

# Saint John's Health Center



## **PARTIAL NEPHRECTOMY**

### **Location of Surgery:**

Saint John's Health Center  
2121 Santa Monica Blvd  
Valet parking available  
Hospital Phone: 310-829-5511

### **Patient Name:**

### **Date and Time of Surgery:**

### **Check-in Arrival Time (2 hours prior to surgery):**

### **Physician:**

### **Duration of Procedure:**

### **Approximate Total Time (arrival to discharge):**

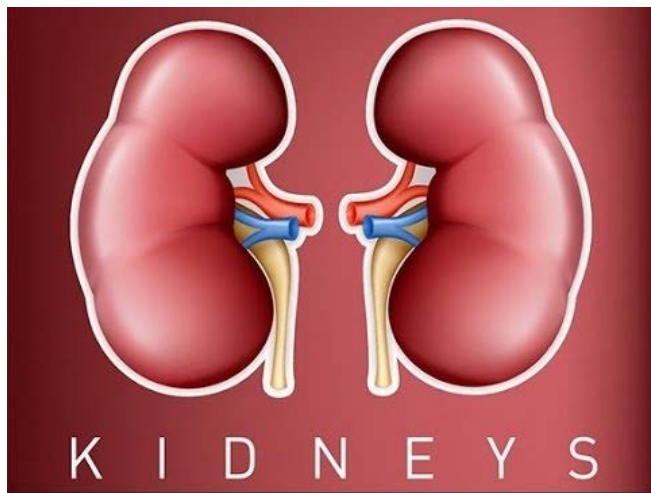
**Office Telephone:** 310-582-7137

**Office Fax:** 310-582-7140

**BE SURE TO ARRANGE FOR A FAMILY OR FRIEND TO DRIVE YOU HOME. IT IS RECOMMENDED THAT SOMEONE STAY WITH YOU FOR THE FIRST 24 HOURS AFTER THE PROCEDURE.**

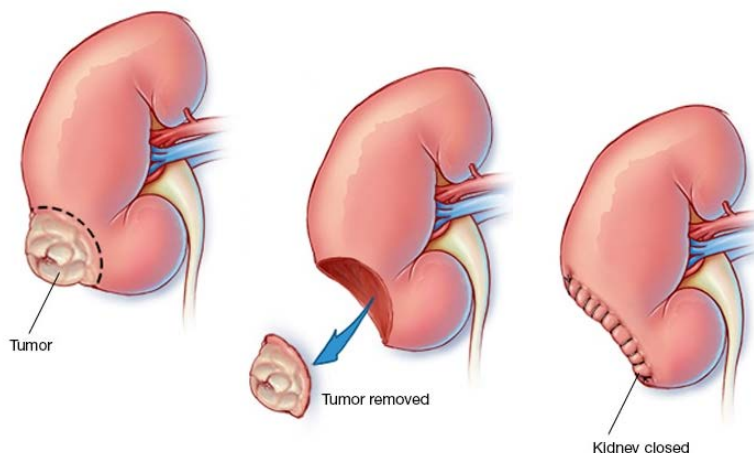
## GENERAL INFORMATION

A **partial nephrectomy** is a surgical procedure in which only the kidney tumor and a 1 cm margin of kidney is removed. This operation is called “renal-sparing” since it leaves the remaining healthy renal tissue. An advantage of partial nephrectomy is that it preserves renal function, which is particularly helpful for patients with pre-existing low renal function.



normal kidneys

A partial nephrectomy is done for small kidney cancers, usually less than 4 centimeters in size. The tumor must be small enough and located near an outer edge of the kidney; thus, a very large or a tumor located deep within the kidney would be too difficult to reach and remove with a partial nephrectomy.



The surgery is performed laparoscopically, with a robot-assisted technique, using the **DaVinci Robot** machine. During the procedure, the surgeon is seated at the robotic console near the patient. The surgeon controls the robotic instruments to perform the operation.

The robot accurately reproduces the surgeon's sophisticated maneuvers.



The benefits of the robotic surgery include:

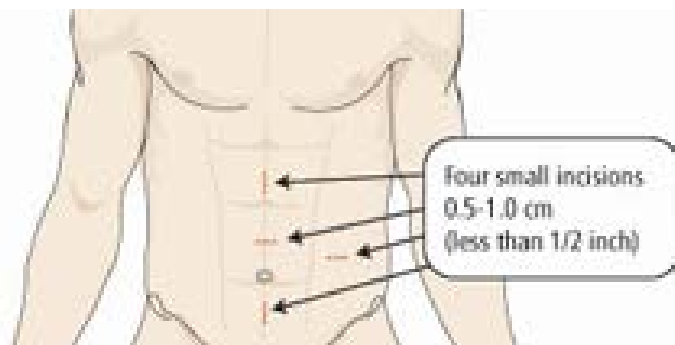
- improved visualization of the surgical organs
- less bleeding during surgery
- a more precise surgery.
- a shorter hospital stay,
- faster recovery time
- less risk of infections
  - less post-operative pain.

### **What to Expect:**

- The procedure is done in the Hospital Operating Room.
- You will be asleep during the procedure.
- It takes about 4 hrs.
- You will stay overnight in the hospital.
- You will receive an IV antibiotic prior or during the procedure to prevent infection.

## PARTIAL NEPHRECTOMY

There are typically 3-5 small, 1 centimeter incisions in the abdomen. A telescope and small instruments are inserted into the abdomen through these “keyhole” incisions, which allow the surgeon to completely separate the tumor without having to place his/her hands into the abdomen. The kidney tumor is removed intact through one of the existing incision sites. The tumor will be sent to pathology to evaluate the cancer cells. You will receive results in about 1 week.



It occasionally becomes necessary to remove the entire kidney. The doctor will not know until the surgery has started. If that is the case, then the partial nephrectomy procedure is stopped and changed to a radical nephrectomy (removal of the entire kidney).

### **RISKS AND COMPLICATIONS**

- The risks and complications of the surgery will be extensively discussed with you beforehand by your surgeon.
- **Ask your physician if you have specific questions regarding risks.**

## **PRIOR TO SURGERY**

### **Pre-Operative Testing:**

- Pre-op clearance is needed to ensure your safety for surgery.
- You will need to make an appointment with your primary care physician (PCP) or the St. John's hospitalist physician **within 1** month of your surgery date. Orders will be sent for your necessary labs, chest x-ray (CXR), and electrocardiogram (EKG).
- If you have certain heart conditions, you **MUST** discuss it with your surgeon. You may need to make appointment with your cardiologist for a cardiac clearance to ensure that your heart is healthy enough for surgery.
- *All pre-operative testing must be completed with your results sent to us **at least 1 day (no longer than 1 month) prior** to your scheduled surgery.*

### **Illness:**

- If you develop a fever, signs of a cold, bladder infection, diarrhea, or any other illnesses between now and your surgery date, notify our office at (310) 582-7137. We may need to reschedule your procedure.

### **1-2 Weeks Prior to Surgery:**

### **Blood Thinner Medications to Stop:**

- Blood thinner medications can contribute to serious bleeding during or after your procedure. These common blood thinners should be evaluated by your managing physician, cardiologist, or PCP before surgery to ensure the safety of stopping these medications:
  - Coumadin (Warfarin)
  - Plavix (Clopidogrel)
  - Eliquis (Apixaban)
  - Xarelto (Rivaroxaban)
  - Brilinta (Ticagrelor)
  - Effient (Prasugrel)

- Ticlid (Ticlopidine)
- There are other less common blood thinners that should be stopped as well (see comprehensive list)

**Over-the-Counter Medications or Supplements to Stop:**

- Stop taking these common over-the-counter medications and supplements **7 days** before surgery (unless otherwise specified) as these may contribute to bleeding:
  - Aspirin
    - Check cold medication ingredients to make sure that it does not contain aspirin
  - All NSAIDS (e.g. Advil, Ibuprofen, Motrin, Naproxen)
  - Glucosamine
  - Chondroitin
  - Vitamin E
- Herbal supplements and teas should be stopped **14 days** before surgery to prevent bleeding (see comprehensive list)
- It is okay to use Tylenol (normal or extra-strength) or previously prescribed narcotics with Tylenol (i.e. Percocet, Vicodin) for pain control days prior to your procedure, if necessary.
- See the Comprehensive List of Medications to Stop on the next two pages.

## Comprehensive List of Medications to Stop:

The following medications contain nonsteroidal anti-inflammatory agents or aspirin ingredients that may interfere with the bloods' ability to clot. These medications need to be **stopped for at least a full 7 days prior** to having your procedure.

A.P.C.	Celebrex	Flector Patch	Midol Extended Relief
Aceta-Gesic	Celecoxib	Flexaphen	Midol Maximum
Acuprin	Clinoril	Flurbiprofen	Strength Cramp
Adprin-B	Co-Advil	Four Way Cold Tablets	Formula
Advil	Co-Gesic	Gelpirin tablets	Mobic
Aggrenox	Congespirin	Gemnisyn	Mobidin
Aleve	Cope	Genpril	Mobigesic
Alka Seltzer	Coricidin	Genprin	Momentum
Amigesic	Damason-P	Goody's Body Pain	Mono-Gesic
Anacin	Darvon Compound	Goody's Extra	Motrin
Anaprox	Daypro	Strength Headache	Motrin IB
Anaprox DS	DeWitt's Pain Reliever	Halfprin 81	MST 600
Anodynos	Diclofenac	Halfprin	Nabumetone
Ansaid	Diflunisal	Haltran	Nalfon
Argesic	Dipyridamole	Healthprin	Naprelan
Artha-G	Disalcid	Heartline	Naprosyn
Arthritis Foundation	Doan's	Ibuprofen (all	Naproxen
Pain	Dolene	NSAIDs)	Night-Time
Arthritis Pain Formula	Dolobid	Ibutab	Effervescent
Arthritis Strength	Dolor	Indocin	Norgesic
Bufferin	Doxaphene	Indomethacin	Norgesic Forte
Arthropan	Dristan	Ketoprofen	Norwich Extra
Arthrotec	Dristan Sinus Pain	Ketorolac	Strength
ASA	Reliever	Levacet	Nuprin
Asacol	Durabac	Liquiprin	Nyquil
Ascriptin	Duradyne	Lobac	Nytol
Aspergum	Duraxin	Lodine	Orphenadrine
Aspirin	Easprin	Lortab ASA	Orphengesic
Aspirin with codeine	EC-Naprosyn	Magan	Orudis
Asprimox	Ecotrin	Magnaprin	Oruvail
Azdone	Empirin	Magsal	Oxaprozin
Azulfidine	Empirin with codeine	Marthritic	Oxycodone and
Backache Maximum	Equagesic	Meclofenamate	aspirin
Bayer Products	Equazine-M	Meclomen	Pabalate-SF
BC powder and tablets	Etodolac	Medipren	P-A-C
Bufferin	Excedrin	Mefenamic Acid	Painaid
Bufferin Arthritis	Excedrin Aspirin Free	Meloxicam	Pamprinamprin
Strength	Excedrin IB	Menadol	Panasal
Buffex	Extra Strength Anacin	Mepor Compound	Pentasa
Butalbital Compound	Feldene	Meprobamate/Aspirin	Pepto-Bismol
Butazolidin	Femback Caplets	Meprogesic Q	Percodan
Cambia	Fenoprofen	Methocarbamol	Persantine
Carna Arthritis	Fiorina	Micrainin	Phenylbutazone
Cataflam	Fiortal	Midol	Phrenilin

## PARTIAL NEPHRECTOMY

Piroxicam	Premysyn	Quiet World tablets	Rexolate
Ponstel	Presalin	Relafen	Robaxisal
Pradaxa	Prevacid NapraPAC	Resolve	
Robomol	Salsalate	Sulindac	Trigesic
Rowasa	Salsitab	Summit	Trilisate (Choline trisalicylate)
Roxiprin	Sine-aid	Synalgos-DC capsules	Tusal
Rufen	Sine-off	Tolectin	Vanquish
S-A-C	Sodium salicylate	Tolmetin	Voltaren
Saleto	Sodol	Toradol	Zipsor
Saleto-200	Soma Compound	Trendar	ZORprin
Salflex	Sominex	Trental	
Salocol	St. Joseph Aspirin	Tricosal	

This list contains the most common medications prescribed. There are hundreds of other aspirin-containing products on the market that may contain generic aspirin. As such, any medication containing aspirin or acetylsalicylic acid should be **stopped for a full 7 days prior to your procedure**. If you have any questions regarding these medications, call 310-582-7137.

**HERBAL PRODUCTS AND VITAMIN USE SHOULD STOP BEFORE YOUR PROCEDURE:** Certain vitamins, minerals, and “herbal medications” can affect anesthetic potency, cause hemodynamic instability, potentiate bleeding, and increase cardiac dysrhythmias. **These should be stopped for 14 days prior to your procedure.**

Vitamin E	Garlic	Kava-kava
Echinacea	Ginger	Licorice
Ephedra	Gingko biloba	Saw Palmetto
Feverfew	Ginseng	St. John's Wort
Fish Oil (Omega 3)	Goldenseal	Valerian

The following medications are anticoagulant medications and need to be stopped after consulting with the ordering physician:

Angiomax (Bivalirudin)	Fragmin (Dalteparin)	Pradaxa (Dabigatran)
Argatroban	Heparin	Refludan (Lepirudin)
Arixtra (Fondaparinux)	Innohep (Tinzaparin)	Ticlid (Ticlopidine)
Coumadin (Warfarin)	Lovenox (Enoxaparin)	Xarelto (Rivaroxaban)
Effient (Prasugrel)	Plavix (Clopidogrel)	
Eliquis (Apixaban)	Pletal (Cilostazol)	

**If you are unsure of which medications to stop, call 310-582-7137.**

**DO NOT STOP TAKING ANY PRESCRIBED MEDICATIONS WITHOUT CHECKING WITH THE ORDERING PHYSICIAN!**



**2 days Prior to Surgery:**

- Do not drink alcoholic beverages, smoke, or take unauthorized drugs for **48 hours (2 days) prior** to your procedure.

**Day and Evening Prior to Surgery:**

**Day before surgery:**

- Clear liquid diet (liquids you can see through) the day before surgery. No solid food.
  - Examples: chicken, vegetable, or beef broth. Plain jello gelatin without fruit. Water, coffee, tea, clear soda, clear fruit juices without pulp. You need to have a fairly empty bowel prior to surgery.

**Food and Drink:**

- ***DO NOT EAT, DRINK OR CHEW ANYTHING FOR 8 HOURS PRIOR TO YOUR PROCEDURE.*** This includes water, juice, coffee, chewing gum, breath mints, and lozenges. Ok to brush teeth, but do not swallow the water.

**Pre-Procedure Cleansing and Skin Care Instructions:**

- Take a shower the night before and the morning of your procedure with antibacterial soap (such as Dial) to prevent infection.
- Generously lather your body, scrub well, and rinse. Give special attention to the area where the incision will be made for your surgery.
- After your morning shower, do not apply creams, body oils, perfumes, deodorants, lotions, powders, make-up, lipstick, nail polish, or any other cosmetic product to the skin.
- Remove dark nail polish and acrylic nails on at least 2 nails (one on each hand). This is needed to assess nail bed color and monitor oxygen saturation.

**Day of Surgery:**

**Before Arrival:**

- Wear comfortable, loose-fitting clothes.
- You **MUST** bring your insurance card.
- Avoid bringing valuables, such as jewelry, watches, and money. Essential items (e.g. glasses, contact lenses, wigs, hairpins, hair clips, dentures, prostheses) should be removed before entering the operating room.
- Leave your essentials with family members/friends, or secure them in an on-site locker.
- Optional: bring any advanced directives, healthcare power of attorney, or guardianship papers if you have them.

### **Medication DO's and DON'T's:**

- DO check with your prescribing physician if you take **insulin** for dosing instructions.
- DO NOT take **oral diabetic medication** the morning of your procedure. Taking it could result in low blood sugar, since you will not be allowed to drink or eat anything that morning.
- DO take **blood pressure** and/or **thyroid medication**. If you usually take a morning dose, then take as usual the morning of procedure with a small sip of water.
- DO bring your current, up-to-date list of medications with you for your anesthesiologist to review.
- DO bring inhalers if you use any.

### **On Arrival:**

- Proceed to the surgery location and check in at the information desk to be escorted to the pre-operative registration area.
- You will meet your anesthesiologist to review your medications and discuss your anesthetic plan.
- Family members/friends may stay with you until you are taken to the operating room.

## **AFTER SURGERY**

### **After Surgery:**

- Family members/friends waiting for you will be notified when your surgery is complete. If you desire, the doctor can discuss findings with your family members/friends.
- After surgery, you will go to recovery to awaken from anesthesia. This usually takes **1 hour, occasionally 2 hours**. When you have sufficiently recovered from anesthesia, you will be admitted to the hospital.

### **Upon Discharge:**

- Patients are typically discharged 2 days after surgery. This will be determined by your surgeon.
- You will need to schedule a follow up appointment as instructed by your physician.
- When you arrive home, please rest and relax. Let your family members/friends wait on you. Your body will tell you if you are doing too much. Please listen to your body.

### **Urinary Catheter and Surgical Drain:**

- You may have a surgical drain (which goes into the abdomen to collect excess fluid) and a urinary catheter (a tube into your bladder to remove urine).
- In most cases, both the urinary catheter and surgical drains are removed prior to discharge from the hospital. If not then ask your nurse for home care of the drains.

### **Incisions:**

- You will have several small incisions on your abdomen.
- Incisions are closed with surgical glue “super glue” infused with an antibiotic, rather than sutures.
- Do not remove the glue, it takes about 2 weeks to peel off naturally.

- Do not apply Neosporin or any ointment as this can cause the glue to loosen.
- Drainage of fluid and small blood from these incisions is common.
- You should change the dressing when wet. You may leave open to air once drainage stops. Alternately, it is ok to continue to use dressing for incision protection from clothing. Always keep clean and dry.

### **Bowel Function—very important:**

- You may experience constipation, bloating, and/or cramping.
- Maintaining bowel movements is very important after surgery to prevent bowel blockage. Constipation can easily happen due to slowing of the bowel during surgery
- Take daily stool softeners such as Miralax or Colace. Also Prune Juice and Senna Tea for a few weeks after surgery, until bowel is regulated.
- Typically your first bowel movement will be about 3 days after surgery.
- You may also need a stimulate laxative or fleets enema if no bowel movement after 3 days.
- Walking will help alleviate these symptoms as well.

### **Pain/Symptoms:**

- Upon discharge, you will be given a prescription for pain medication. If you do not have adequate pain relief, please contact your doctor.
- You may have genital and abdominal swelling and or bruising.
- Shoulder pain is normal, as it is related to your body's positioning during surgery. It is normal to have some leakage from the incision sites.
- Hiccups and bloating due to the gas used for abdominal distention is common during the first few days after surgery.

### **Diet:**

- Begin with clear liquids to allow your stomach and digestive tract to adjust. Eating too soon may cause nausea and vomiting. Continue clear liquids until you resume normal bowel function. Gradually start solid food.
- Avoid eating the gas-producing foods such as
  - Legumes (beans, lentils, chickpeas, peanuts, peas), beer, broccoli, Brussels sprouts, cabbage, carbonated beverages, cauliflower, cucumbers, lettuce, leeks, onions, peppers, and fatty foods.
- Avoid using straws for your beverages, as this also brings additional air into the stomach.
- You should be on a no-added-salt diet, and always avoid high protein diets. Both of these diets can cause potential damage to your remaining kidney. It is best to discuss methods and guidelines to protect your remaining kidney with your PCP after fully recovering from surgery.

### **Activity:**

- No heavy lifting of 10 pounds or greater for 6 weeks after your surgery.
- Do not drive until your catheter is removed and you have stopped taking narcotic pain medication.
- Regular walking is encouraged.
- You may resume sexual activity per your doctor's instruction.

### **Showering:**

- It is okay to take a shower. Gently cleanse the incisions with regular soap and pat dry with towel. Do not submerge your incisions in water until your incisions are completely healed.

### **Pathology Results:**

- The pathology results from your surgery are usually available one week following surgery. Please call the office to set up a follow-up appointment, typically one week after your surgery: 310-582-7137.

## **WHEN TO CONTACT YOUR DOCTOR**

### **Call your doctor if you experience:**

- Fever of 100.4°F or greater
- Severe pain or swelling in the legs
- Sudden chest pain
- Nausea, vomiting, or abdominal cramps
- Inability to urinate
- Urine continues to have a strong odor
- Blood in the urine

**IF IT IS AN EMERGENCY, GO IMMEDIATELY TO THE EMERGENCY ROOM.**

### **For any further scheduling questions or concerns:**

- Please call our physician's team at (310) 582-7137. The office is open from Mon-Fri, 8am-5pm.

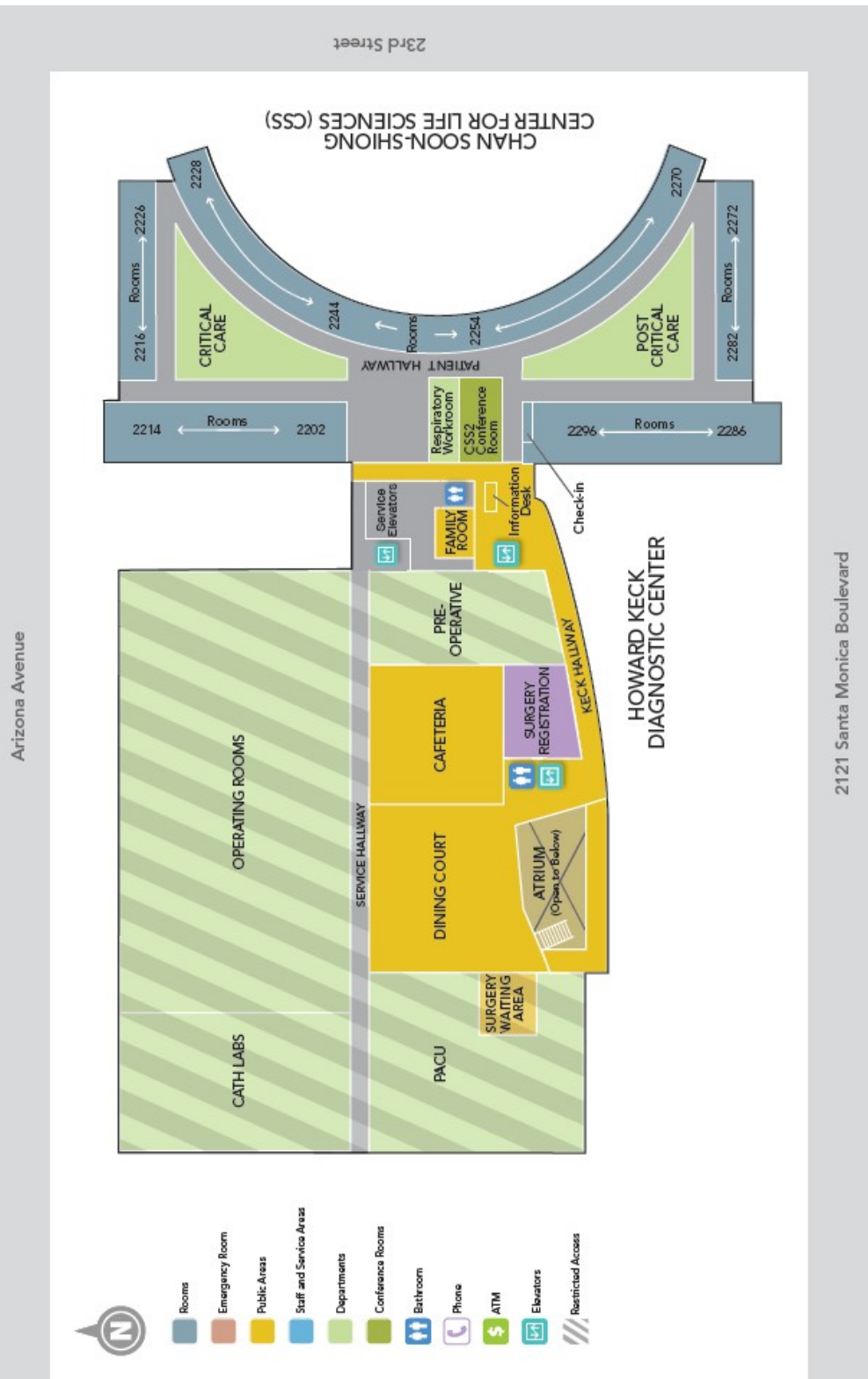






**HOSPITAL MAP – 2<sup>ND</sup> FLOOR**

**PROVIDENCE SAINT JOHN'S HEALTH CENTER | SECOND FLOOR**



**HOTELS**

The following hotels are within close proximity to our facility. Rates quoted cannot be guaranteed. Please request the “Providence Saint John’s Health Center Patient/Family Rate” when making reservations.

<b>Hotel</b>	<b>Distance to Medical Center</b>	<b>Rates</b>	<b>Parking</b>
Ambrose Hotel, Santa Monica 1255 20th Street (310) 315-1555 <a href="http://www.ambrosehotel.com">www.ambrosehotel.com</a>	0.3 Miles	\$249.00 – \$299.00	Complimentary self-parking
Best Western Gateway Hotel 1920 Santa Monica Boulevard (310) 829-9100 <a href="http://www.bestwestern.com">www.bestwestern.com</a>	0.3 Miles	\$235.00 – \$289.00	Complimentary self-parking
Comfort Inn 2815 Santa Monica Boulevard (310) 828-5517 <a href="http://www.comfortinn.com">www.comfortinn.com</a>	0.5 Miles	\$169.00 – \$205.00	Complimentary self-parking
Days Inn 3007 Santa Monica Boulevard (310) 829-6333 <a href="http://www.daysinn.com">www.daysinn.com</a>	0.7 Miles	\$169.00 – \$189.00	Complimentary self-parking
Doubletree Suites 1707 Fourth Street (310) 395-3332 <a href="http://www.doubletree.com">www.doubletree.com</a>	1.4 Miles	\$279.00 – \$415.00	Complimentary self-parking
Shutters On the Beach 1 Pico Boulevard Santa Monica, CA 90405 (310) 458-0030 <a href="http://www.shuttersonthebeach.com">www.shuttersonthebeach.com</a>	2.3 Miles	\$480.00 – \$1600.00	Valet parking available
Loews 1700 Ocean Avenue Santa Monica, CA 90401 (310) 458-6700 <a href="http://www.santamonicaloewshotel.com">www.santamonicaloewshotel.com</a>	1.9 Miles	\$389.00 – \$725.00	Valet parking available
Casa Del Mar 1910 Ocean Way Santa Monica, CA 90405 (310) 581-5533 <a href="http://www.hotelcasadelmar.com">www.hotelcasadelmar.com</a>	2.3 Miles	\$410.00 – \$1495.00	Valet parking available
Wilshire Motel 12023 Wilshire Boulevard Los Angeles, CA 90025 (310) 478-3545 <a href="http://www.wilshiremotel.com">www.wilshiremotel.com</a>	1.5 Miles	\$90.00 – \$220.00	Complimentary self-parking

