

General Pre-Operative Patient Instructions

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PREPARING FOR SURGERY

Prior to Surgery:

- See your primary care provider for your preoperative history and physical **within 30 days** of surgery. Preferably this would be done >1-2 weeks prior to surgery to allow time for our team to review. He or she will complete a full health assessment and identify any problems that could interfere with your surgery. You will also be informed of which medications should be taken in the perioperative period and which medications should not.
- If you are having outpatient surgery, make certain you have the help and resources you need to be safe at home after surgery for the following weeks or months. If you will be non-weightbearing on your leg, you will likely need help completing many household tasks, transferring in and out of bed and the bathroom, getting up and down stairs, making or obtaining meals, etc. Patients with many stairs should consider organizing your home so you can live on one level.
- Discontinue aspirin 7-10 days prior to surgery. Discontinue NSAIDs 5-7 days prior to surgery.
- The hospital or surgery center will contact you prior to your surgery to discuss specific details. You will likely be asked to arrive one or two hours prior to your scheduled surgical time.
- Do not eat or drink **anything** after midnight the night before your surgery. If you have medication that your primary care provider instructed you to take the morning of surgery, you may take it with a small sip of water.
- Arrange a ride home following surgery. You will also need to arrange for 24 hour assistance postoperatively, possibly longer depending on your needs.
- Type of anesthesia will be decided the morning of surgery. This decision will be made between you and your anesthesiologist.
- Remember to bring any provided brace, boot, or sling with you on your day of surgery. This will be put on in the operating room following the procedure.

GENERAL CONSIDERATIONS:

- As a general rule of thumb, you will be out of work for a minimum of 2 weeks following your surgery. Further work restrictions will be addressed at your 2 week follow up appointment.
- Return to driving after surgery is okay once narcotic pain medication has been stopped and you are cleared by your surgeon. The length of time until patients are able to return to driving varies depending on the specific surgery and if your right leg is involved.
- If needed, crutches will be given to you on your day of surgery and you should be sure to use them to assist with ambulation for the first 2 weeks.
- Following your surgery, you should plan on making appointments in the following intervals: 2 weeks, 6 or 8 weeks and sometimes 14 weeks.