Massachusetts General Hospital
Department of Urology
Pre-Operative Information

Enhanced Recovery After Surgery (ERAS) Guidelines for
Radical Cystectomy

Patient Information:

Patient Name: ___________________________________________
Surgical Procedure: _______________________________________
Date of Surgery: _________________________________________

Time of Surgery: You will be contacted by your care coordinator 24-48 hours prior to your surgical date, to notify of your surgical time.

Location: MGH Main Campus, 55 Fruit Street, Boston, MA 02114 Center for Perioperative Care Wang Building, 3rd Floor, Room 309

Your Care Team:

Surgeon: ________________________________________________
Resident: ________________________________________________
PA/NP: __________________________________________________
Care Coordinator: _________________________________________

Telephone: (857) 238-3838

Your pre-admission telephone screening with the anesthesia department is scheduled for: ___/___/___ at __:__. Should you miss this call, please call back (617) 643-2555.
PLEASE NOTIFY YOUR CARE TEAM IMMEDIATELY:

➤ If you are allergic to LATEX
➤ If you are currently taking any anticoagulants (blood thinners). Some common blood thinners include: Coumadin, Eliquis, Xarelto, Lovenox, and Heparin.
  o **You must contact the physician who prescribes your blood thinners to determine whether it is safe for you to hold the medication.**
➤ If you have a heart condition, such as aortic stenosis or an artificial valve.
➤ If you have an artificial joint, such as a hip or knee replacement.
➤ If you have been instructed by your doctor to take antibiotics before going to the dentist.

SEVEN DAYS BEFORE SURGERY: ___/___/___

✓ STOP taking all medications which contain aspirin, unless otherwise noted by your physician.
✓ STOP taking all vitamins, herbal supplements, and fish oil.
✓ STOP taking medications which contain ibuprofen, such as Motrin, Advil, and Nuprin, as well as Aleve, Celebrex, Naproxen, and Vioxx.
✓ You may take only Tylenol.
✓ **If you are prescribed anticoagulants (blood thinners), please be certain to contact the prescribing physician for clearance to hold the medication prior to surgery.**
THREE DAYS BEFORE SURGERY: ___/___/

✓ Dietary changes:
  o Eat meals high in carbohydrates and high in protein, such as pasta and meat.
  o Please hydrate with water, Gatorade, and juice.

TWO DAYS BEFORE SURGERY: ___/___/

✓ Shower with Hibiclens, according to attached document.
✓ Dietary changes:
  o Eat meals high in carbohydrates and high in protein, such as pasta and meat.
  o Please hydrate with water, Gatorade, and juice.

ONE DAY BEFORE SURGERY: ___/___/

✓ Shower with Hibiclens, according to attached document.
✓ Dietary changes:
  o You must adhere to a clear liquid diet today.
  o **No solid foods are permitted today.**
  o Approved clear liquids include:
    ▪ Jello-O (no red Jell-O)
    ▪ Chicken, vegetable, or beef broth
    ▪ Water/ice chips
    ▪ Black tea/coffee (hot or cold, NO milk, cream, or non-daily creamer)
    ▪ Apple, cranberry, or white grape juice
    ▪ Crystal Light/Kool-Aid (no red)
    ▪ Italian ice
    ▪ Gatorade (no red)
    ▪ Clearfast
    ▪ Pedialyte
    ▪ Popsicles (no red)
  o **Please drink two bottles (24 oz total) of Gatorade in the evening prior to midnight.**
  o **Nothing to eat or drink after midnight.**
**SURGICAL DAY: ___/___/___**

- Drink one 12 oz bottle of Gatorade three hours prior to your scheduled surgical time.
- Shower with Hibiclens, according to attached document.
- If you are on insulin **DO NOT TAKE IT**. Bring it with you to the hospital.
- **Do not take** ACE inhibitors (e.g. Captopril, Lisinopril, Quinapril) on the day of surgery.
- **Do not take** angiotensin receptor blockers (e.g. Irbesartan, Valsartan, Losartan) on the day of surgery.
- Please **do** take prescribed beta-blockers (e.g. Atenolol, Metoprolol, Propranolol) on the day of surgery.
- Please **do** take your prescribed extended-release narcotics (e.g. OxyContin) on the day of surgery.
- Do not wear jewelry and do not bring anything valuable to the hospital.
- Report to the MGH Center for Perioperative Care on Wang 3 at least two hours prior to your scheduled surgical time.
- The surgery will last approximately 8 hours.

**AFTER SURGERY:**

- You will remain in the PACU (recovery room) for 2-4 hours following surgery.
- You will be transferred from the PACU to Ellison 6, the inpatient urology unit. Your family may call the Ellison 6 nurses’ station at (617) 724-4610 to speak with your nurse.
- Nurses from the Enterostomal Therapy Department will be consulted during your admission and will meet with you to review the care of your stoma.

*If you have questions:* Please call MGH Urology at **(857) 238-3838**. If a Medical Interpreter is required, please call **(617) 726-6966.**