



Dear Patient,

We understand that facing a brain tumor diagnosis can feel overwhelming, and we want to assure you that you are not alone. At Hoag Memorial Hospital, we are committed to providing you with the highest level of care, compassion, and expertise. With that in mind, we are honored to have **Dr. Robert Louis**, the Director of the Skull Base and Pituitary Tumor Program at Hoag, working on your care.

Dr. Louis is a **fellowship-trained neurosurgeon** with extensive experience treating brain tumors, including benign and malignant types, as well as skull base and pituitary tumors. With specialized training in minimally invasive techniques and keyhole neurosurgery, Dr. Louis utilizes advanced neuroimaging and neuro-navigation tools to ensure the safest and most effective outcomes for his patients. His patient-centered approach is designed to minimize postoperative pain, reduce neurological complications, and accelerate recovery time, helping you return to the life you love more quickly.

One of the innovative tools Dr. Louis employs is **Surgical Theater**, a groundbreaking technology that uses advanced 3D imaging to map out the safest and most effective surgical pathways. With this advanced technology, Dr. Louis can create a detailed, virtual reality model of your brain, allowing him to visualize your unique anatomy and plan the best route for surgery with unparalleled precision. This approach not only improves surgical accuracy but also gives patients and their families peace of mind by offering a clear understanding of the procedure.

At Hoag, we take a team-based approach to care. Dr. Louis works closely with a multidisciplinary group of specialists, including otolaryngologists, oncologists, ophthalmologists, endocrinologists, radiologists, and dedicated nurse navigators, all focused on helping you achieve the best possible outcomes. Every member of our team is committed to your health, recovery, and quality of life.

We know you may have questions, and Dr. Louis is here to help. His patient-first philosophy ensures that you will have access to him throughout your care journey. He values open communication and believes that every patient deserves the opportunity to fully understand their diagnosis, treatment options, and prognosis.

If you have any questions about your care, please don't hesitate to contact us. We are here to support you and provide the expert care you need.

Warm regards,

The Care Team at Pituitary & Skull Base Tumor Program
Hoag Memorial Hospital

Discharge Instructions After Endonasal Surgery

Medications

You may be given prescriptions for new medications to take at home and possibly for medications previously prescribed; you may fill these at any pharmacy. Before discharge, your nurse will review your medication dosage, schedule and side effects. **It is important to take medications as ordered. Possible discharge medications include:**

- **Antibiotics**
You will likely be on antibiotics for 5-7 days after surgery, typically Augmentin twice daily, or an alternative if you are penicillin allergic.
- **Prednisone or hydrocortisone (stress hormone)**
If your pre- or postop cortisol levels are low, you may need these steroids taken once or twice a day (upon arising and late afternoon). Duration of treatment will be determined by the Doctor. **IT IS CRITICAL TO TAKE THIS MEDICATION AS PRESCRIBED.**
- **Thyroxine (Synthroid, Levoxyl, Levothyroid, Levothyroxine –thyroid hormone)**
This medication should be taken every morning on an empty stomach, 1 hour before eating.
- **DDAVP (Desmopressin acetate – for salt and water balance)**
The pituitary gland may not produce enough of this hormone after surgery leading to diabetes insipidus (DI) with excessive urination and thirst. DDAVP is usually given once or twice per day. DI usually resolves within 3-5 days post-surgery. Dosing of DDAVP should be carefully coordinated with your endocrinologist since too frequent DDAVP dosing can cause low blood sodium and feeling poorly.
- **Sodium Chloride (salt tablets)**
You may be losing more salt than normal for 5-10 days after surgery and require added salt. Side effects may be upset stomach and nausea so take with food.

- **Saline spray (Ocean Spray)**
May be used 2-3 times/day both nostrils to help nasal mucosal healing.
- **Sinus Rinse (Neil Med)**
Start the 5th day after surgery and do the rinses 3-6 times daily. (Decongestants should be avoided as they will generally not help with post-operative congestion).

If you have permanent pituitary insufficiency (hypopituitarism) and require long-term steroids (prednisone or hydrocortisone) and/or DDAVP, you should have a Medical Alert card or bracelet. This will alert medical personnel to your need for life-saving stress hormone and/or DDAVP coverage in an emergency situation. If you do not have a medical alert bracelet or card, we can provide you an application.

Appointments after hospital discharge

Post-operative sodium blood level check

This test should be done on the 5th or 6th day after surgery. It can be done at Hoag or an outside medical lab closer to your home. Results should be faxed to the office of Dr. Robert Louis at 949-438-3828

Follow-up with Dr. Robert Louis

10 days after surgery with lab results. Please call 949-383-4185 to schedule an appointment. Bring your sodium test results with you to this appointment.

Although post-operative recovery is somewhat different for everyone, here are some helpful guidelines for the first few weeks after your endonasal surgery.

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Activity

For the first week post-surgery, get plenty of rest, avoid heavy lifting (over 5 lbs.), bending over and blowing the nose; walking is encouraged. No flying for 7 days after surgery and/or until cleared to do so by your doctors. After the first week post-surgery you can begin gently blowing your nose. After 3 weeks post-surgery, in general, all activities are ok including exercising, work, bending over and sex.

Bathing

You may shower or bathe when you get home. If you have an abdominal incision from a fat graft, avoid getting it wet for the first 4 days after surgery by covering it with plastic wrap. After the 4th post-operative day your abdominal incision needs no dressing. Suture removal is not necessary as the sutures are buried.

Nasal Care

Expected nasal drainage is usually yellow or blood-tinged and of a thicker mucus consistency compared to cerebrospinal fluid (CSF) which is watery. This normal drainage should decrease or stop completely within 1-2 weeks. Use of saline irrigation (Ocean Spray) 2-3 times a day or steam baths are helpful to improve nasal air flow. On the 5th day after surgery you will start Nasal irrigation and cleaning with the Neil Med Sinus Rinse. It is important to use filtered/bottled water and do these rinses 3-6 times daily. Do not BEND OVER the sink, just stand upright while performing the wash. Avoid pushing too hard or some of the wash will enter your ear. A Q-tip or tissue can also be used to clear your nasal passageways. Do not forcefully blow your nose for 3 weeks after surgery and try to avoid sneezing for the first week after surgery.

Driving

You may resume driving two weeks after surgery provided your vision is not impaired since surgery and you do not have double vision.

Diet

You may resume the type of diet you had before surgery.

Work

You should have clearance from your doctors before returning to work. Generally 2-3 weeks off is recommended before, although desk or computer work may be possible 7-10 days post-surgery.

Warning Signs

- Excessive bleeding from the nose that does not stop
- A clear, thin, continuous, watery nasal drip. Such nasal drainage may be cerebrospinal fluid (CSF)
- Persistent headache not relieved by medication and rest. It is normal to have some mild to moderate headache for up to 2 weeks after surgery
- Excessive fatigue or tiredness (most patients experience some fatigue and tiredness)
- Persistent chill; onset of fever (over 100 °F)
- Onset of stiff neck, nausea/vomiting or diarrhea
- New or increased visual problems. (Blurring, loss of peripheral vision, double vision)
- Onset of excessive urination or thirst

If any of the above symptoms occur contact Dr. Louis' office at 949-383-4185. If the problem is urgent, you may need to go to the emergency room.

Check List Before Surgery

☐ Signed consent forms

☐ Post Op scheduled on _____

Post op to be scheduled 10 – 14 post operatively

☐ Received Hibiclense

Shower and wash the surgical area and entire body (including hair) with given HIBICLENS (Chlorhexidine Gluconate solution 4.0%) Antiseptic/Antimicrobial cleanser. This cleanser helps reduce chances of infections. **Patient must wash entire body within 24 hours of surgery start time**

Patient Consent and Authorization

1. **Consent to Treatment.** I hereby authorize Robert G. Louis, M.D., Inc., through its physicians and health care staff, to provide medical services to me, and I hereby consent to the performance of laboratory tests, diagnostic procedures, and other medical treatment as discussed with my health care provider. I also authorize Robert G. Louis, M.D., Inc. to obtain outside medical and medication histories.
2. **Release of Information.** I hereby authorize Robert G. Louis, M.D., Inc. to release and disclose all or any portion of my patient records to any person or entity which is or may be responsible for all or part of the charges for services rendered to me (including, but not limited to, insurers, employers and health care service plans) for the purposes of obtaining payment. I also authorize the release of patient information to other health care providers for purposes of diagnosis or treatment, and as may be required by law.

I hereby certify that the below individual is granted access to my medical information and may be contacted to discuss my medical condition.

Name	Contact Information	Relation

Approval signature

Patient Name	Patient Signature	Date

The morning of surgery...

Pre-Procedure/Surgery Patient Instructions

Patient

Please arrive 2 hours prior to scheduled procedure

Dietary restrictions

Do not eat or drink after midnight the night before your procedure/surgery

Other

- **Take** approved medications with only a sip of water (less than 1 ounce)
- **Wear** comfortable, loose clothing to the hospital. If you are staying overnight, bring your robe, slippers, and toiletries. Your overnight bag should be left in your car and after your surgery a family member should bring to you once you are in your room
- **Do not wear** facial makeup and/or eye makeup. No powder, perfume, lotions or deodorant
- **Leave** all valuables, including jewelry at home
- Please shower with soap or antimicrobial agent in the morning of, or the night before your surgery
- Please bring a written copy of current medication list
- Please **bring your insurance card and photo ID**. Please bring money or credit card if you have a deductible or co-pay that has not been met
- When you arrive please report to:
 - Hoag Hospital Newport Beach
1 Hoag Drive
Newport Beach, CA 92663
 - Park in the P1 parking structure. Enter Women's Pavilion and check in
- If you are returning home the same day of your procedure/surgery, **please arrange for a responsible person to drive you home**. No public transportation such as Uber, Lyft, Taxi or buses are allowed unless accompanied with a responsible adult. It is recommended someone stay with you for 24 hours after your procedure. You should not drive or make critical decisions for 24 hours after procedure
- **You may be admitted** to the hospital for overnight care due to unforeseen conditions
- Your procedure may be cancelled if:
 - You do not follow dietary restrictions identified above
 - You arrive late to the hospital (must check in 2 hours prior to planned surgery start time)
 - As an outpatient, you do not have a responsible person to accompany and drive you home

If you have questions or concerns, please call Hoag Hospital Newport Beach (949) 764-8280

Preparing for Surgery/Patient Surgical Agreement Form

We at The Hoag Pituitary & Skull Base Tumor Program are committed to an unsurpassed level of personal, compassionate care, driven by cutting-edge technology, research and education. Thank you for allowing us to participate in your care.

Please review this document in its entirety and initial where indicated. Once completed please sign and fax/email to Dr. Robert Louis surgical coordinator:

Miriam Lazaro, MA
miriam.lazaro@hoag.org (best form of contact)
For urgent matters, mark URGENT in the subject line
phone (949) 764-3564
fax (949) 438-3828

Starting now...

Stop smoking Initials ____

Smoking reduces circulation to the nervous system as well as the skin and muscles. Smoking has been shown to significantly reduce the success of surgery by as much as 50%. We recommend stopping all use of tobacco products and replacements (nicotine patches, gum, or pills) for two weeks before and at least 8 weeks after surgery.

Take Multivitamins (optional) Initials ____

Start taking multivitamins twice daily with a calcium supplementation to help improve your postoperative healing.

Take vitamin C (optional) Initials ____

Start taking 500mg of Vitamin C twice daily to promote healing.

Limit vitamin E Initials ____

Limit Vitamin E to less than 400mg per day.

Stop taking herbal medications/fish oils Initials ____

Some over the counter herbal medications or supplements have anti-clotting effects. There is an increased risk of bleeding.

Do not take aspirin or anti-inflammatories (spine procedures) Initials ____

Stop taking any aspirin. Please consult your primary care or cardiologist to discuss time frame for D/C of aspirin. Anti-inflammatories medications need to be stopped for 1 week prior to all spine surgeries requiring fusions and 6 weeks after. Anti-inflammatories diminish the success of spine fusions.

Eating and drinking Initials ____

Do not drink any alcohol 48 hours before and after surgery

Do not eat or drink anything after 12:00 midnight unless otherwise directed. Do not drink alcohol for 48 hours before surgery.

The morning of surgery...

Patient

Please arrive 2 hours prior to scheduled procedure

Dietary restrictions

Do not eat or drink after midnight the night before your procedure/surgery

Other

- **Take** approved medications with only a sip of water (less than 1 ounce).
- **Wear** comfortable, loose clothing to the hospital. If you are staying overnight, bring your robe, slippers, and toiletries. Your overnight bag should be left in your car and after your surgery a family member should bring to your once you are in your room
- **Do not wear** facial makeup and/or eye makeup. No powder, perfume, lotions or deodorant.
- **Leave** all valuables, including jewelry at home.
- Please shower with soap or antimicrobial agent in the morning of, or the night before your surgery.
- Please bring a written copy of current medication list.
- Please **bring your insurance card and photo ID**. Please bring money or credit card if you have a deductible or co-pay that has not been met.
- When you arrive please report to:
 - Hoag Hospital Newport Beach
1 Hoag Drive
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 - Park in the P1 parking structure. Enter Women's Pavilion and check in.
- If you are returning home the same day of your procedure/surgery, **please arrange for a responsible person to drive you home**. No public transportation such as Uber, Lyft, Taxi or buses are allowed unless accompanied with a responsible adult. It is recommended someone stay with you for 24 hours after your procedure. You should not drive or make critical decisions for 24 hours after procedure.
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- Your procedure may be cancelled if:
 - You do not follow dietary restrictions identified above.
 - You arrive late to the hospital (must check in 2 hours prior to planned surgery start time).
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After surgery...

Hospital admission

Each procedure differs for possible admission timeframe depending on complexity of case. If after care is required (Skilled nursing, Home Health, ect) a case manager at Hoag Hospital will facilitate the transfer of care as well as authorization processes through insurance.

Thank you for allowing us to participate in your care

Immediately post operatively if you would like to contact Dr. Louis please inform the nursing station.

You may also reach out to Dr. Louis' PA Tori Heglar at (949) 764-3563 or victoria.heglar@hoag.org.

You may also call the main office line (949) 383-4185 during an emergency and press 3 to reach the surgeon on call.

Should any questions arise regarding the process, insurance, date and times please contact Miriam @949-764-3564 or miriam.lazaro@hoag.org (best form of contact is via email).

Initials _____