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Going home the same day

> **The short version.** You need a responsible adult to collect you and stay with you overnight. No driving, no alcohol, no signing anything important, no machinery and no looking after other people on your own for the rest of today. Plan for a quiet evening, and expect to feel more tired than you think.

You will only be discharged when it is safe: your observations are stable, you are awake and thinking clearly, you are moving about as well as you were before, your pain and nausea are manageable, you are keeping fluids down, and any bleeding is minimal. If you have had a spinal or epidural, or pelvic surgery, you will also need to have passed urine. These are the criteria the hospital uses, and they are the reason discharge sometimes takes longer than the scheduled time.

Before you come in

- **Arrange your escort in advance.** Someone must collect you from the unit, take you home and stay with you for the first night. A taxi on your own is not enough, and the unit will not discharge you without this arranged.
- Give your escort's mobile number to the staff on arrival.
- Bring loose, comfortable clothing, and leave valuables at home.
- Stock the fridge beforehand — you will not want to shop on the way home.

For the first 24 hours

DO NOT	WHY
Drive, ride a bicycle or operate machinery	Anaesthetic drugs and opioids slow your reactions for longer than you feel; your insurance may also not cover you.
Drink alcohol	It compounds the sedation, worsens nausea and interferes with pain medicines.
Sign legal documents, or make important decisions	Judgement and memory are affected for some hours after anaesthesia, even when you feel normal.
Look after young children or dependants on your own	Your escort is there for this.
Use hot water bottles, heat packs or very hot drinks if any part of you is numb	You can burn yourself without feeling it.
Take anything that was not prescribed or recommended	Including sleeping tablets and herbal remedies, which can interact.

What is normal tonight

- Drowsiness, a sore throat, a dry mouth, a husky voice, and forgetfulness about the day.
- Some nausea, a dull ache or bruising at the drip site, and a general feeling of having been through something.
- Feeling emotional or tearful — this is common and settles.

When to call for help

> **Call the hospital or an ambulance (000) if:** you cannot keep fluids down at all; your pain is not controlled by the medicines you were given; you cannot pass urine; you have a fever, or the wound becomes red, hot, swollen or discharges; you are short of breath or have chest pain; numbness or weakness is not wearing off, or you cannot move a limb; or after a spinal or epidural you develop a severe headache that is worse sitting up, or new back pain with leg weakness.

You will be given written instructions, a contact number for emergencies and advice about when to resume driving and normal activities before you leave. If anything in them is unclear, ask before you go — not afterwards.

On your phone: anaesthesia.herman.au/p/5
Prepared by Dr Herman Lim for patients of his anaesthetic practice · version 1.0, 27 November 2026.
Discharge criteria, escort requirements and the advice that must be given before discharge are from ANZCA **PG15(POM) Guideline on the perioperative care of patients selected for day stay procedures (2018)**, sections 7.2–7.3.
This pamphlet is general information and does not replace individual advice. If my rooms, your surgeon or your hospital have given you different instructions, **those instructions take priority** over anything written here.

Scan to read on your phone