspondence
- Banking
- Insurance Responsibilities
- Help at home after surgery
- Childcare
- Hair care
- Pet care
- Meals (planned/prepared/frozen)
- Instructions to my family/house sitter
- Transportation arranged to and from hospital
- Home arranged for maximum ease after surgery

2. I have packed the following items to bring with me:

- Robe (pajamas or sweats)
- Slippers (non-slip soles)
- Comfortable walking shoes  
(preferably slip-ons with non-slip soles)
- Book, tapes, CD's, writing materials
- Toiletries
- One complete set of loose fitting clothes  
( a sweat suit with pants and a zippered jacket to wear to and from the hospital.)
- Reading glasses

3. I understand that I am advised to bring only \$5.00 in cash with me to the hospital, and to leave jewelry, watches, credit cards and electrical appliances at home.



## **MEDICAL MATTERS**

1. \_\_\_ I am not to eat or drink anything after midnight the night prior to surgery.
2. \_\_\_ I have read and understand the “Informed Consent” form.
3. \_\_\_ I have prepared my “Medication List”.
4. \_\_\_ I am not aware that I have any new illness.
5. \_\_\_ Bowel Prep if indicated.

## **MEDICATIONS AND SOCIAL HABITS CHECKLISTS**

I have discontinued the recommended activities and medications prior to surgery:

1. \_\_\_ Cigarette smoking for thirty days.
2. \_\_\_ Alcohol consumption for two weeks.
3. \_\_\_ Anti-inflammatory medications for seven days (Naprosyn, Clinoril, Motrin, Feldene).  
**(BLOOD THINNING EFFECT)**
4. \_\_\_ All aspirin or aspirin-containing products for seven days (Alka-Seltzer, Bufferin).  
**(BLOOD THINNING EFFECT)**
5. \_\_\_ Anticoagulants (blood thinners) for fourteen days.
6. \_\_\_ Birth control pills and hormone pills (Premarin/Provera) for seven days.  
**(BLOOD THICKENING EFFECT- MAY INCREASE RISK OF BLOOD CLOTS)**