



Preparing For Your Surgery

The Night Before Your Surgery or Procedure

- Please do not eat or drink anything after midnight. Please do not consume any water, gum, mints, or vitamins unless your anesthesiologist has given you special instructions stating otherwise. This is very important for your safety. If you do not follow this rule, your procedure may have to be delayed or rescheduled.
- **DO NOT** shave or apply lotions to the area/extremity undergoing surgery. Any area requiring shaving will be done so at the time of surgery. Shower normally the night before surgery and clean the area/extremity that is undergoing surgery with a clean washcloth and rubbing alcohol. You may shower again the morning of surgery.

The Morning of Your Surgery or Procedure

- DO NOT eat or drink anything in the morning.
- DO NOT wear jewelry, watches, or pierced jewelry.
- WEAR comfortable clothing that you can change easily and that will not bind the site of your surgery or procedure. Good choices are sweat pants, a T-shirt, button-up shirts, shorts, and socks.
- Bring denture cup and/or glasses case or contact lens container if applicable.
- Leave valuables at home.
- Remember to bring your insurance card and a photo ID with you.
- Arrive at least ONE HOUR before your surgery or procedure to complete your admission forms, sign your consent, and visit with your anesthesiologist.
- Your anesthesiologist will discuss your procedure with you; tell you exactly what will happen before, during, and after your surgery or procedure; and answer any remaining questions you may have.
- BRING A FRIEND or a family member to wait for you during your surgery or procedure.
- **REMEMBER: You must have a responsible adult to accompany/drive you home.**

Pre-Operative Testing

- If you are over 45 (Males) or 50 (Females) years of age or have any medical issues requiring daily medications, please assume you will need official pre-operative clearance. You will need a pre-operative physical and laboratory testing within 1 month of your surgery performed by your primary care physician. Unfortunately, even though you may have seen your doctor and obtained a “verbal” surgical clearance, your clearance is not official until it is documented. Usually, once complete, your physician will fax your clearance to your surgeon’s office, however, we also recommend you be proactive in obtaining these documents as well. If you bring these essential documents on the day of surgery, the chance of delay will be greatly minimized.

Pre-Operative Medications

- All changes to normal medication regimens must be done under the supervision of your primary care physician.
- **Stop taking** Aspirin and other Anti-inflammatory medications (NSAIDs) 1 week prior to your surgery. Examples include Motrin, Aleve, Ibuprofen, Bayer, Ecotrin, Naprosyn, and Advil. Tylenol is ok to take for pain relief during this period.
- If you take anti-coagulation medications, under the supervision of your primary care physician and/or cardiologist, if possible, please arrange to stop taking these medications 1 week prior to surgery. **MAKE SURE YOUR SURGEON IS AWARE OF ANY OF THE FOLLOWING MEDICINES OR ANY HISTORY OF BLOOD CLOTS OR PULMONARY EMBOLISM.** Anticoagulant medications include, but are not limited to, Coumadin (Warfarin), Heparin, Lovenox, Argatroban, Arixtra, Pradaxa, Xarelto, and Plavix.
- If you have an inflammatory condition that requires steroid (Prednisone) or Methotrexate, under the supervision of your rheumatologist, if possible, please arrange to stop taking these medications 1 week= prior to surgery and make sure your surgeon is aware of these medications.
- If you are a diabetic, implement your best glucose management. Carefully monitor your glucose values.
- In addition, if you are taking any medical herbs such as Cayenne, Cowhage, Echinacea, Ephedra, Feverfew, Garlic, Gingko, Goldenseal, Kava-kava, Licorice, St. John's Wart, Saw Palmetto or Valerian, please stop their use 1 week prior to your surgery.

What To Bring To Your Surgery

- A current list of medications with names and doses, insurance cards, identification cards, etc.
- If you have been given a post-operative brace or sling, bring it with you on the day of your surgery.
- Hard copies of all relevant imaging (Xray, CT, MRI) if not already provided to your surgeon.

What to Do Before Your Surgery

- Optimize your Skin – your skin is your body's best defense against infection! Avoid injuries including insect bites, sunburns, scratches, and cuts.
- DO NOT shave the site of the operation prior to the surgery! We will do this day of the surgery with a special shaver that is gentler to the skin.
- Proper skin cleaning the week prior to the surgery can also protect you from infection. Use a soft, nonabrasive sponge and anti-bacterial soap to clean the operative limb.
- Avoid all skin lotions the week prior to surgery.
- Stop smoking. If you have ever looked for a reason to quit, your surgery is an excellent reason. Aside from decreasing your risk from just about everything bad, including stroke, heart attack, and many cancers), decreasing smoking will help everything heal after surgery. Ask your primary care doctor if you need help with this difficult process, but know, stopping smoking is perhaps the MOST important change you can do to help lower infection risks after surgery.
- Let your surgeon know if you have had a prior infection that we haven't already discussed. This information is vital, as it might change the antibiotic type and dose you may get during the surgery.
- Let your surgeon know if you have an active infection in another area, or recent infection involving your lungs, bladder (UTI), mouth, sinuses etc. This includes recent or new fever, cold, chills, sweats, nausea or vomiting. It is safer to do surgeries after other areas are appropriately treated.

What To Do After Your Surgery

- Take the antibiotics if prescribed.
- Take the pain medications as needed. It is best to stay on top of pain, rather than catching up to it. Your surgeon will be able to adjust the amount of the pain medication over you are taking over the next several weeks, and it is unlikely you will need prescription strength pain medication for long term.
- Arrange a post-operative visit with your surgeon 10-14 days after your surgery.
- If you ever have any concern that you are developing an infection (increased redness/drainage from the incision sites, persistent fever greater than 101 F, increased pain), please let your surgeon know immediately. He can be reached by phone at the during normal work hours and one of our physicians are always reachable through the office answering service. If ever there is an emergency, please call 911.