



Dear Patient,

We have created this packet of information in order to make your surgical experience as pleasant as possible. Enclosed are several preliminary papers regarding your pre-admission testing and material describing what you need to do both pre-operatively and post-operatively.

The pre-operative nurse will call you LATE the afternoon before your surgical date to inform you of the time and location of your surgery. You will also be reminded not to eat anything after midnight, prior to your surgery. If you are taking medications, specific instructions will be given as to whether or not you may take your prescription dose. Please check with the nurse when you are called.

On the day of surgery your anesthesiologist will answer questions regarding **anesthesia** once you have reached the holding area. Typically, an epidural/spinal block is used for the majority of the surgical cases involving the foot and ankle though ankle level block and popliteal block (behind the knee) may be used frequently as well. Post-operatively, a small percentage of patients experience some discomfort in their lower back, which is usually relieved with a dose of extra strength Tylenol.

You **must have someone escort you home** from the hospital, as per NY State Law. Prescriptions for your **post-op medication** will be given to you after the surgery, before you leave the hospital.

Please contact our office should you have any questions or concerns regarding your surgery.

We wish you a speedy recovery.

Dr. David S. Levine's Staff



# Herbal Products/Vitamins/Supplements Pre-operative Guidelines

Discontinue 14 days prior to surgery	Continue
Arnica	Calcium (Calcium carbonate, calcium citrate, tricalcium
Bromelain	phosphate)
Dong quai (Chinese herb)	Ferrous Sulfate (Iron)
Echinacea	Folic Acid (Folate)
Ephedra (Ma Huang)/Ephedrine	Niacin (Vitamin B3)
Feverfew	Vitamin A (Retinoic Acid)
Garlic	Vitamin B1 (Thiamine)
Ginger	Vitamin B2 (Riboflavin)
Ginkgo Biloba	Vitamin B6 (Pyridoxine)
Ginseng	Vitamin B12 (Cyanocobalamin)
Glucosamine	Vitamin C (Ascorbic Acid)
Goldenseal	Vitamin D (Cholecalciferol, ergocalciferol)
Guarana (Caffeine)	Multivitamin (continue as long as it does not contain any
Kava	supplements in discontinue column)
Licorice	
Omega-3 Fatty Acids (Fish Oil)	
Saw Palmetto	
St. John's Wart	
Valerian	
Vitamin E (Tocopherol)	

Anti-inflammatory Medications	When to discontinue
Advil/Motrin (Ibuprofen)	24 hours prior to surgery
Aleve/Anaprox/Naprosyn (Naproxen)	Disontinue 4 days prior to surgery
Ansaid (Flurbiprofen)	Discontinue 48 hours prior to surgery
Celebrex (Celecoxib)	Discontinue 48 hours prior to surgery
Clinoril (Sulindac)	Discontinue 4 days prior to surgery
Daypro (Oxaprozin)	Discontinue 12 days prior to surgery
Dolobid (Diflunisal)	Discontinue 3 days prior to surgery
Feldene (Piroxicam)	Discontinue 12-14 days prior to surgery
Indocin (Indomethacin)	Discontinue 48 hours prior to surgery
Lodine (Etodolac)	Discontinue 48 hours prior to surgery
Mobic (Meloxicam)	Discontinue 4-5 days prior to surgery
Nalfon (Fenoprofen)	Discontinue 24 hours prior to surgery
Orudis (Ketoprofen)	Discontinue 48 hours prior to surgery
Relafen (Nabumetone)	Discontinue 4-6 days prior to surgery
Tolectin (Tolmetin)	Discontinue 2-3 days prior to surgery
Toradol (Ketorolac)	Discontinue 3-4 days prior to surgery
Voltaren (Diclofenac)	Discontinue 48 hours prior to surgery

- ♦ Patients taking rheumatoid medications such as Methotrexate, Remikade, and Embrel must discontinue two weeks prior to surgery. Do not resume these until you are advised to do so.
- ♦ If you take 325mg daily, decrease to 81mg 1 week prior to surgery unless you are advised by your medical doctor to stop it
- ♦ You will **not** need to take any oral antibiotics before surgery as this will be given to you by the anesthesiologist on the day of surgery.
- ♦ You **MUST STOP SMOKING** and discontinue products containing nicotine until your incisions and fractures are healed.
- ♦ If you have any further questions regarding your medications, please call our office: 212-606-1940.

### **DISCHARGE INFORMATION**

- ♦ You will be discharged from the Hospital with **prescription's** for the following:
  - **Pain Medication** (i.e. Percocet, Vicodin).

    Please advise the office if you experience nausea or have any allergies to medication.
  - **Ibuprofen** for the first three days for inflammation
  - **Neurontin (gabapentin)** for the first three days to help with nerve pain
  - **Zofran** as needed for nausea
  - **Aspirin (or another blood thinner)** for blood clot prophylaxis
- ♦ You will be discharged from the hospital with a walker or crutches. A physical therapist will instruct you on how to ambulate non-weight bearing on the affected side. Depending on your injury, you will either have a hard splint or a bulky dressing which you are to leave in place until your first post-operative visit.
- ♦ Your activity should be very limited for at least the first two weeks after surgery. This time should be exclusively with your affected foot/ankle elevated on 2-3 pillows (above the level of the heart), while you are lying in bed, sofa, etc. The purpose is to minimize swelling, decrease pain, and maximize wound healing.
- ♦ You must keep your dressing dry at all times. Purchasing a shower bench prior to surgery is recommended. \*\*\*Please wrap your operated area in a large plastic bag taped above your knee so that absolutely no water or moisture is near wound. We recommend a sponge bath for the first 10-14 days.\*\*\*

#### CASE MANAGEMENT INFO.

Hospital for Special Surgery has launched a <u>Preadmission Case</u> <u>Management Program</u> to assist the following individuals:

- Patients Requesting to go to a Rehab/Skilled Nursing Facility after surgery
- Patients with any discharge planning/concerns
- Patients who live alone and have no support to assist after surgery

Questions concerning Rehab services and arrangements following your procedure should be addressed to:

Noreen Curran, RN, Case Manager (646)797-8496

#### KNEE WALKER INFO.

## The Steerable Knee Walker can be purchased on the following websites:

www.amazon.com

www.walmart.com

www.kneewalkershop.com

Some of our patients have used the websites above to purchase their knee walker, and have mentioned it is less costly. However, if you come across another site, just make sure you purchase a **steerable** knee walker. You can also check with any Durable Medical Equipment Store near your home.

\*Purchasing a knee walker is <u>not</u> mandatory or required as you will leave the hospital with crutches or a walker, but many patients find it easier to use and less strenuous on their upper extremities.

\*Unfortunately, Insurance rarely covers the knee walker, but it is still worth trying to submit the cost to the Insurance once you have purchased the item. Call your Insurance for instructions on how to submit.

We wish you a speedy Recovery!!!!



## **Insurance Information**

Dr. Levine is an Out of Network Provider. While we do submit to your Insurance Company for services rendered, this does not change his Insurance Provider status. Therefore you will be responsible for any balance Insurance does not cover.

You will not be expected to pay for post-operative visits for 90 days following the surgery. After the 90 days, you are expected to pay for your follow up visits as you did previous to surgery, and therefore submit to insurance on your own.

If you have any questions, please contact our office.

Regards,

Dr. Levines Staff