

Facing Surgery? Here's How to Prepare.

The best way to navigate a surgery recommendation is to ask a lot of questions.

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When a close family member was recently advised by a doctor to have a minor operation, I felt overwhelmed with fear and uncertainty. How could we be sure surgery was necessary? Should we get a second opinion or trust the doctor who recommended it? What should we do to prepare?

My family is one of many that have recently faced this scenario, as 15 million Americans undergo surgery every year, according to the American College of Surgeons. To find out how best to think through the issue, I reached out to three physicians who study medical decision-making and health literacy.

Here's what I learned about the types of questions to ask your doctor if they recommend a surgical procedure and, if you decide to move forward, the best way to prepare.

Determine whether surgery is the best option.

The first thing you should do is to take a deep breath, said Dr. Susan Pitt, a surgeon at the University of Michigan's Center for Healthcare Outcomes and Policy who studies how treatment decisions are made between patients and doctors. Facing an operation is a lot to digest. If your doctor hasn't already explained the rationale, ask why the procedure is needed. You should also ask if the procedure is typically recommended for your condition under physician guidelines.

Consider asking if you can record the conversation on your phone so you can review the information later when you're calmer, advised Dr. Harlan Krumholz, a cardiologist who directs the Yale School of Medicine Center for Outcomes Research and Evaluation. Or at the very least, take notes. An app called Abridge records doctor-patient conversations and shares the recording and transcript with the patient while also summarizing the information for the physician to help with record keeping.

Even if your doctor makes a compelling case for surgery, you may have other options. Dr. Pitt suggested asking if there are alternative treatments, like other kinds of surgeries that might be less invasive or nonsurgical options. Specify that you're not just interested in the alternatives your particular doctor could offer but also treatments that could be available to you through other doctors as well.

Don't forget to ask what might happen if you don't do anything at all, she added. Perhaps the worst-case scenario isn't all that bad.

Understand what to expect afterward.

You should ask your doctor about the potential benefits of any procedure, Dr. Krumholz said. Often, doctors do surgeries to increase the chance that someone will feel better or that a future risk will be averted — but some surgeries don't achieve those goals, he said.

When Dr. Krumholz and his colleagues interviewed U.S. adults who were candidates for elective angioplasty — a procedure that opens blocked arteries — 70 percent said they believed the procedure would lengthen their life or prevent future heart complications, even though it typically does not. (It usually just relieves chest pain.) When it comes to understanding the risks and benefits of medical procedures, "there's lots of common misunderstandings," he said, so it's wise to probe.

You could, for instance, ask how many people out of 100 with your condition who get this surgery typically feel better afterward or how much the surgery typically reduces the risk of future health problems or death. Some surgeries aren't even needed and may not be helpful: In a 2017 survey of more than 2,000 U.S. physicians, doctors estimated that an average of 11 percent of

medical procedures, including surgeries, are unnecessary.

It's crucial to get a sense for the potential risks, too, Dr. Pitt said — and ask for clarification if what your doctor says sounds vague. (For complicated surgical decisions, you could ask the hospital if it has patient advocates or nurse navigators, both of whom can come to appointments and help make sense of what you're being told, she added.)

Ask, too, about what your recovery from surgery could be like. How long might it last? What will you be able (and not able) to do? How many people never fully recover? “That's vital information to understand,” Dr. Krumholz said. Ask what costs you'll be expected to shoulder, too. “Many people don't realize that they're going to have a big bill,” he said, even if they are covered by health insurance.

Consider getting a second opinion.

It may also help to get a second opinion from a different doctor, said Dr. Glyn Elwyn, an expert on shared decision-making at The Dartmouth Institute for Health Policy & Clinical Practice — especially if the first doctor didn't suggest any alternatives to surgery. He recommended getting that opinion from a general practitioner, such as an internist, who might be more knowledgeable about nonsurgical treatment options. When my family member's doctor didn't mention any alternatives to surgery, he sought a second opinion from a different surgeon who pointed out that there were, in fact, several nonsurgical options.

Dr. Krumholz agreed. “It's your body, and you have a right to be able to hear what other people have to say,” he said.

Pick a surgeon you trust.

If you choose to move forward with surgery, your next big decision is who should do the operation. One guiding principle is that the more surgeries doctors do per year, the better their patients tend to do, Dr. Krumholz said. He suggested asking doctors how many of this particular kind of surgery they have done in the past year and over the course of their careers — and how that rate compares to the threshold that is associated with good outcomes in their field. “If the doctor says, ‘I don't know,’ that's revealing,” Dr. Krumholz said, and you may want to find another doctor.

You can also ask how the doctor's surgical outcomes — rates of efficacy and complications for this kind of surgery — compare with those of other surgeons. “Surgeons should know where they sit compared to the national average,” Dr. Pitt said.

There's no national registry where patients can access this information, so asking your doctor directly is the best place to start.

If your doctor performs surgeries at a teaching hospital, ask whether a junior physician might be assigned to do the surgery instead, and if so, how much experience they have and what the hospital does to ensure that they provide excellent care, Dr. Krumholz said.

If your doctor gets testy that you're making so many inquiries, that is a red flag, Dr. Elwyn said. “If they're uneasy answering these questions, I wouldn't feel comfortable myself as a patient,” he said.

On the day of surgery, pack well.

If you decide to get surgery, bring an overnight bag with you even if you are just having an outpatient procedure, Dr. Pitt suggested, in case you need to stay longer. Pack comfortable clothes — you may be able to wear them, instead of the dreaded hospital gown, during recovery, depending on where your incision is, she said. And bring a toiletry bag containing anything you would want to have with you for personal hygiene.

However, keep your nice jewelry, watch and medications at home. Typically, hospitals and medical centers won't let patients take outside medications on their watch because they can't be certain that what's in the bottle is what is on the label, Dr. Pitt said.

After my relative sought out a second opinion and learned about other treatment options, he decided to first try a less invasive procedure that involved a quicker and easier recovery. It has improved his symptoms immensely. Surgery might still be in the cards one day, but maybe — and hopefully — not.

“There are all sorts of ways that people are made to feel as if surgery is a done deal and there's no other option. When, in fact, there are almost always options,” Dr. Krumholz said.

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