

HIRSLANDEN



KLINIK BEAU-SITE

WELCOME TO THE

BARIATRIC CURRICULUM

HIRSLANDEN 
KLINIK BEAU-SITE



INFORMATION / PRESENTATIONS

- Anesthesia
- Reception / Guest Relation
- Nutritional Counseling
- Physiotherapy
- Ward Department / Nursing Serving
- Training / Injections / Thrombosis Prophylaxis



Anesthesia Consultation

- After the presentations, personal anesthesia consultations will take place:
 - Explanation of anesthesia
 - Discussion of questions (medications, allergies)
 - Consent to anesthesia

Information about Anesthesia

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Overview

- Fasting, admission day
- Monitoring of anesthesia
- Infusions, catheters and anesthetic medications
- Ventilation, breathing tube
- Waking up from anesthesia
- Postoperative care unit

Preoperative Fasting

- For scheduled surgery, all patients must have an empty stomach as follows:
 - On the day of surgery, no food after midnight
 - Drinking (tea, water) allowed until hospital admission



Smoking Cessation

- Stop smoking is beneficial for any operation
 - Stopping 24 hours before surgery already helps
 - Ideally 3 weeks before surgery
 - Reduces the risk of pneumonia, wound healing disorders and infections



Admission

Please contact us by telephone if you have:

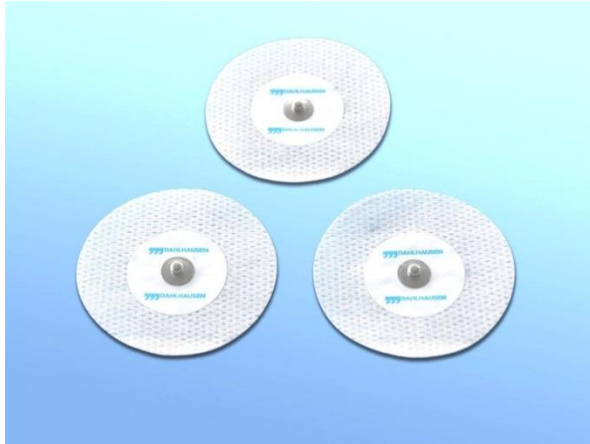
- Cough / sore throat
- Fever
- Other sudden illnesses

Operating Room

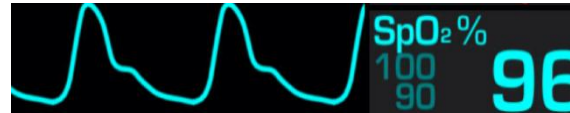


Monitoring of Anesthesia

ECG



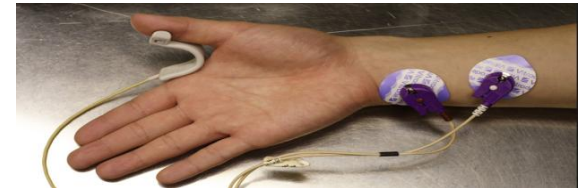
Oxygen Level



Depth of anesthesia

Nerve conduction

Blood pressure



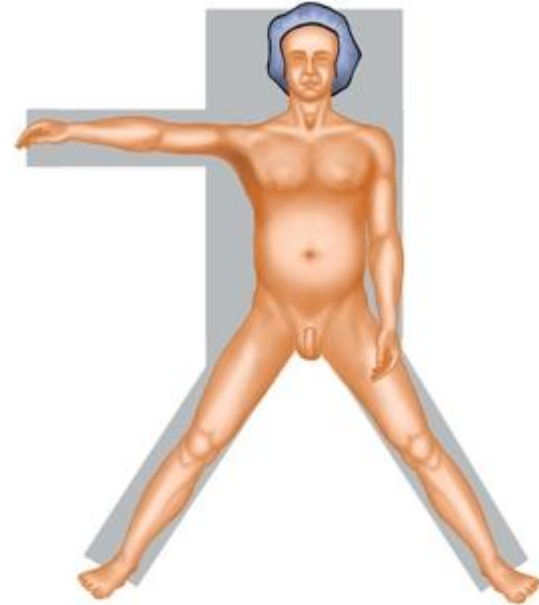
Infusions and Catheters

- 1st infusion for falling asleep
- 2nd infusion during anesthesia
- Central venous catheter in the neck in case of «very difficult veins»
- Urinary catheter only in exceptional cases
- Risks: bleeding, infections



Positioning

- Head positioned on a pillow
- Arms on arm armrests, left arm resting and right arm held out to the side
- Legs spread
- Legs secured with supports at the foot end

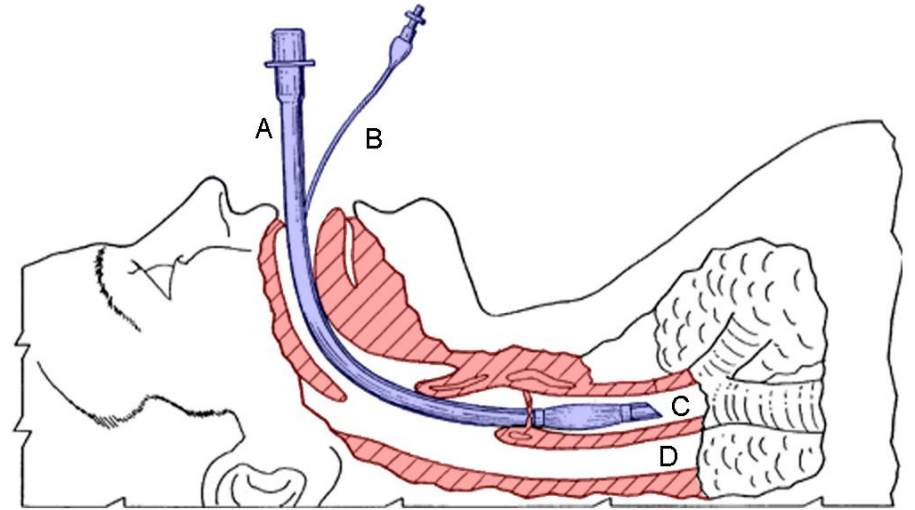


Medications

- Anesthetic drug for falling asleep via the vein
- Strong pain medication via the vein
- Anesthetic gas / medication to maintain sleep
- Muscle relaxation medication

- Blood transfusions
- Risk: allergic reactions

Ventilation and Breathing Tube



© Fotolia Mask ventilation

Von PhilippN <http://commons.wikimedia.org>

Risks: dentures, tooth damage, vomiting, aspiration of vomit

Awakening

- The breathing tube is removed as soon as the patient is breathing sufficiently and can follow instructions.

After anesthesia management:

- | | |
|---------------------------|----------------------------|
| – Nausea, vomiting | anti-nausea medication |
| – Shivering, feeling cold | warm blankets, painkillers |
| – Pain | painkillers |

Recovery Room



Recovery Room

- Stay 4 – 6 hours, sometimes overnight
- Monitoring of blood pressure, pulse and blood oxygen levels
- Check:
 - Blood values normal
 - Blood pressure normal
 - Pain treated
 - Drinking possible
 - Mobilization at bedside

Personal discussion after the presentation

- **Questions**
- **Medications, Allergies**
- **Consent to anesthesia**

RECEPTION / ADMISSION GUEST RELATIONS

Team Guest Relations

IMPORTANT

- Admission room / Monitoring Station / Patient Rooms
- Leave valuables at home
- TV / Radio / Telephone
- Visiting hours / Cafeteria
- Information Brochure «Ihr stationärer Aufenthalt»



VIRTUAL TOUR



VIRTUAL TOUR



VIRTUAL TOUR



VIRTUAL TOUR



Questions and Comments

Nutritional Counseling

Nadja Müller
BSc BFH
Nutritionist SVDE

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NUTRITION BEFORE SURGERY

- All patients must have an empty stomach for the operation
 - No food **after midnight** on the day of surgery
 - Drinking (tea, water) allowed **until hospital admission**

NUTRITION AFTER SURGERY

- On the day of surgery after waking up:
 - Still water
- First day after surgery:
 - Still water and tea (sweetener allowed like Assugrin)



NUTRITION AFTER SURGERY

- From the second day until hospital discharge:
 - Liquid meal (approx. 4 dl), with sugarfree prepared protein powder



NUTRITION COUNSELING

- We will visit you on the ward on the first or second day after surgery
 - Advice on resuming a normal diet at home, protein intake, etc.
 - You will receive all relevant information

Questions and Comments

Physiotherapy

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Head of the Physical Therapy Department

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Physiotherapie

- Breathing therapy
- Mobilization
- Exercise after hospitalization

Preventing Pneumonia

Risk factors:

- Smoking
- Pre-existing lung or heart disease
- Inability to clear secretions

Problems after surgery

Reduced lung ventilation after surgery!

- Increased mucus production due to mechanical ventilation
- Shallow breathing caused by lying down / pain / anesthesia
- Pain prevents deep breathing

Preventive Measures – Your Role

- Getting out of bed early after surgery (with assistance)
- Effective pain management: report any issues early if pain medication is not working well enough
- Regular respiratory therapy

Breathing therapy

Several times a day (every hour)

Perform each exercise at least 3 sets of 6–10 repetitions

Breathing therapy

Abdominal breathing



Lateral breathing



Use your hands to feel whether the breath is moving in your abdomen or along your ribcage

Scar protection

Immobilization for Coughing and Mobilization



Preventing Blood Clots

Risk factors:

- Bed rest, lack of physical activity
- Surgery

Circulatory stimulation

Perform at least 3 sets of 30 repetitions several times a day (every hour)



- Regular exercise
- Exercises for the “foot muscle pump”

Getting out of bed



Bend your knees – turn to the side – support yourself with your hands

Mobilization

Mobilize as early and as often as possible!

- Sit on the edge of the bed / at the table
- Walk down the hallway
- Climb stairs

Exercise After a Hospital Stay

- Regular exercise, walking, and possibly climbing stairs
- Avoid lifting or carrying anything heavier than 5 kg for 2 weeks
- Avoid lying on your stomach for a few days (ideally, rest the abdominal wall for 10 days after laparoscopic surgery)
- Resume sports 3 weeks after surgery
- Resume weightlifting or martial arts 6 weeks after surgery

Questions and Comments

Nursing Service

Bed Department

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Overview

- Hospital Organization
- Preparation at Home
- Preparation for Surgery at the Admitting Clinic
- Care in the Inpatient Ward
- Pain Management
- Preparing for Discharge
- Thrombosis Prevention

Hospital organisation

- Affiliated Physician System
- Care provided by licensed nursing staff, healthcare professionals, and trainees
- The following visiting hours apply at Beau-Site Clinic:
 - General Ward: 9:00 AM to 8:00 PM
 - Recovery Room: by appointment

Preparation at home

- Shower at home without using body lotion
- No jewelry, no watch, no nail polish or gel nails
- Bring your own medications in their original packaging
(If available, bring a list of medications)

Preparation at the admission clinic

- Measure vital signs (blood pressure, pulse, temperature, blood oxygen level)
- Weight check, blood draw
- Shaving of the surgical site
- Clean the navel
- Hospital gown (without underwear)
- Personal belongings: Place valuables such as cell phones, glasses, etc., in the “blue box”

Care in the inpatient ward

- 2–6 hours in the recovery room, depending on the surgery and your medical condition
- Daily monitoring of vital signs
- Daily weight checks
- Regular administration of pain medication
- Dressing changes as needed
- Resumption of your own medications after consulting with the doctor
- Showering is permitted; after consulting with the nursing staff

The goal of pain management




- Mild pain
- No need to hold one's breath (deep breathing is possible)
- Notify the nursing staff early to avoid pain spikes

Preparing for Discharge

- Discharge is scheduled for 3–4 days later
- Discharge time: 9:00 AM
- Please arrange transportation in advance
- You will receive pain medication and your own medications on the day of discharge
- In case of complications, contact your family doctor; otherwise, go to the Beau-Site Emergency Clinic.

Hospital Hygiene

STILL IMPORTANT:

-  Wash your hands thoroughly.
-  Avoid shaking hands.
-  Cough and sneeze into a tissue or the crook of your arm.
-  Stay at home if you experience symptoms.
-  Always call ahead before going to the doctor's or the emergency department.

Questions and Comments

THROMBOSIS PREVENTION



ADMINISTRATION OF FRAGMIN®

Prevention of blood clots

- The evening before the surgery at 10:00 p.m.
- For 3 weeks after the surgery, at 8:00 p.m. each day
- Alternate between the left and right outer thighs
- Do not inject into the abdomen or into hematomas or moles
- If you miss an injection, give the injection the next morning

VIDEO TUTORIAL

<https://www.fragmin.ch/>

Code: 1010



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HIRSLANDEN



KOMPETENZ, DIE VERTRAUEN SCHAFFT.

Die Privatklinikgruppe Hirslanden:

Hirslanden Klinik Aarau - Klinik Beau-Site, Bern - Klinik Permanence, Bern - Salem-Spital, Bern - Andreasklinik, Cham Zug - Klinik Am Rosenberg, Heiden - Clinique Bois-Cerf, Lausanne - Clinique Cecil, Lausanne - Klinik St. Anna, Luzern - Klinik Birshof, Münchenstein Basel - Klinik Belair, Schaffhausen - Klinik Stephanshorn, St. Gallen - Klinik Hirslanden, Zürich - Klinik Im Park, Zürich

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