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 17th Street  
New York, NY 10003

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

303 2nd Avenue, 1st Floor Suite 16  
New York, NY 10003

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

NYU Langone Outpatient Surgery Center  
339 East 38th 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 38th 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.

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**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
Home Supplies For Your Surgery
Laith M Jazrawi, MD

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 (osteoochondral 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
- 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 7 days.
- 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

Non-weight 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 7 days.
- 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 7 days.
- 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 7 days.
- 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 7 days.
- 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
Post-Operative Instructions
Os Trigonum Excision

Day of Surgery

A. Diet as tolerated.
B. Pain medication as needed every 6 hours.
C. Icing is important for the first 5-7 days post-op. Ice is applied for 20-minute periods 3-4 times per day. Care must be taken with icing to avoid frostbite.
D. Make sure you have a physical therapy post-op appointment set up for the first week-10 days after surgery.

First Post-Operative Day

A. Continue icing
B. You will need to keep your incision dry when taking a shower. Do this for about 2 weeks after surgery. If you have a splint or half cast (hardshell) leave it dry. No need to do dressing changes until your first follow-up visit at 2 weeks post-op.

Second Post-Operative Day

A. Continue icing

Third Post-Operative Day Until Return Visit

A. Continue ice pack as needed.
B. If you don't have a split or half cast, you may remove surgical bandage after you shower and apply a waterproof bandage (may be purchased at your local pharmacy) to the wounds. Please ensure that the bandage is large enough to completely cover the incision. Apply a fresh waterproof bandage after each shower. If you have splint you do not need to change anything. Keep extremity dry.

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.
Rehabilitation Protocol: Os Trigonum Excision

Name: ___________________________________________________________ Date: ________________________

Diagnosis: _________________________________________________________ Date of Surgery: ________________

□ PHASE I (Weeks 0-2)
  • Posterior slab/splint
  • Non-weight bearing with crutches

□ PHASE II (Weeks 2-6)
  • Weeks 2-6
    o Aircast walking boot with 2 cm heel lift (wear while sleeping, can remove for bathing/dressing)
    o Weight-bearing as tolerated
    o Can start PT exercises:
      ▪ Initiate active plantar flexion and dorsiflexion to neutral
      ▪ Initiate active inversion/eversion below neutral
      ▪ Hip/knee exercises with no ankle involvement
      ▪ Non-weight bearing fitness exercises
      ▪ Hydrotherapy – within motion and weight-bearing limitation
    o Wean off boot at week 4

□ PHASE III (Weeks 6-12)
  • Weeks 6-8
    o Continue weight-bearing as tolerated
    o Exercises:
      ▪ Dorsiflexion stretching
      ▪ Graduated resistance exercises (open and closed kinetic chain)
      ▪ Proprioceptive and gait training
      ▪ Fitness exercises to include WBAT – bicycling, elliptical machine
      ▪ Hydrotherapy
  • Weeks 8-12
    o Continue to progress ROM, strength, proprioception

□ PHASE IV (12 Weeks – Beyond)
  • Continue to progress ROM, strength, proprioception
  • Increase dynamic weight-bearing exercise – plyometric training
  • Sport-specific training
  • Work to restore strength, power, endurance

Comments:

Frequency: _____ times per week  Duration: ______ weeks

Signature: _____________________________  Date: ______________________
PHYSICAL THERAPY LOCATIONS

**Please schedule your post-operative physical therapy appointments BEFORE your surgery**

Manhattan Sports and Manual Physical Therapy
10 East 33rd Street, 2nd Floor
New York, NY 10016
(646) 487-2495
www.msmpt.com

NYU Langone Orthopedic Center PT
333 E 38th St, 5th Floor
New York, NY 10016
(646) 501-7077

Other Locations:

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<tr>
<th>BROOKLYN</th>
<th>Cobble Hill</th>
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<th>Bay Ridge</th>
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<td>Occupational &amp; Industrial Orthopaedic Center</td>
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<td>RUSK at the Men's Center</td>
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<td>Physical Therapy &amp; Rehabilitation</td>
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<tr>
<td>STAR Physical Therapy</td>
<td>160 E. 56th Street</td>
<td>New York</td>
<td>10022</td>
<td>(212) 355-7827</td>
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<tr>
<td>Therapeutic Inspirations</td>
<td>144 E. 44th St</td>
<td>New York</td>
<td>10017</td>
<td>(212) 490-3800</td>
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<tr>
<td>Health SOS</td>
<td>139 E. 57th Street</td>
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<td>(212) 753-4767</td>
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<tr>
<td>Premier PT</td>
<td>170 E. 77th Street</td>
<td>New York</td>
<td>10021</td>
<td>(212) 249-5332</td>
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<tr>
<td>Rusk PT at Women’s Health Center</td>
<td>207 E. 84th Street</td>
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<td>10028</td>
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<tr>
<td>SPEAR PT</td>
<td>120 E. 56th Street</td>
<td>New York</td>
<td>10022</td>
<td>(212) 759-2211</td>
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<tr>
<td>Sports PT of NY</td>
<td>1400 York Ave</td>
<td>New York</td>
<td>10021</td>
<td>(212) 988-9057</td>
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<tr>
<td>Premier PT</td>
<td>162 W. 72nd Street</td>
<td>New York</td>
<td>10023</td>
<td>(212) 362-3595</td>
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<tr>
<td>Sports PT of NY</td>
<td>2465 Broadway</td>
<td>New York</td>
<td>10025</td>
<td>(212) 877-2525</td>
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<tr>
<td>Sports Medicine at Chelsea</td>
<td>22 West 21st Street Suite 400</td>
<td>New York</td>
<td>10010</td>
<td>(646) 582-2056</td>
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<tr>
<td>Chelsea Physical Therapy &amp; Rehabilitation</td>
<td>119 W. 23rd Street</td>
<td>New York</td>
<td>10011</td>
<td>(212) 675-3447</td>
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<tr>
<td>SPEAR Physical Therapy</td>
<td>36 W. 44th Street</td>
<td>New York</td>
<td>10036</td>
<td>(212) 759-2280</td>
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**QUEENS**

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<tr>
<td>Ergo Physical Therapy P.C.</td>
<td>107-40 Queens Blvd</td>
<td>Forest Hills</td>
<td>11375</td>
<td>(718) 261-3100</td>
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<tr>
<td>Susan Schiliro, PT (Hand &amp; Upper Extremity only)</td>
<td>99-32 66th Road</td>
<td>Rego Park</td>
<td>11374</td>
<td>(718) 544-1937</td>
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**STATEN ISLAND**

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<td>One on One PT</td>
<td>31 New Dorp Lane 1st, Floor</td>
<td>Staten Island</td>
<td>10306</td>
<td>(718) 979-4466</td>
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<tr>
<td>One on One PT</td>
<td>33 Richmond Hill Rd</td>
<td>Staten Island</td>
<td>10314</td>
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<tr>
<td>Health SOS</td>
<td>375 Deer Park Ave</td>
<td>Babylon</td>
<td>11702</td>
<td>(631) 321-6303</td>
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<tr>
<td>Hand in Hand Rehabilitation (Hand &amp; Upper Extremity only)</td>
<td>346 Westbury Ave</td>
<td>Carle Place</td>
<td>11514</td>
<td>(516) 333-1481</td>
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<tr>
<td>Home PT Solutions</td>
<td>111 W. Old Country Rd.</td>
<td>Hicksville</td>
<td>11801</td>
<td>(516) 433-4570</td>
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<tr>
<td>Bi-County Physical Therapy &amp; Rehabilitation</td>
<td>270-03 Hillside Ave</td>
<td>New Hyde Park</td>
<td>11040</td>
<td>(718) 831-1900</td>
</tr>
<tr>
<td>Bi-County Physical Therapy &amp; Rehabilitation</td>
<td>397 Willis Ave</td>
<td>Williston Park</td>
<td>11596</td>
<td>(516) 739-5503</td>
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**WESTCHESTER**

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<tr>
<th>Health SOS</th>
<th>1015 Saw Mill River</th>
<th>Ardsley</th>
<th>10502</th>
<th>(914) 478-8780</th>
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<tr>
<td>Premier PT</td>
<td>223 Katonah Ave</td>
<td>Katonah</td>
<td>10536</td>
<td>(914) 232-1480</td>
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<tr>
<td>PRO Sports PT of Westchester</td>
<td>2 Overhill Road</td>
<td>Scarsdale</td>
<td>10583</td>
<td>(914) 723-6987</td>
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<tr>
<td>Westchester Sports Physical Therapy, PC</td>
<td>672 White Plains Road</td>
<td>Scarsdale</td>
<td>10583</td>
<td>(914) 722-2400</td>
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<tr>
<td>Rye Physical Therapy and Rehabilitation</td>
<td>411 Theodore Fremd Ave</td>
<td>Rye</td>
<td>10580</td>
<td>(914) 921-6061</td>
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<tr>
<td>Rye Physical Therapy and Rehabilitation</td>
<td>15 North Broadway; Suite K</td>
<td>White Plains</td>
<td>10601</td>
<td>(914) 686-3132</td>
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**CONNECTICUT**

| Premier PT                                               | 36 Old Kings Hwy S | Darien | 06820 | (203) 202-9889 |

**NEW JERSEY**

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<tr>
<th>Jersey Central Physical Therapy &amp; Fitness</th>
<th>21 47 Route 27</th>
<th>Edison</th>
<th>08817</th>
<th>(732) 777-9733</th>
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<tr>
<td>Jag PT</td>
<td>34 Mountain Blvd</td>
<td>Warren</td>
<td>07059</td>
<td>(908) 222-0515</td>
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<tr>
<td>Jag PT</td>
<td>622 Eagle Rock Ave</td>
<td>West Orange</td>
<td>07052</td>
<td>(973) 669-0078</td>
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