

### **INSTRUCTIONS FOR SURGERY**

## In order to make your admission and hospital stay smooth and more pleasant, please comply with the following instructions:

If your surgery is on **MONDAY**, please report to:

NYU Langone Orthopedic Hospital 301 East 17<sup>th</sup> Street New York, NY 10003

If indicated by your physician, schedule your pre-surgical testing, located at

303 2<sup>nd</sup> Avenue, 1<sup>st</sup> Floor Suite 16 New York, NY 10003

☐ If your surgery is on **FRIDAY**, please report to:

NYU Langone Outpatient Surgery Center 339 East 38<sup>th</sup> Street New York, NY 10016

If indicated by your physician, please call 212-263-5985 to schedule your pre-surgical testing, located at

240 East 38<sup>th</sup> St. New York, NY 10016 Mezzanine Level

#### \*One business day prior to your surgery, hospital staff will contact you to finalize your surgery time.

- A. Bring jogging/warm-up pants, shorts/skirt if having knee surgery.
- B. Bring a shirt/blouse that buttons open in front instead of a pullover if having shoulder/elbow surgery.
- C. If you own crutches, bring them with you, if having knee, ankle or hip surgery.
- D. Bring all medications or a list of current medications you are taking with you. Also bring a list of any allergies.
- **E.** Blood pressure medication should be taken as usual with a sip of water the morning of surgery. **DO NOT** take a diuretic or fluid pill. Seizure medications may be taken before surgery.
- F. **DO NOT** take oral diabetes medications (pills) the night before or the day of surgery. If you are on insulin, **DO NOT** use insulin the morning of surgery unless you are a "problem diabetic" in which case you need to consult your physician regarding the proper insulin dose for you to use prior to surgery.



- G. Please **DO NOT** wear makeup or nail polish the day of surgery. You will need to remove contact lens (including extended wear), denture, or bridges prior to surgery. Please bring your own containers for storage.
- H. Leave all jewelry and valuables at home. The hospital will not take responsibility for lost or missing items.
- I. You need to report any skin irritation, fever, cold, etc., to Dr. Jazrawi.
- J. You will need to bring your insurance card/information with you.
- K. DO NOT eat, drink (including water), chew gum, candy, smoke cigarettes, cigars, use smokeless tobacco, etc., after midnight the night before surgery or the morning of your surgery. The only exception is a sip of water to take necessary medications the morning of surgery.
- L. You must arrange someone to drive you home when ready to leave the hospital. You will not be allowed to drive yourself home after surgery. We can assist you if you need transportation to the airport or hotel, however, you need to let us know in advance (if possible) so we can make the arrangement.
- M. NOTE: DO NOT take any aspirin, aspirin products, anti-inflammatories, Coumadin or Plavix at least 5 days prior to surgery. You are allowed to take Celebrex up to your day of surgery. If your medical doctor or cardiologist has you on any of the above medications. Please check with him/her before discontinuing the medication. You may also take Tylenol or Extra-Strength Tylenol if needed.

#### Nonsteroidal Anti-Inflammatory (Arthritis) Medications:

Some of the most common names for frequently used NSAID's include: Motrin, Indocin, Nalfon, Naprosyn, Naprelan, Arthrotec, Tolectin, Feledene, Voltaren, Clinoril, Dolobid, Lodine, Relafen, Daypro, Advil, Aleve, Ibuprofen.

## Your first follow up appointment is usually scheduled for approximately 2 weeks after your surgery at the 333 East 38th street office. The date and time of your follow-up is \_\_\_\_\_\_.

If you cannot make this appointment or need to change the time, please contact the office.

If you have any questions regarding your surgery, please contact the office at 646-501-7223 option 4, option 2 or via the internet at www.newyorkortho.com



### <u>Home Supplies For Your Surgery</u> <u>Laith M Jazrawi, MD</u>

#### **Open Surgery**

- A. **Open knee surgery** (ACL reconstructions, ALL (Anterolateral ligament) reconstructions, Autologous Chondrocyte Implantation, PCL reconstructions, High tibial osteotomy, Distal femoral osteotomy, Posterolateral corner reconstruction, MCL reconstruction, OATS (osteochondral autograft), Osteochondral allograft,)
  - **a.** You will need 4x4 (or similar size) waterproof bandages for fourteen days. **Bandage changes for open knee surgery done post-op day #3.**
- **B. Open shoulder surgery**, (Biceps Tenodeis, Latarjet, Open capsulorrhaphy, Glenoid reconstruction using Distal tibial allograft):
  - **a.** You will need 4x4 (or similar size) waterproof bandages for fourteen days. Also, a box of **Bandage changes for open shoulder surgery are done post-op day #3.**
- **C. Open Ankle Surgery** (Achilles Tendon Repair, Os Trigonum Excision, Ankle OCD, Modified Brostrom-Gould Procedure, Peroneus Longus/Brevis Repair)- You do not have to worry about dressing changes as your leg will be in splint/cast for the first two weeks
- D. Open Elbow surgery (Distal Biceps Repair, LCL Reconstruction, Radial Head or Capitellum ORIF, Radial Head Replacement/Resection, Triceps Repair, UCL Reconstruction Tommy John Surgery)- You do not have to worry about dressing changes as your arm will be in splint/cast for the first two weeks. For Tennis Elbow surgery (lateral epicondylitis) and Golfer's Elbow Surgery (medial epicondylitis), dressing changes are are started on post-op day #3. You will need 4x4 (or similar size) waterproof bandages for fourteen days.
- **E.** Hamstring repair You will have a special dressing placed on at the time of surgery that will be kept on for the first 2 weeks after surgery. You will then need 4x4 (or similar size) Tegaderm or Telfa waterproof dressings. Also, a box of 4" by 4" gauze sponges if there is bleeding at the incision site.

#### Arthroscopic Surgery

- **A.** For Arthroscopic shoulder, elbow, knee, or ankle surgery:
  - a. Regular adhesive bandages ("Band-aids") can be used for arthroscopic portals x 2 weeks.
  - **b.** If biceps tenodesis was performed, use 4x4 (or similar size) waterproof bandages on wounds.
  - c. In general, dressing changes for arthroscopy are done on post operative day 3



#### **Post-Operative Medication Administration**

#### Knee Arthroscopy

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- Pain- Motrin 800mg. 1 tab three times daily, as needed
- Adjunctive pain: Percocet (Oxycodone/Acetaminophen) 5/325 (5 tabs); One tab every 6 hours as needed for adjunctive pain\*

#### Meniscal Repair, Meniscal Root Repair

- Pain- Percocet (Oxycodone/Acetaminophen)10/325; One tab every 6 hours as needed\*
- Constipation Docusate (Colace) 100mg; 1 tab twice daily as needed.
- DVT prophylaxis- Aspirin 81mg; 2 tabs daily x 14 days
- \*\*\*\*\*\* Aspirin starts post-operative day #1

#### **Knee Ligament Reconstruction**

- Pain- Percocet (Oxycodone/Acetaminophen) 10/325; One tab every 6 hours as needed\*
- Antibiotic Keflex 500mg; One tab 4 times daily x 4 days
  - Keflex allergy Clindamycin 300mg; One tab twice daily x 7days.
- Constipation Docusate (Colace) 100mg; 1 tab twice daily as needed (Max 3 tabs)
- DVT prophylaxis- Aspirin 81mg; 2 tabs daily x 28 days
- \*\*\*\*\*Antibiotics and Aspirin starts post-operative day #1

## Toe-touch bearing Lower Extremity Surgery (Distal Femoral Osteotomy, High Tibial Osteotomy, Tibial Tubercle Osteotomy, Cartilage Transplant)

- Antibiotic Keflex 500mg; One tab 4 times daily x 4 days
  - Keflex allergy Clindamycin 300mg; One tab twice daily x 7days.
- Pain- Percocet (Oxycodone/Acetaminophen) 10/325; One tab every 6 hours as needed\*
- Constipation Docusate (Colace) 100mg; 1 tab twice daily as needed (Max 3 tabs)
- DVT prophylaxis- Aspirin 81mg; 2 tabs daily x 28 days
- \*\*\*\*\*\*Antibiotics and Aspirin starts post-operative day #1

#### Shoulder/Elbow Surgery

- Antibiotic Keflex 500mg; One tab 4 times daily x 4 days
  - Keflex allergy Clindamycin 300mg; One tab twice daily x 7days.
- Pain- Percocet (Oxycodone/Acetaminophen)10/325; One tab every 6 hours as needed\*
- Constipation Docusate (Colace) 100mg; 1 tab twice daily as needed.



#### Ankle fracture surgery & Achilles Tendon Surgery

- Antibiotic Keflex 500mg; One tab 4 times daily x 4 days
  - Keflex allergy Clindamycin 300mg; One tab twice daily x 7days.
- Pain- Percocet (Oxycodone/Acetaminophen)10/325; One tab every 6 hours as needed\*
- Constipation Docusate (Colace) 100mg; 1 tab twice daily as needed.
- DVT Prophylaxis Aspirin 81mg; 2 tabs daily x 28 days
- \*\*\*\*Antibiotics and Aspirin starts post-operative day #1

#### Ankle arthroscopy +/- Microfracture

- Pain- Percocet (Oxycodone/Acetaminophen) 10/325; One tab every 6 hours as needed\*
- DVT Prophylaxis Aspirin 81mg; 2 tabs daily x 14 days
- \*\*\*\*Aspirin starts post-operative day #1

#### Hamstring repair

- Antibiotic Keflex 500mg; One tab 4 times daily x 4 days
  - Keflex allergy Clindamycin 300mg; One tab twice daily x 7days.
- Pain- Percocet (Oxycodone/Acetaminophen)10/325; One tab every 6 hours as needed\*
- Constipation Docusate (Colace) 100mg; 1 tab twice daily as needed.
- DVT Prophylaxis Aspirin 81mg; 2 tabs daily x 28 days
- \*\*\*\*Antibiotics and Aspirin starts post-operative day #1

\* **No refills of narcotic pain medication will be given**. You must transition to over the counter Aleve or Motrin after your initial course of narcotic pain medication is completed. If you have any stomach issues you may transition to Extra Strength Tylenol instead.

# \*\*\* HIGH RISK DVT Patients – patients on oral contraceptives, smokers, or history of previous DVT or embolus

- Will receive
  - Xeralto (Rivaroxaban) 10mg; 1 tab daily x 14 days
  - Followed by aspirin 81mg; 2 tabs daily x 14 days



### **<u>Post-Operative Instructions</u>** <u>General Open Wound Care</u>

#### Day of Surgery

- A. Relax. Diet as tolerated.
- **B.** Icing is important for the first 5-7 days post-op. While the post-op dressing is in place, icing should be done continuously. Once the dressing is removed on the first or second day, ice is applied for 20-minute periods 3-4 times per day. Care must be taken with icing to avoid frostbite.

You will be contacted by East Coast Orthotics regarding an ice compression unit to be used after surgery. This helps with pain and swelling but typically is not covered by insurance. The cost is \$200-300 for a 2-week rental. Alternatively, ice gel packs with a shoulder or knee sleeve can be provided by the hospital for a minimal charge.

C. Pain medication as needed every 6 hours (refer to pain medication sheet)

#### **First Post-Operative Day**

**A.** Continue ice pack everyone to two hours while awake and pain meds as needed or cryocuff or gameready. Ice cuff as per instructions.

#### Second Post-Operative Day

**A.** Continue ice pack up to post op day 2-5 and utilize after physical therapy sessions.

#### **Third Post-Operative Day**

- **A.** You may remove surgical bandage and shower this evening. Apply Tegaderm (transparent medical dressing) to wounds prior to showering and remove and apply fresh Tegaderms after shower is complete
- **B.** You will need to keep your incisions covered with Tegaderms when taking a shower for the first 2 weeks

#### **Physical Therapy (IF INDICATED BY YOUR SURGEON)**

- **A.** Physical Therapy should begin at 4 weeks. Please call your preferred facility to make an appointment.
- **B.** Pendulum exercises should begin after the first postoperative follow-up visit.

#### \* Tegaderms may be purchased at local pharmacies.

\*Note: Your shoulder will be very swollen. It may take a week or longer for this to go away. It is also common to notice burning around the shoulder as the swelling resolves. If excessive bleeding occurs, please notify Dr. Jazrawi.

Call our office @ 646-501-7223 option 4, option 2 to confirm your first postoperative visit, which is usually about 1-2 weeks after surgery. If you are experiencing any problems, please call our office or contact us via the internet at www.newyorkortho.com.