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VAGINOPLASTY WITHOUT VAGINAL CAVITY

INFORMATION BOOKLET

PART B

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INTRODUCTION PART B

**THIS SECTION CONTAINS INFORMATION ABOUT HOW TO PREPARE FOR YOUR SURGERY.
IT ALSO CONTAINS INFORMATION ON THE COURSE OF YOUR STAY WITH US.**



2 THE MONTHS PRECEDING YOUR SURGERY

2.1 PREOPERATIVE QUESTIONNAIRE

The preoperative questionnaire completed when your file was opened is valid for a six-month period. After this time, for security reasons, you will be asked to fill it out again.

At all times, before your surgery, let us know if:

- you notice a change in your health status;
- you no longer have adequate accommodation for postoperative care (e.g. if you are homeless):
 - > our team will work with you to mobilize the necessary resources;
- you develop a bacterial or viral infection:
 - > ask your attending physician to forward your consultation report to us and to include details about the infection and treatments;
- there are changes with your current medication:
 - > please provide us with an up-to-date list.

2.2 PREOPERATIVE EXAMINATIONS

A resting electrocardiogram (heart electrical activity analysis test) will be required if you are 60 years old and over.

You must provide us with the results at least two months before the date of your surgery. Please note that these test results are valid for a four-month period.

Following analysis by the surgical team, additional examinations may be required. If so, be sure to send us the results as soon as possible to avoid postponement of your surgery.

2.3 PREOPERATIVE MEDICATION

ALLOWED MEDICATION

At all times before your surgery:

- continue to take your antiandrogens (Finasteride, Spironolactone);
- continue to take your antidepressants and antipsychotics;
- you can take acetaminophen (Atasol®, Tylenol®, Paracetamol®, Doliprane®).

MEDICATION THAT SHOULD BE STOPPED

It is your responsibility to determine whether the medications you are taking contain any of the products listed below. If in doubt, consult your physician or pharmacist.

3 months before your surgery, stop taking:

- oral retinoids (Accutane®).

3 weeks before your surgery, stop taking:

- feminizing hormones such as estrogen, progesterone, and cyproterone acetate (Androcur®).

2 weeks before your surgery, stop taking:

- natural health products;
- homeopathic products;
- vitamins, supplements et minerals;
- products containing garlic (allicin).

The consumption of fresh/raw or cooked garlic is not recommended.

10 days before your surgery, stop taking:

- acetylsalicylic acid (Aspirine® ou AAS) and any other products containing acetylsalicylic acid;
- anti-inflammatories (unless advised otherwise by your physician or surgeon) such as Advil®, Ibuprofen, Celebrex®, Indocid®, Motrin®, Naprosyn®, Orudis®, Vioxx®, Voltaren®, etc.;
- cold and flu medicines such as Tylenol Sinus®, Advil Sinus®, Réactine®, cough syrup, etc.

2.4 ALCOHOL

Completely stop drinking alcohol **two weeks before and three weeks after** your surgical intervention. The combination of alcohol and medication can cause unpredictable adverse reactions.

2.5 TOBACCO

Stop smoking cigarettes and/or electronic cigarettes containing nicotine and nicotinic products **at least 6 weeks before and 8 weeks after** your surgery.

Nicotine and other toxic substances in tobacco can narrow small blood vessels and therefore:

- slow the healing of your wounds, increasing the risk of infection;
- increase the risk of respiratory problems and pneumonia after surgery;
- cause nausea, vomiting, and coughing fits which may increase the risk of bleeding after surgery.

* Nicotine substitutes (Nicorette® or others) are also contraindicated during this period as they have these same adverse effects.

2.5 CANNABIS

Use of recreational cannabis must be stopped two weeks before your surgery because of the possible interactions of cannabis with anesthetic agents.

Cannabis can be used for medical purposes, by prescription only. In some contexts, its use may be permitted following evaluation with the medical team and your prescribing physician. Please let us know.

However, smoking cannabis, just as for smoking tobacco, contributes to the deterioration of your respiratory system and may interfere with your postoperative recovery.

As no study has confirmed a safe threshold for cannabis use during the preoperative and postoperative periods, the safest approach is not to consume any. If you use cannabis to relieve a health problem, please discuss this with your surgeon.

Please note that the use of recreational cannabis, in any form, is prohibited on the entire property. In addition, municipal laws prohibit the use of cannabis in any public place, indoor or outdoor.

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PREPARING FOR YOUR RETURN HOME

WE HAVE LISTED BELOW SEVERAL ITEMS TO PLAN FOR AND TO PURCHASE TO FACILITATE YOUR RETURN HOME. PREPARING IN ADVANCE WILL ALLOW YOU TO CONCENTRATE YOUR ENERGY ON YOUR CARE.

3.1 ITEMS TO PURCHASE

Here are some items to purchase and to leave at home (they will be essential for your home care):

- 1 thermometer to check your temperature when needed;
- 1 large pack of hypoallergenic and alcohol-free disposable baby wipes
- 1 tube of silicone gel or vitamin E cream for massaging your scars;
- loose clothing and easy slip-on shoes: have these on hand for your comfort.

3.2 MEALS AND SNACKS

Prepare and freeze meals; purchase non-perishable food items so that you do not have to cook upon your return home. It is important to include enough protein in your diet as it directly influences the healing of your wounds. In addition, adequate hydration and a balanced diet will optimize your immune functions, which will give you better protection against infection.

3.3 YOUR HOME-BASED ACTIVITIES

Your movements will be limited and there will be restrictions on the amount of weight you can lift. You will likely need help with your housekeeping activities. Ask a family member or friend to be available when needed. This person can accompany you should you need to move about or run errands and, if necessary, offer support with your personal care and daily activities.

3.4 RETURN TO WORK AND NOTIFYING YOUR EMPLOYER

The convalescence period is 8 to 12 weeks and may vary depending on the nature of your work. It is important to notify your employer. If you would like to have a letter justifying a sick leave, request one by going to the GRS Montréal consultation office.

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PREPARING YOUR SUITCASE

4.1 A SMALL SUITCASE ON WHEELS

- Airline cabin or carry-on baggage with a **maximum weight of 10 kg (22 lb)**.

We ask you to respect this directive for the following reasons:

- Limited space in the rooms of the care unit and the Asclépiade;
- Risk of falling: the floors must remain clear;
- Risk of injury to you or our staff when handling too heavy and bulky baggage.

4.2 ITEMS TO PURCHASE AND TO BRING WITH YOU FOR YOUR STAY

- 2 sodium phosphate enemas of 130ml each (Enema® or other brand - at a cost of approximately \$15 for 2 enemas);



- Unscented and alcohol-free gentle liquid soap, Dove® or Ivory® brand;
- Portable mirror with support to see your genitals during your care;
- Depilatory cream;

- Chlorhexidine sponges or soap;



- Loose-fitting clothes for your return home.

4.3 PERSONAL ITEMS TO BRING

- For identification purpose, your health insurance card from your province OR passport (if you are not a Canadian resident);
- Current medication, properly identified and MUST be kept in their original containers;

*No personal container will be accepted. Ask your pharmacist to prepare your medication in identified containers for the duration of your stay only.

- 1 pair of slippers with non-slip soles;
- 1 pair of easy-on shoes;
- 3 sets of loose, comfortable clothing adapted to the operated area (dress or skirt);
- 3 sets of pyjamas (ideally nightgowns);
- 1 bathrobe;
- 2 bags, one to bring back soiled clothing if necessary and the other to put the items you may need to bring back;
- Entertainment such as a book and a device to listen to your music and its charger cable - don't forget to bring your headphones;
- Personal hygiene kit containing toothpaste, toothbrush, unscented lotion, etc.;
- Pocket money and/or credit card.

AND IF APPLICABLE:

- Inhalers and inhalation chamber;
- Glasses and/or contact lens, contact lens case and contact lens solution;
- Container for your dentures and/or your hearing aids;
- Calling card for long distance calls.

The Complexe chirurgical CMC is not responsible for the loss, breakage or theft of personal items. Do not bring a large amount of cash with you and leave your jewelry and valuables at home.

4.4 DOCUMENTS TO BRING

- The three parts of this information booklet (Parts A, B and C);
- Up-to-date list of your medications issued by your pharmacist;
- For patients who are not Canadian residents: the "Contract for Medical Services" and the "Governing Law and Jurisdiction Agreement". If you are not a Canadian resident and you have not received this document, please contact us at 1 514 288-2097.

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THE DAY BEFORE SURGERY

5.1 CHANGE IN YOUR HEALTH STATUS

If you have a fever on the day before your surgery, or if you have the flu, diarrhea, or if you are vomiting, promptly notify the CMC nursing staff at 514 332-7091, ext. 232. You can leave a voice-mail message if necessary.

5.2 ENEMAS

The day before your surgery, you will have to self-administer intra rectally the two sodium phosphate enemas that you have purchased (see point 4.2). Follow instructions on the package.

- 1st enema at 4 p.m.;
- 2nd enema at about 8 p.m.

5.3 FIRST SHOWER THE DAY BEFORE SURGERY

It is mandatory to take a shower the day before and the morning of your surgery.

In order to reduce the risk of infection and reduce the number of bacteria on your skin during the operative and postoperative periods, you must use a chlorhexidine-based sponges or soap to gently wash the area to be operated on (see point 4.2).

Be sure to carefully follow the instructions provided with the product and avoid contact with the eyes and ears.

After the shower, do not apply any lotion or cream on your skin or any styling product to your hair.

Your next shower will take place about 5 days after your surgery.

5.4 ARTIFICIAL NAILS, NAIL POLISH, AND “PIERCING” JEWELRY

Remove artificial nails and any nail polish since the color of your nails is a good indicator of the level of oxygen in your blood. In addition, the device used to measure your oxygen level may have difficulty reading the results if your nails are covered with nail polish, even if it is clear, or if you have artificial nails.

It is mandatory to remove all your piercing jewelry because of the risk of burns during the procedure. Please note that the surgeon may refuse to proceed with surgery if you refuse to remove them. However, piercing jewelry on the body can be temporarily replaced by silicone piercing jewelry, except for those located on the face, in the mouth and on the neck, which must be removed.

5.5 FASTING

You must fast from midnight on the day of the surgery, i.e. **you must not eat any solid or liquid food, including water.**

Avoid chewing gum or candy.

However, you can brush your teeth and use mouthwash.

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ON THE MORNING OF SURGERY

6.1 PREOPERATIVE PREPARATION

WHEN?

Before the shower on the day of surgery and a maximum of 12 hours before surgery.

DEPILATION AREA?

Remove hair from the surgery site, the pubic area, scrotum, and groin, including the contour of the anus.

DEPILATION TECHNIQUE?

Use a depilatory cream on the area, except on the mucous membranes of the genitals. It is possible to obtain the depilatory cream in pharmacies (Veet®, Vichy®, Klorane®, etc.).

Follow the instructions on the product and refer to your pharmacist for more information.

If your skin reacts to the product, remove hair with a trimmer to make sure you shave the hair rather than uprooting it.

Waxing and razor blades are prohibited.

HAIR REMOVAL VERIFICATION

The nurse will verify the depilated area before your surgical procedure.

6.2 SECOND PREOPERATIVE SHOWER

You must take a shower on the morning of your surgery to wash the area to be operated on with chlorhexidine-based soap. (see point 5.3)

After the shower, do not apply any lotion or cream on your skin.

6.3 PERSONAL MEDICATION

The morning of your surgery:

- use your inhalation pumps even if you normally only use them when needed;
- do not take your regular medications, including diabetes, heart and blood pressure medications.

*Your nurse will tell you whether to take them, based on the anesthesiologist's recommendations.

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YOUR STAY AT COMPLEXE CHIRURGICAL CMC

7.1 ADMISSION

Few days before your surgery, a member of the GRS Montréal team will inform you of the time that you will be expected at Centre Métropolitain de Chirurgie.

Please note that your admission time does not correspond to your surgery time, which cannot be precisely confirmed.

At the time of admission, you will be greeted by a member of the nursing staff who will complete a preoperative check list with you and answer all your questions.

7.2 MEDICAL CONSULTATION

On the morning of your surgery, your anesthesiologist and surgeon will meet with you and answer all your questions.

7.3 PREMEDICATION SPECIFIC FOR YOUR SURGERY

Approximately two hours before your surgical procedure, the nursing staff will give you pre-medication in tablet form to help reduce postoperative pain as well as the risk of nausea and vomiting

7.4 OPERATING ROOM

You will be taken to the operating room by a member of the care team.

When arriving in the operating room, members of the surgical team will verify your identity and the information in your file. For safety reasons, you will be asked to confirm your first and last name several times. You will then be under the care of the anesthesiologist during surgery.

7.5 RECOVERY ROOM, CARE UNIT AND ASCLÉPIADE

Immediately after surgery, you will be transferred to the recovery room. It is normal to feel nausea at this time. These symptoms are part of the side effects of the anesthesia. The time spent in the recovery room is about 30 minutes and will allow you to recover under the continuous monitoring of the nursing staff.

You will then be transferred to your room in the care unit for two nights.

To avoid complications, early mobilization is favored. You will rise from bed on the same day of your surgery with the help of the nursing staff. You will be encouraged very often to walk and rise.

As needed, you will receive medication to manage your pain and that will promote mobilization.

You will gradually start eating, according to your tolerance.

You will then be transferred to Asclépiade for 4 nights where you will be receiving information and teaching related to your postoperative care

7.6 VISITORS

Your relatives will not be allowed to follow you to the operating room. They can wait for you in the waiting room located at the main entrance (Poincaré Street) or wait in your room.

When you return to your room in the care unit, your relatives will be allowed to come and visit you, but only one at a time in order to respect the peace and privacy of the other patients. Consequently, if the peace of mind of the clientele is not respected, we will be obliged to intervene, and we may ask to minimize the visiting time.

Visiting hours will be from 9:00 a.m. to 8:00 p.m.

At Asclépiade, visits will always be one person at a time and visiting hours are also from 9:00 a.m. to 8:00 p.m.

During your stay, no meals will be served to your loved ones. Please check with the Complexe chirurgical CMC staff for nearby restaurants.

7.7 MEDICAL DISCHARGE

Usually, 6 days after your surgery you will get your medical discharge. You will need to plan your transportation home. On the day of your discharge, we may ask you to vacate your room early in the morning to allow us to accommodate a new patient.

However, you may wait in the lounge until your companion or transportation arrives. Before leaving, please make sure you have all your personal belongings and identification with you.

You will receive a prescription and information documents about your care routine and treatments.

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