

**Yazdan Raji, MD & Mark R. Hutchinson, MD****UI Health | UIC Sports Medicine**

**During Business Hours:** Call **312-996-1300** for any questions or concerns.

**After Hours:** Call **312-996-7000** for urgent questions after 6 PM. Ask for the orthopaedic resident on call.

**General Pre-operative Patient Education**

Thank you for entrusting us with your surgical care. The following pages will answer many of the questions that you may have regarding your surgery. Please read through these instructions carefully so that your road from surgery to recovery may be as smooth as possible.

**General Information:**

Dr. Raji and Dr. Hutchinson typically performs surgery on an Outpatient (Same-Day) basis. Depending on the type of operation you have and your medical history, some patients will stay overnight for observation or pain control.

**Insurance Coverage:**

The UI Health will initiate insurance authorization for pre-certification with your insurance if required. Please be advised that this process does take time. You should contact your insurance company directly with any questions regarding coverage and benefit information.

**Medical Clearance:**

- Depending upon the planned surgical procedure and your medical history, you may be required to undergo Pre-Admission Testing, medical clearance, and/or obtain clearance from a specialist. This is typically not required for healthy patients that are younger than 50 years old undergoing outpatient surgery. You may be required to get labs or imaging prior to your surgery. If that is the case, please have these done 1 week before your surgical date.
- If your primary care provider is outside the UI Health network, please have the notes faxed to our office at the number above.
- Cardiologist Clearance: required if you have cardiac stents, a pacemaker, history of an arrhythmias, have had any kind of heart surgery, or have had a heart attack.
- Hematology Recommendations: may be requested if you have a personal history of blood clot (DVT or PE) or a strong family history of blood clots.
- Smoking: Smoking is not only harmful to your heart and lungs, but significantly increases the chance that you develop a complication after surgery. Now is the best time to quit. Talk with your primary care physician who may be able to help.

### Medications:

- Do NOT take anti-inflammatories (Aspirin, Naprosyn, Aleve, Advil, Motrin, Ibuprofen, etc.) within 10 days of surgery. These medications increase the bleeding risk during/after surgery. Tylenol is OK.
- Blood Thinners: If you take a blood thinner (Warfarin, Coumadin, Plavix, Clopidogrel, Aspirin, Heparin, Aggrenox, Lovenox, Enoxaparin, Xarelto, Rivaroxaban, etc.), you **MUST** have specific instructions from the prescribing doctor regarding stopping and restarting of these medications. In general, we recommended these medications be discontinued approximately 7-10 days prior to your planned procedure. Please follow your prescribing doctor's recommendations.
- Birth Control: may increase the risk of developing a blood clot following lower extremity surgery. For your safety, it is recommended that you stop birth control until you are full weight bearing and walking normally without crutches.
- If you are currently on a narcotic (Vicodin, Percocet, Oxycontin, etc.), decrease its use now. Your body gets used to taking this medication and it may be difficult to control your pain after surgery.

### The Week Before Surgery:

- Stop taking Aspirin, Anti-inflammatory medicines (NSAIDs, ibuprofen, Aleve, etc.), fish oil, or Vitamin E supplements 1 week before surgery.
- If you are on a blood thinner (Warfarin, Lovenox, Pradaxa), please check with Dr. Raji and/or your primary care physician when to stop these medications.
- Make arrangements for transportation for after your surgery as you will not be permitted to drive yourself.
- Make arrangements to take time off work as necessary.

### The Night Before Surgery:

- You will receive a call from Surgical Admissions with the time of your surgery, as well as what time to arrive. This call is usually made in the afternoon.
- Please note that the hospital (not our office) determines the surgery schedule each day.
- As such, changes/delays in your OR time may occur due to unforeseen emergencies. Please be understanding of the dynamic nature of the OR schedule.
- Take a shower using the chlorhexidine gluconate scrub brushes you received in the office. This is a special type of soap that kills germs on contact and can continue working for up to 24 hours! Make sure you apply the solution directly on your skin with the sponge, then rinse off afterwards.
- **Do not have anything to eat or drink after midnight the night before your surgery!!!** This includes gum, candy, mints, water, coffee, or juice. You need to be have a completely empty stomach for the safety of anesthesia.

- If you take medications in the morning, please ask your doctor or anesthesiologist about whether or not to take these on the morning before surgery.

### Day of Surgery:

- You will meet with Dr. Raji or Dr. Hutchinson on the day of surgery to review the planned procedure, answer any remaining questions, and mark the operative site with his initials.
- Anesthesia: You will meet with the anesthesiologist prior to surgery and have the opportunity to ask questions about the type of anesthesia you will be receiving.
  - Regional (nerve block) Anesthesia: is a technique where a portion of the patient's body is made numb during surgery, like at the dentist's office for pain control after surgery.
  - General Anesthesia: is when you are completely asleep during the procedure, and require a breathing tube.
- Please let Dr. Raji, Dr. Hutchinson or the anesthesiologist know if you are allergic or have had a bad reaction to any medications or anesthesia in the past.
- What to Bring:
  - Photo ID and Insurance Card
  - Glasses if you wear contact lenses
  - Telephone numbers of family member or friend
  - List of Your Medications
  - Small Bag with personal items if you are staying overnight (will be securely stored during surgery)

### After Surgery:

- Recovery Room (PACU): The anesthesia team and nursing staff will monitor your post-operative care and your return to full awareness. Regardless of the type of anesthesia performed, you will stay at the hospital until your condition is stable and you are safe to leave. In order to be considered safe to go home, you must be able to stand up and walk without feeling dizzy or lightheaded, tolerate food and drink, and be able to urinate.
- After surgery, postoperative instructions and pain medication prescriptions will be provided. You will receive the general postoperative instruction packet to review prior to your surgery.
- You will typically receive a call the day after surgery to check on you and answer questions. Standard post-operative visits typically occur 1-2 weeks, 6 weeks, 12 weeks, 6 months and 1 year after surgery.
- While taking narcotic pain medication, you will not be permitted to drive. Please arrange for transportation for your post-operative visits.

### Returning to Work/School:

- This varies widely by patient and type of surgery performed. Many patients are able to work from home or return to desk work or school 3-7 days after surgery. You must no longer require narcotic pain medication during work/school hours. Please call the office above if you require any specific letters for work or school.
- Due to the increased risk of blood clots, avoid flying the first 6 weeks after your surgery.