



Saskatchewan
Health Authority

My Surgery Planning in Advance

Information for Patients Having Surgery in Regina



CS-PIER-0377
OCTOBER 2026



saskhealthauthority.ca

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Patient Surgical Education Booklet

Welcome to the Saskatchewan Health Authority (SHA). Our goal is to provide you with safe, high-quality, and timely care throughout your surgical journey.

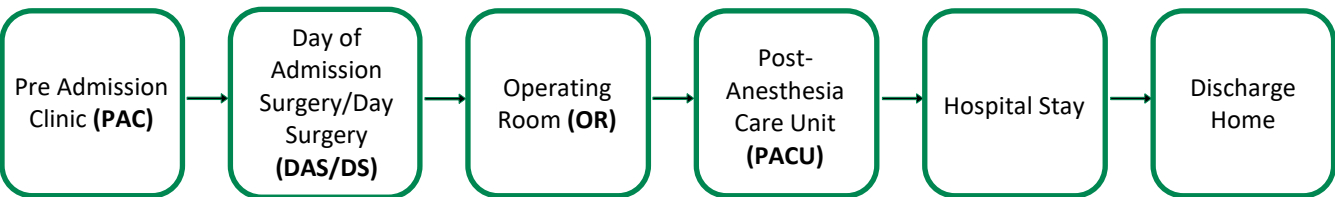
This booklet will help you understand each step of your surgery. It explains how to prepare for surgery, what to expect on the day of surgery, and how to recover afterward. Bring this booklet with you to all your appointments and on the day of your surgery.

Getting ready for surgery can feel stressful or confusing. To help you, choose a support person, such as a family member, friend, or caregiver. They can help you before your surgery, while you are in the hospital, and during your recovery at home. Read this booklet together so you both know what to expect.

Our team is here to support you every step of the way. If you have any questions or concerns about your care, please ask. We are here to help.

If you have any questions about your upcoming surgery, please call the Pre Admission Clinic Charge Nurse at 306-766-0408.

Steps of Surgery



Preparing For Your Surgery

Being as healthy as you can before surgery helps your body heal faster. It can also lower your risk of problems after surgery. By taking part in getting ready for your surgery, you can help make your recovery easier and faster.

Quit Smoking and Vaping

Smoking and vaping before surgery can increase your chance of breathing problems, slower healing, and a longer recovery. For the best results, try to quit smoking or vaping at least 4 weeks before your surgery. If you cannot quit, do not smoke or vape for at least 24 hours before your surgery.

If you are interested in quitting, support options are available.

→ **Smoker's Helpline:** 1-877-513-5333 | smokershelpline.ca

→ **Talk Tobacco:** 1-833-998-8255 | <https://smokershelpline.ca/talktobacco/home>

Get Active

Staying active before surgery can reduce pain, improve strength, preserve muscle, and support your heart. It also leads to fewer complications and better outcomes after surgery. If you can, try to aim for:

- **20 to 30 minutes of moderate activity** (example, walking, cycling) **3 to 4 times a week.**
- **Strength training** (example, bodyweight, resistance bands) **2 times a week.**

All movement matters; even light activity is better than none. If you have physical limitations, do what you can. Small steps still make a difference.

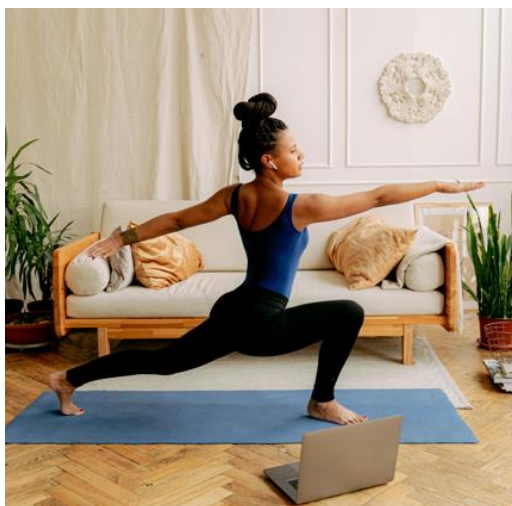


Figure 1. [Woman stretching](#). [1] Photo by Antoni Shkraba from Pexels

Managing Your Iron Levels

Iron helps your body make hemoglobin. Hemoglobin carries oxygen in your blood. Oxygen helps your body heal and stay strong.

When your hemoglobin is low, your iron levels will be checked. Low iron levels can make it harder for your body to heal. Maintaining healthy iron levels before surgery helps support a good hemoglobin level. This can reduce the likelihood of needing a blood transfusion during or after surgery.

Your healthcare provider may suggest taking oral iron supplements or receiving iron through an infusion (given through a vein) to help increase your hemoglobin before surgery.

Even if medication is not required, you can help support your iron levels by eating iron-rich foods such as:

- Lean meat
- Legumes (such as beans and lentils)
- Iron-fortified cereals and whole grains
- Nuts
- Broccoli and spinach

Eating Well Before Surgery: Helping Your Body Heal

Good nutrition helps your body stay strong, heal faster and reduce the risk of complications after surgery.

Follow a Balanced Diet

- Eat according to Canada's Food Guide.

Eat Regularly

- Aim for 3 meals a day or 5 smaller meals.
- Avoid skipping meals.

Include Protein at Every Meal

- Lean meat, chicken, fish, eggs, beans, tofu, nuts, dairy (cheese, yogurt, cottage cheese).
- Protein supports healing and tissue repair.

Consider High-Protein Drinks

- Drinks like Boost®, Ensure®, or store-brand options can help meet protein and calorie needs.

Eat a Variety of Foods

- Include vegetables, fruits, and whole grains for vitamins, minerals, and fibre.

Stay Hydrated

- Drink 6 to 8 glasses of fluid daily, preferably water.

Be Mindful of Food Choices

- Limit processed foods and foods high in fat, sugar, and salt.
- Choose healthier options when eating out and if you can, look at the menu ahead of time to help you make healthy choices.

Important Information for Your Surgeon

Taking an active role in your health before surgery can help you recover more easily. Make sure your surgeon knows about any health conditions you have, such as **diabetes, allergies, breathing problems, heart conditions, or obesity**. These health conditions can affect your surgery and recovery.

Taking care of health conditions before surgery can help you recover more easily. Make sure conditions like diabetes and high blood pressure are under control before your surgery.

You can help by:

- Seeing your primary care provider regularly.
- Monitoring your health at home (for example, checking your blood sugar or blood pressure at home, if advised).
- Taking your medications exactly as prescribed.

Things to Arrange in Advance:

- Ask a support person/ personal coach to help you after your surgery. You may need help for a short time or longer, while you recover. They can help care for you and may also help look after others, such as your children, family members, or pets.
- Ask a support person to drive you to the hospital, be with you during teaching sessions, and take you home after you are discharged.
- Groceries for 1 week. Plan to have foods that are easy to prepare and eat.
- You may need help with laundry, cleaning, cooking, yard work, etc.
- If you need any equipment after you leave the hospital (such as crutches, a walker, or other aids), you will be told before your surgery what you need and where to get it.

If you are a First Nations or Inuit person living in Saskatchewan, you may be able to get help paying for travel, meals, and a place to stay when healthcare services are not available in your community. This program is called Non-Insured Health Benefits (NIHB). To find out if you qualify, call 1-866-885-3933.

Ask your surgeon when you can:

- Drive
- Go back to work
- Go back to usual activities, such as cleaning, exercise, or laundry
- Travel long distances, including air travel

Planning ahead, speaking up about your needs, and taking care of your health can help you have the best possible recovery!

Preparing Your Child for Surgery

Surgery and a hospital stay can feel scary for a child. Being prepared can make the experience easier. Your calm and supportive presence can help your child feel safe and less anxious. Learning what to expect before, during, and after surgery can help both of you feel more confident and prepared.

What to Bring:

- Saskatchewan Health Services Card
- Loose, comfy clothing for your child
- A comfort item (toy, blanket, or pacifier)
- A familiar bottle or sippy cup (hospital bottles are available)
- Favourite toys, books or devices (Wi-Fi available)

Resources

If your child stays overnight after surgery, they will be admitted to a pediatric unit. The healthcare team will provide information about the unit and what to expect during your child's stay.

To help talk to your child about surgery, we recommend visiting www.aboutkidshealth.ca: Use the search bar to find the following resources:

- Preparing for Surgery and Hospitalization
- How to Prepare as a Caregiver for Your Child's Surgery
- Siblings in the Hospital: Helping Your Children Cope

Pediatric Video Tour:

This short video shows what your child may see and experience during their hospital visit. Watching it can help your child feel less worried by knowing what to expect.

You can find the video on:

YouTube:

<https://www.youtube.com/watch?v=tRBhuXINI30>

Internet Search: "RQHR Pediatric Surgery Tour-YouTube."



Figure 2. [Child playing with stuffed toy](#). [2] Photo by Derek Finch from Pexels

Pre Admission Clinic (PAC)

The Pre Admission Clinic (PAC) helps patients get ready for surgery. The clinic provides information, answers questions, and helps make sure you are ready for your surgery. This helps support a safe and smooth surgery experience.

Not all patients need a PAC appointment. It depends on your health, your surgery and your surgeon's plan. If you do need a PAC appointment, it will happen before surgery. It may be in-person, virtually (video) or by telephone. If you need a PAC appointment, a team member will call you with the appointment details. Need a translator? Let the team know when they call with your PAC appointment details. They can arrange one for your appointment.

Going to your PAC appointment is an important part of getting ready for surgery. The team will check your health and talk with you about any concerns. This helps lower the chance of problems and makes sure you are ready for your surgery, hospital stay, and recovery.

At your PAC appointment, the team will:

- Ask about your health history and check your vital signs, such as your pulse, blood pressure, temperature, oxygen level, and breathing.
- Give you instructions to help you get ready for surgery, including how to take your medications.
- Explain what to expect on the day of your surgery.
- Arrange any extra appointments or assessments you may need (example, Internal Medicine, Anesthesiology, Physiotherapy, Speech Language Pathology, or Ostomy care).
- Complete blood tests and a heart test (ECG), if needed.

Appointments typically take 1 to 3 hours. Bring your support person/ personal coach with you!

Before Your PAC Appointment:

- Complete any blood tests, scans, or other tests as soon as you can, unless your healthcare provider tells you otherwise.
- Attend any specialist appointments you are asked to go to.

What To Bring to Your PAC Appointment

- All your medicines, including prescription medicines, vitamins, herbal or traditional medicines, and supplements. Bring them in their original containers or bubble packs.
- A support person/ personal coach and/or translator.
- A list of your medical history including any past surgeries.

Pre Admission Clinic
Suite #102 Surgical Assessment
Centre
1621 Albert Street
Regina, SK
306-766-0408
On-site paid parking in effect.

Medication Instructions Before Surgery

- Your healthcare provider will tell you which medications to stop taking before surgery.
- If no one tells you to stop taking a medicine, take it as you normally do.
- You will get a call from the Day Surgery Unit the day before your surgery. They will tell you what you need to do on the morning of your surgery.
- Some medicines may need to be stopped before surgery. This is especially important for medicines that can increase bleeding, such as blood thinners and antiplatelet medications.
- Do not start any new vitamins, herbal products, minerals, or supplements before surgery.
- Bring all of your medicines with you in their original bottles, including prescription medications, over-the-counter medications, vitamins, minerals, herbal medicines and supplements to the hospital on the day of surgery.

If Your Surgery is Postponed: Start taking your medicine(s) again, unless your healthcare provider tells you not to.

Note: Sometimes unexpected things happen on the day of surgery. This may cause your surgery to be delayed or cancelled. For example, there may be an emergency surgery or no hospital beds available. Make sure you have someone who can take you home if this happens. The operating room scheduling team will work to book your surgery again as soon as possible.

What if Your Health Changes Before Surgery?

If you do not feel well or if your health changes, call your surgeon's office as soon as possible. Please call at least 24 hours before your surgery.

Some important changes could be:

- A new cough or a cough that is getting worse
- Fever or chills (temperature higher than 38°C or 100.4°F)
- Diarrhea
- Shortness of breath (worse than your usual)
- Severe headache (worse than your usual)
- Muscle aches
- Extreme fatigue or feeling very tired
- Vomiting

If You Must Cancel Your Surgery:

Monday to Friday from 7:30 a.m. to 4:00 p.m.

Call your surgeon's office or the Surgical Waitlist Inquiry 1-866-622-0222.

For immediate cancellation of the next day's surgery (after 4:00 p.m. to 7:30 a.m.) or anytime on weekends:

Leave a message at your surgical facility:

- **Pasqua Hospital:** 306-766-2738
- **Regina General Hospital:** 306-766-4526
- **Regina Surgical Centre:** 306-522-3282

Regina Surgical Facilities

Surgical Centre Incorporated (SCI)

The Saskatchewan Health Authority (SHA) works with a surgical clinic in Regina to help some patients get surgery sooner. If your surgeon decides that your surgery is low risk, you may be referred to this clinic for your surgery.

SCI has 3 parking stalls reserved for patient drop-off and pick-up (maximum 15 minutes). Street parking is available for a maximum of 2 hours.

SCI asks most patients (except children) to have someone drop them off for surgery. When you are ready to go home, SCI staff will call your support person about 15 minutes before you need to be picked up.

SCI

Located at:

2060 Halifax Street

Regina, Saskatchewan

Phone: 306-522-3282

Pasqua Hospital

Located at:

4101 Dewdney Avenue

Regina, Saskatchewan

DAS/Day Surgery Unit Phone:

306-766-2738

Regina General Hospital

Located at:

1440 14th Avenue

Regina, Saskatchewan

DAS/Day Surgery Unit Phone:

306-766-4526

Pasqua and Regina General Hospital Parking

Paid Parking is in effect at both the Regina General Hospital and the Pasqua Hospital.

- Pay stations are located inside hospital entrances.
- Enter your license plate, then pay by coin, debit, credit (Visa, Mastercard, American Express), or Apple/Android Pay. No need to return to your vehicle.

Hospital Visitor Information

Protecting Your Privacy

The Saskatchewan Health Authority (SHA) knows that information about your health is private. We work hard to keep it safe. We collect information about your health so we can give you the care and services you need.

The SHA only shares information about your health with the people who need it to care for you. We keep your information safe and secure. When we no longer need your information, we dispose of it in a safe way.

Open Family Presence

The Saskatchewan Health Authority (SHA) believes that family and loved ones are an important part of your care. Their support can help you feel more comfortable and supported while you heal.

Visitor Hours

- Visiting times may be different depending on where you are staying. Please ask staff when visitors can come.
- Visitors are an important part of recovery, but your body also needs time to rest and heal after surgery.
- Some units have a daily rest period. Visitors are asked not to visit during these times so you can rest and heal.
- Always check with nursing staff before bringing any flowers or food into the hospital. Some units may have rules for safety and/or health reasons.

Patient Safety

- Your safety is very important to us. Patients, visitors and hospital staff all help prevent the spread of infections in the hospital.
- Everyone must clean their hands with soap and water or hand sanitizer before and after entering the hospital and before and after visiting a patient.
- Visitors should stay home if they are sick or have been sick in the last 24 hours, including any of the following: new or worsening cough, fever or chills, diarrhea, shortness of breath (worse than usual), severe headache (worse than usual), muscle aches, extreme fatigue or tiredness, or vomiting.

Client Concerns Office (8:00am to 4:00pm)

Main Floor 2110 Hamilton Street Regina,
Saskatchewan S4P 1A5

Telephone: 306-766-3232

Toll Free: 1-866-411-7272

Email: ReginaClientConcerns@saskhealthauthority.ca

Spiritual Care

While you are in the hospital, you can practice your faith and beliefs. Your healthcare team respects your privacy and supports people of all faiths and backgrounds.

Spiritual Care can help patients and families during difficult times. It can provide comfort, support, and someone to talk to. It may help if you feel sad, lonely, angry, worried, or scared, or if you are having problems with family or friends.

To request Spiritual Care, please call the hospital switchboard.

Pasqua Hospital: 306-766-2222

Regina General Hospital: 306-766-4444

First Nations and Métis Health Services

The First Nations and Métis Health team supports the physical, emotional, mental, and spiritual well-being of Indigenous peoples in Saskatchewan. They offer support to any patient or family who requests their services.

They help patients and families during their hospital stay, from the time they arrive until they go home. They can help connect people with support and cultural services.

Healing Centres are in the Regina General Hospital and Pasqua Hospital within First Nations and Métis Health Services. Healing Centres provide traditional and spiritual care for anyone who would like it.

Services are available Monday to Friday, 8:00 a.m. to 4:30 p.m.

For support, please contact:

- Pasqua Hospital and Wasakaw Pisim Healing Centre: 306-766-2232
- Regina General Hospital and Wasakaw Pisim Healing Centre: 306-766-4155

Hair Cutting

The SHA provides resources and education to SHA team members to support culturally and spiritually responsive care. The SHA staff recognize the importance of hair for many Indigenous peoples.

It is rare that hair needs to be cut for surgery. However, in some emergency situations or head and neck surgeries, hair cutting may be needed.

The SHA Indigenous Hair Cutting Policy outlines the steps that SHA employees must follow to get consent whenever possible, and guides care when hair needs to be cut in an emergency.

If you have any concerns about hair cutting, please speak with your healthcare team.

Advance Care Planning

Advance care planning helps make sure your healthcare wishes are known if you cannot speak for yourself. It is an ongoing process of thinking about, talking about, and sharing your wishes for future care. It also includes appointing a proxy, sharing your wishes with your family and healthcare team, and writing them down.

As long as you are able to make medical decisions, you can change your Healthcare Directive and proxy at any time.

In Saskatchewan, before surgery, if you are at least 16 years of age and can make health care decisions, you will be asked if you have a Healthcare Directive or Proxy.

1. Proxy (Substitute Decision Maker)

- A proxy is an adult you choose to make medical decisions for you if you cannot.
- This person is called your substitute decision maker.
- A proxy is someone you choose to make decisions for you if you cannot make them yourself. To do this, you must sign and date a written document naming that person.
- If you do not choose a proxy in Saskatchewan, your nearest relative will be chosen. If this is not who you would prefer, it is best to name a proxy yourself.
- Choose someone you trust, who is willing and able to help and who can make decisions during stressful times.
- You will be asked who your substitute decision maker is on the day of surgery (your legal nearest relative as outlined in Saskatchewan Legislation or the proxy you legally appointed in writing).
- For more information, visit the Advance Care Planning Website and review [What is a Healthcare Substitute Decision Maker \(CS-PIER-0001\)](#).

2. Healthcare Directive (HCD) (Your Written Wishes)

- A healthcare directive is a written document that explains your wishes for medical care.
- It helps guide your care team and your proxy if you cannot make decisions.
- If you decide to create a Healthcare Directive, [ABCs of ACP-Guide for Advance Care Planning \(ACP\) with Proxy and General Healthcare Directive Templates \(CS-PIER-0339\)](#) is a guide that has been developed to assist you.



Advance Care Planning Website

<https://www.saskhealthauthority.ca/your-health/conditions-diseases-services/advance-care-planning>

SHA Advance Care Planning Program

Available Monday to Friday 8:00 a.m. to 4:30 p.m.

Phone: 306-766-5922 or 1-833-544-2255

Email: advancecareplanningprgm@saskhealthauthority.ca

The Day Before Your Surgery

A Day Surgery nurse will call you the day before your surgery. They will tell you what time your surgery is, talk to you about your medicines, and answer any last questions.

Eating or Drinking Instructions: Adult/Child

Follow the instructions below carefully. If you do not follow them, your surgery may need to be moved to a different day to keep you safe.

- **DO NOT** drink any alcohol or use recreational or illicit drugs for 24 hours before your surgery. These can change how your body reacts to certain medicines.
- **DO NOT** smoke or vape for at least 24 hours before surgery.
- **DO NOT** eat any solid food after midnight the night before your surgery, unless your healthcare provider tells you otherwise. This includes gum, mints, candy, throat lozenges, and chewing tobacco or nicotine products.

Fasting Instructions Before Surgery

Adults Fasting Instructions Before Surgery

You may have clear fluids up to 2 hours before your surgery unless advised otherwise.

Children's Fasting Instructions Before Surgery

After midnight, the only things they can have are:

Infant formula, non-human milk, or expressed breast milk fortified with additions	up to 6 hours prior to surgery time
Breast milk	up to 4 hours prior to surgery time
Clear fluids	up to 1 hour prior to surgery time

Acceptable Clear Fluids: (NO cream/Milk or whiteners)		
• Water • Apple Juice • Black Coffee • Clear Tea	• <u>White</u> Cranberry Juice • <u>White</u> Grape Juice • Soup Broth (bouillon or consommé) • Carbonated Clear Soda	• Sports Drinks • Crystal Fruit Drinks • Popsicles • Jello/gelatin desserts

Bowel Preparation:

- Some surgeries require medicine to help empty your bowels before surgery. If your doctor prescribes this medicine, pick it up from your pharmacy (or the pharmacy that you were instructed to use) and take as directed.
- Try to have a bowel movement the day before or the morning of your surgery.

Bathing and Showering Instructions:

- Have a bath or shower and shampoo your hair with unscented products the night before or morning of surgery.
- **DO NOT** shave, wax or clip any hair around the surgical site for **seven days** before surgery.
- **DO NOT** use scented personal care products (example, deodorant, aftershave lotion, colognes or shampoos) the night before or morning of surgery.

The Morning of Surgery

- **DO NOT** use mints, gum, candy, throat lozenges and/or chewing tobacco the morning of surgery.
- You may brush your teeth and/or use mouthwash as long as you do not swallow it.
- Follow the instructions you were given about your medicines before surgery. If you are told to take medicine on the morning of your surgery, take it with only a small sip of water.
- Remove makeup, jewelry and body piercings before coming to the hospital.

When you come to the hospital, bring:

- This booklet and a pen.
- Your Saskatchewan Health Services card.
- Your current prescription medications in their original container or bubble pack and a list of any herbals, vitamins, and over-the-counter medications.
- Hearing aids, dentures and glasses (with cases) if you have them.
- Any special equipment or aids you may use at home such as a CPAP machine, crutches, walker, wheelchair, slings or braces (label them with your name and address).
- Loose-fitting clothing to go home in.
- Your Healthcare Directive and Proxy Form (if you have completed them).

In the Hospital (Regina General Hospital and Pasqua Hospital)

DS (Day Surgery) – Going home the same day as surgery

- Arrive at your surgery location 2 hours before surgery, unless told otherwise.
- Register in Admitting.
- After registering, go to the Day Surgery unit on the 2nd floor.
- You will receive a plastic bag for your belongings. Your belongings will be kept at your bedside.

DAS (Day of Admission Surgery) – Staying in hospital after surgery

- Arrive at your surgery location 2 hours before your surgery, unless told otherwise.
- You are pre-registered; go directly to the DAS/Day Surgery Unit on the 2nd floor.
- You will receive a plastic bag for your belongings. Your belongings will be taken to your hospital room after the Post Anesthesia Care Unit (PACU).

In the DAS/DS Unit

- You will change into a hospital gown.
- Your nurse will go over your health history and medicines, including doses, last time they were taken, allergies, and your last food and drink.
- Your healthcare directive, substitute decision maker, and/or proxy will be discussed.
- Your vital signs will be checked.
- Hair in the surgical area may be clipped if needed, with your consent.
- An intravenous (IV) line will be started in your arm.
- Your surgeon may mark the surgery site.
- You may be offered a warm blanket or warming device to help you stay comfortable. If you feel cold at any time, feel free to ask for a blanket.
- You will be asked to empty your bladder before surgery.
- You will have a chance to ask your healthcare team any questions about your surgery and recovery.
- When everything is ready, a porter or nurse will take you to the operating room. Family and friends are not allowed in the operating room.

In the Operating Room (OR)

When You Arrive in the OR

- OR staff will ask you questions as part of a safety checklist. Some questions may be repeated for safety.
- You can ask your surgical team questions at any time.
- You will move into the operating theatre and onto the operating room bed.
- A nurse will place sticky pads (electrodes) on your chest to monitor your heart.
- A blood pressure cuff will be placed on your arm, and a clip on your finger will monitor your oxygen level.
- The operating room may feel cool. Let your team know if you would like a warm blanket.
- You may be given antibiotics and a blood thinner to help reduce the risk of infection and blood clots.

Types of Anesthesia and Pain Control

There are different types of anesthesia and pain control methods used during and after surgery. Your anesthesiologist will determine the best options for your procedure. These medications are used to prevent pain during surgery and may also help manage pain after surgery. Tell your healthcare team if you are having pain that is more than 4 on a scale of 0 to 10. Refer to page 19 to learn about the pain scale.

General Anesthesia

- A mix of medications given to you through your intravenous (IV) and a mask.
- This causes you to go to “sleep” and not feel any pain.
- Before you get medicine through your IV, a mask will be placed over your nose and mouth to help you breathe oxygen.
- Once you are “sleeping,” your anesthesiologist helps you breathe using a tube or mask.

Spinal Anesthesia

- Medication is put into your spinal fluid to make your legs feel numb.
- You do not feel pain and cannot move your legs until after the procedure.
- You may be awake or given medication to help you relax.
- After surgery, you will stay in bed until the feeling and strength return to your legs and lower body.
- Tell your nurse right away if you have a headache when sitting or standing, trouble emptying your bladder, a fever, or weakness in your legs. If this happens after you go home, contact your healthcare team, call 811, or go to the nearest Urgent Care Centre or Emergency Department.

Epidural Anesthesia

- You may have a small tube placed in your back called an epidural.
- This may be used in combination with general anesthetics.
- Medication is delivered through this tube to provide **anesthesia and/or pain control** during and after surgery.
- Tell your nurse right away if you have a headache when sitting or standing, trouble emptying your bladder, a fever, or weakness in your legs. If this happens after you go home, contact your healthcare team, call 811, or go to the nearest Urgent Care Centre or Emergency Department.

Nerve Block / Local Anesthesia

- Your anesthesiologist or surgeon may inject local anesthetic or do a nerve block near the surgical area.
- This may be done in the operating room before or during your anesthetic.
- It helps control pain during and after surgery as the medicine slowly wears off.

Patient Controlled Analgesia (PCA)

- You may have a medication pump connected to your IV.
- When you press a hand-held button, the pump gives you a safe amount of pain medicine.
- This method is used after surgery to help control ongoing pain.

After Your Surgery

Post Anesthesia Care Unit (PACU)

- After your surgery, you will move to the PACU to recover from the anesthetic. The length of your stay depends on your recovery needs.
- The PACU is a large recovery area where other patients may be recovering at the same time. It can be noisy, but your privacy will always be respected.
- You may receive extra oxygen if you need help breathing.
- A nurse will closely monitor you, including your breathing, vital signs, and surgery site.
- Your pain and comfort will be checked often. If needed, you may be given medicine to help with pain or feeling sick to your stomach (nausea).
- If you feel cold at any time, feel free to ask for a blanket.

Pain

- The goal is to keep your pain under control so you can do the things you need to help your recovery.
- Pain after surgery is normal and expected.
- There are many ways to help with pain after surgery. Ice, rest, and keeping the area raised can help. Doing something you enjoy can also take your mind off the pain. Pain medicine, such as Tylenol®, Advil® (if your healthcare team says it is safe), or prescribed medicine may also help. Always follow your surgical team's instructions.
- Managing your pain is important to your recovery. When your pain is controlled, you should find it easier to take deep breaths, move your body, eat, sleep and feel better emotionally and mentally.
- Everyone feels pain differently. Pain is usually the worst during the first 2 to 3 days after surgery. After that, it should slowly get better.

Pain Scale

- After surgery, your nurse will ask you to rate your pain on a scale from 0 to 10. Zero means no pain and 10 is pain that takes your breath away or makes you unable to move or speak.
- The goal is to keep your pain at a manageable level, usually 4 out of 10 or less. This can help you rest, move around, and recover.
- Pain medicine works best before pain becomes severe. Let your nurse know as soon as you start to feel discomfort.

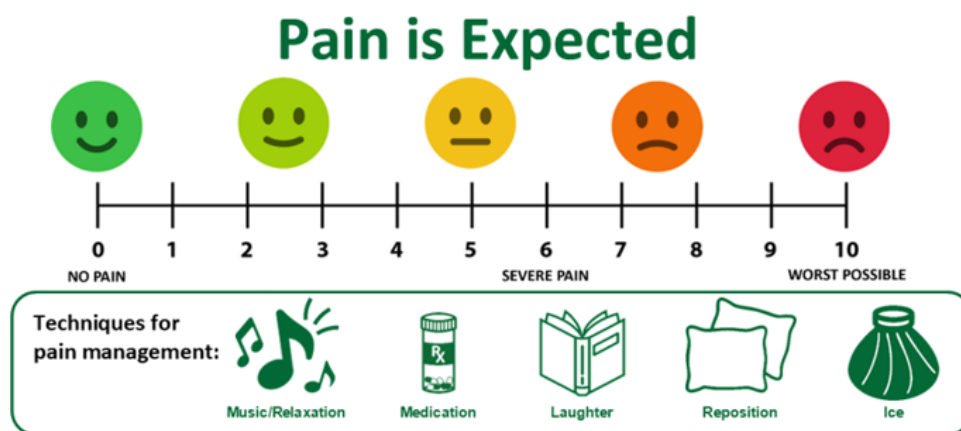


Figure 3. Pain scale. [3] Image from Saskatchewan Health Authority.

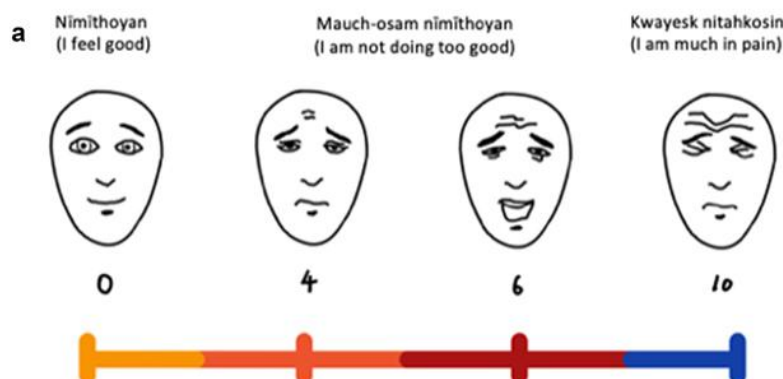


Figure 4. Pain scale with English and Cree descriptions. [4] Image from Stacy Logo. Permissions granted May 26, 2026

After Surgery: Recovery in Hospital

Day Surgery (DS)

- After you have recovered in the Post-Anesthesia Care Unit (PACU), you will be moved back to the DS area.
- You will stay in DS until you are ready to be discharged home the same day.
- Your nurse will check on you often. They will monitor your breathing, pulse, blood pressure, and pain level. You will have an IV until you are drinking well. In some cases, the IV may stay in place so you can receive medicine.
- After surgery, you will start with small amounts of food and drinks. What you can have will depend on the type of surgery you have. Check with your nurse or dietitian before eating or drinking anything brought by family or friends.
- You will start by sitting up and walking with help, then progress to walking more on your own. Do not get up without help from your nurse until you are steady on your feet.

DAS (Day of Admission Surgery)

- After you recover in the PACU, you will be moved to a hospital room. You will stay there overnight until you are ready to go home.
- Your nurse will check on you often. They will monitor your vital signs and pain level.
- You will have an IV until you are eating and drinking well. In some cases, it may remain in place to give medications.
- After surgery, you will start with small amounts of food and drinks. What you can have will depend on the type of surgery you have. Check with your nurse or dietitian before eating or drinking anything brought by family or friends.
- You will start by sitting up and walking with help, then progress to walking more on your own. Do not get up without help from your nurse until you are steady on your feet.

After Surgery Exercises

- Your healthcare team will remind you to do your after-surgery exercises. They help you recover and can help prevent problems.
- Try to do these exercises every 30 minutes when you are awake.

How to breathe deeply:

- Inhale as deeply as you can.
- Hold the breath for two seconds.
- Exhale completely.
- Repeat three times.

How to cough:

- Inhale deeply.
- Cough.
- The cough should come from your abdomen, not from your throat.
- Hold a pillow on your abdomen for support.



Figure 5. [Breathing deeply](#).
[5] Photo by Anastasia Shuraeva from Pexels

How to exercise your feet and legs:

Push your toes toward the end of the bed.



Pull your toes toward the head of your bed, then relax.



Circle each ankle to the right, then to the left.



Figures 6, 7, 8. [Foot and ankle exercises](#). [6, 7, 8] Licensed under [CC BY SA SA 4.0](#).

Preventing Blood Clots After Surgery

Surgery and being less active can increase your risk of a blood clot. Your healthcare team will check your risk and decide if you need extra treatment.

To help prevent blood clots:

- Move your feet and legs often.
- Do your exercises as directed.
- Walk when it is safe to do so.
- Take blood-thinning medicine (if prescribed).
- Use compression stockings if recommended.

Know the Warning Signs

Contact your healthcare team if you have **new pain, swelling, redness, or warmth** in an arm or leg.

Get emergency help for:

- Coughing up blood
- Trouble breathing or sudden shortness of breath
- Chest pain, especially when breathing

Before You Leave the Hospital - What to Know

Before you go home, your healthcare team will explain what you need to know to recover safely. Use this checklist to make sure you are ready to leave the hospital.

☐ Support person/ personal coach assistance

- I have a support person ready to drive me home from the hospital.
- I have a support person who can help me at home if I need it.

☐ Medications

- I know which medications to take.
- I understand how much to take and when to take them.

☐ Nutrition

- I know which foods and drinks will help me heal and recover.

☐ Incision and Bandage Care

- I know how to care for my incision and dressings.
- I know when and how to change my bandages, if needed.

☐ Supplies

- I know what supplies I will need at home, such as bandages, walking aids, or other equipment.
- I understand that I may need to buy some items, such as crutches, slings, or braces.

☐ Resuming Activities

- I know when it is safe to drive, exercise, lift heavy things, and do chores at home.

☐ Warning Signs

- I know what symptoms to watch for that may indicate a problem.
- I know who to contact if I have concerns.

☐ Follow-Up Appointment

- I know the date and time of my follow-up appointment.
- I know where to go for my appointment.

If you have any questions or concerns, ask your healthcare team before you go home.

Important Reminders:

- Do not drive for 24 hours after surgery, or longer if your surgeon tells you to.
- Do **not** drink alcohol, use drugs, drive, or use heavy equipment for 24 hours after surgery. Do not do these things while you are taking narcotic pain medicine.

Discharge Home After Day Surgery (DS)

After your surgery, your healthcare team will make sure you are ready to go home safely. It is helpful to know what to expect. **You are ready to go home when:**

- ☐ You do not feel sick to your stomach (nauseous) and are not throwing up (vomiting).
- ☐ You can drink fluids without feeling sick.
- ☐ You are passing gas and pee without any problems.
- ☐ You are steady on your feet and able to walk safely (with or without mobility aids).
- ☐ You can do daily activities such as getting dressed, using the bathroom, and bathing. If you need help, you have someone at home who can help you.
- ☐ Your home is ready for when you return. You have food prepared and any equipment you need (example, walker or raised toilet seat).
- ☐ You have a capable adult to stay with you for at least 24 hours or longer after surgery.
- ☐ You have someone to drive you home.
- ☐ You confirmed the date, time, and location of your follow-up visit with your surgeon.

Discharge Home After a DAS (Day of Admission Surgery)

After your surgery, your healthcare team will make sure you are ready to go home safely. It is helpful to know what to expect. **You are ready to go home when:**

- ☐ You do not feel sick to your stomach (nauseous) and are not throwing up (vomiting).
- ☐ You can drink fluids and eat food without feeling sick.
- ☐ You are passing gas and pee without any problems.
- ☐ You are steady on your feet and able to walk safely (with or without mobility aids).
- ☐ You can do daily activities such as getting dressed, using the bathroom, and bathing. If you need help, you have someone at home who can help you.
- ☐ Your home is ready for when you return. You have food prepared and any equipment you need (example, walker or raised toilet seat).
- ☐ You have someone to drive you home.

At Home

Dressing and Incision Care

- Before you go home, your healthcare team will explain how to care for your incision, if you have one.
- It is important to follow these instructions to help your body heal. They will also help you know when to call your healthcare team or get medical help.
- If you are not sure if your symptoms are serious, call your healthcare team or 811. They can help answer your questions and tell you what to do.

Managing Constipation

- Constipation (trouble having a bowel movement) is common after surgery. It can happen because of medicines, changes in what you eat and drink and being less active than normal.
- To help with constipation, drink more water, eat foods with fibre, and stay as active as you can.
- You can buy constipation medicine without a prescription. If you are not sure which one to choose, ask a pharmacist for help.

If you have a problem after surgery and cannot reach your healthcare provider, call 811. If you need help right away, go to an Urgent Care Centre or Emergency Department.

Activity Once Home

- Try to walk several times each day. As you recover, slowly increase how far you walk. Keep doing this until you are back to your normal activities, unless your surgeon tells you otherwise.
- Do not do too much too soon. Listen to your body and rest when you need to. Any amount of activity can help.
- Do not lift more than 10 pounds for 6 weeks after surgery unless your surgeon tells you otherwise.
- Once you are pain free, you can return to most normal activities, including sexual activity. Unless your surgeon tells you otherwise.
- Ask family and friends for help with transportation, meals, groceries, laundry, housework, and yard work while you recover.

Healthy Eating for Recovery

After surgery, you may need to eat certain foods. Follow your healthcare team's instructions. Eating well helps your body heal, even if you do not feel like eating.

- Eat regular meals and do not skip meals.
- Aim for 5 small meals per day instead of 3 large meals.
- Include protein-rich foods at each meal and snack (example, lean meat, fish, poultry, milk, cheese, yogurt, eggs, beans, nuts, nut butters, and tofu).
- Choose different foods from all food groups: vegetables and fruit, grain products, protein foods, and milk or alternatives.
- Stay well hydrated by drinking 6 to 8 glasses (1500 to 2000 mL) of fluid daily. Water is the best choice.
- Protein drinks, such as Ensure®, Boost®, or store-brand options, can help if you are not eating enough. Drink them along with your meals and snacks, not instead of them. They can help your body get the energy and protein it needs to heal after surgery.

Snacking between meals can help you meet your nutrition needs after surgery. Choose healthy, high-protein snacks such as:

- Peanut butter or cheese with crackers or fruit (example, banana or apple slices)
- Muffins made with seeds, nuts, and dried fruit
- Yogurt or pudding (Greek yogurt or add milk powder for extra protein)
- Hard-boiled eggs
- Hummus with crackers or carrot sticks
- Trail mix with nuts, seeds, and dried fruit
- Smoothies or milkshakes made with fruit and yogurt



Figure 9. [Protein bowl](#). [9] Photo by Nguyen, A from Unsplash

Medications and Pain Management After Surgery at Home

- It is important to stay ahead of your pain. You can use medications from your local pharmacy, like acetaminophen (Tylenol®) and ibuprofen (Advil® or Motrin®), to help manage pain after surgery. These medications work in different ways and can be taken together, following the instructions on the medication package. Ask your doctor if it is safe for you to use them and have them ready at home before you are discharged.
- Good pain control is essential.
- You may receive a prescription for opioid pain medication for breakthrough pain. Opioids are strong pain medications often known as narcotics. Breakthrough pain means pain that is still present even after taking over-the-counter medications and utilizing “non-medication” pain management techniques.
- Even if you are using an opioid for breakthrough pain, you should continue to use over-the-counter medications. Take as prescribed.
- As you continue to recover, your pain should get better day by day. Opioids should be the first pain medication that you stop using or use less as pain improves. Consult your healthcare provider or pharmacist on the best way to reduce your dose.

Safety with Opioid Pain Medication

If you are given an opioid for pain, it can be safe and helpful when used the right way. Take it only as prescribed. Do not mix it with alcohol or other medicines that make you sleepy, like lorazepam, diazepam, muscle relaxants, or sleep aids.

Some people are “opioid naive.” This means they have not taken opioids before or not recently. These patients may feel stronger effects. You should not drive or do tasks that need full attention while taking opioids.

Even short-term use of opioids has risks. These include dependence, tolerance, misuse, addiction, and overdose. Opioids can slow or stop breathing.

Teach your family or support person the signs of an opioid overdose:

- Cannot wake the person (even when shaken or shouted at)
- Slowed or stopped breathing
- Vomiting with gurgling sounds
- Blue or purple lips or fingernails

Naloxone (also called Narcan) is a medication that can reverse an opioid overdose for a short time. Take home naloxone kits and training are available for anyone using opioids. They are available at hospitals and pharmacies in Saskatchewan. Ask your care team for more information.

Note: A person who overdoses cannot give naloxone to themselves. Make sure other adults or teens in your home know where it is and how to use it.



Opioids for pain after surgery: Your questions answered



1. Changes?

You have been prescribed an opioid.

Opioids reduce pain but will not take away all your pain. Ask your prescriber about other methods of reducing pain including using ice, stretching, physiotherapy, or non-opioid drugs like acetaminophen or ibuprofen. Know your pain control plan and work closely with your prescriber if your pain does not improve.



2. Continue?

Opioids are usually required for less than 1-2 weeks after surgery.

As you continue to recover from your surgery, your pain should get better day by day. As you get better, you will need less opioids. Consult your doctor or pharmacist about how and when to reduce your dose.



3. Proper Use?

Use the lowest possible dose for the shortest possible time.

Overdose and addiction can occur with opioids. Avoid alcohol and sleeping pills (e.g. benzodiazepines like lorazepam) while taking opioids. Do not drive while taking opioids.



4. Monitor?

Side effects include: sedation, constipation, nausea and dizziness.

Contact your doctor or pharmacist if you have severe dizziness or inability to stay awake.



5. Follow-Up?

Ask your prescriber when your pain should get better.

If your pain is not improving as expected, talk to your healthcare provider.

To find out more, visit: [OpioidStewardship.ca](https://opioidstewardship.ca) and [DeprescribingNetwork.ca](https://deprescribingnetwork.ca)

Figure 10. [Opioid questions answered](#). [10] Image adapted with permissions from ISMP.

It is important to:



Never share your opioid medication with anyone else.



Store your opioid medication in a secure place; out of reach and out of sight of children, teens and pets.



Ask about other options available to treat pain.



Take unused medications back to a pharmacy for safe disposal. Talk with your pharmacist if you have questions. For locations that accept returns: ☎ 1-844-535-8889 🔗 healthsteward.ca

Did you know?



About 16 Canadians are hospitalized each day with opioid poisoning.
— Canadian Institute for Health Information, 2017

Examples of opioids used for pain after surgery:

hydromorphone

morphine

codeine

oxycodone

tramadol

Notes:

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Figure 11. [Opioid questions answered](#). [11] Image adapted with permissions from ISMP.

Resources

Pre Admission Clinic

Phone: 306-766-0408

Address:

Suite #102 Surgical Assessment Centre
1621 Albert Street Regina, SK
On-site paid parking in effect.

Surgical Waitlist

Phone: 306-766-0460

Toll Free Phone: 1-866-622-0222

Website: www.saskatchewan.ca/sasksurgery

First Nations and Métis Health

Regina General Hospital

Phone: 306-766-4155

Address: 1400, 14th Avenue

Monday to Friday 8:00 a.m. -4:30 p.m.

Pasqua Hospital

Phone: 306-766-2232

Address: 4101 Dewdney Avenue

Monday to Friday 8:00 a.m. -4:30 p.m.

HealthLine

Phone: 811

Website: <https://www.saskatchewan.ca/residents/health/accessing-health-care-services/healthline>

Notes

[illegible]



CS-PIER-0377

Healthy People, Healthy Saskatchewan

The Saskatchewan Health Authority works in the spirit of truth and reconciliation, acknowledging Saskatchewan as the traditional territory of First Nations and Métis People.

PIER—Patient Information and Education Resource

OCTOBER 2026



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