

PRAIRIE ORTHOPAEDIC AND PLASTIC SURGERY/SURGERY INSTRUCTION SHEET

We will contact your insurance company to obtain prior authorization but there is no guarantee that your insurance will pay for your surgery. At this time, if you will need Physical Therapy, please verify the number of visits your plan allows as well as your patient responsibility per physical therapy visit. There may be a copay to go towards your deductible/coinsurance. Every plan is different; it is your responsibility to check. The office staff is here to help if you have any questions.

Make an appointment for your preoperative history & physical with your Primary care physician. This needs to be completed within 30 days prior to your procedure, Unless instructed differently.

Your **financial responsibility** will be calculated and communicated to you via mail, email, or phone. This amount is due **before** your surgery date. Please contact the office with payment. Your surgery may need to be rescheduled if payment is not received. 402-489-4700 Option 3.

Stop taking these medications and herbal products **7 days** before surgery, they may increase your risk of bleeding and/or lead to adverse gastrointestinal effects: Adlyxin, **Advil**, Aggrenox, **Aleve**, Anaprox, Ascriptin, **Aspirin**, Bufferin, Bydureon BCise, Byetta, Cataflam, Clinoril, Daypro, Disalcid, Dolobid, Ecotrin, Effient, Feldene, Feverfew, **Fish Oil**, Flanax, Fragmin, Garlic, Ginger, Ginkgo Biloba, Ginseng, **Ibuprofen**, Indocin, Lodine, Mediproxen, **Mobic**, **Motrin**, Mounjaro, Nalfon, Naprelan, **Naprosyn**, Naproxen, Orudis KT, Oruvail, Ozempic, Persantine, Pletal, Relafen, Rybelsus, Saxenda, Ticlodipine, Tolectin, Trulicity, Victoza, Voltaren, Vitamin E, Wegovy **All Semi-glutides, Trizepatides and GLP-1 medications must be held for one week prior to surgery.** **STOP** taking diet pills containing **phentermine** as directed by your primary care physician at least 2 weeks prior to your surgery.

STOP! taking these anticoagulants **AS DIRECTED BY YOUR PRIMARY CARE PHYSICIAN:** Arixtra, **Coumadin**, Fragmin, Heparin, **Lovenox**, Pradaxa, Brilinta, Xarelto, Plavix.

STOP! Taking phentermine as directed by your primary care physician at least 2 week prior to surgery.

****Our office needs to know **PRIOR TO SURGERY** about any cuts, scratches, bug bites, wounds etc anywhere on the extremity having surgery. We also need to know about wounds, drainage, or redness that indicates a possible infection anywhere else on your body as this could impact your surgery. ****

The morning of your surgery please hold, do not take: ACE inhibitors: Benazepril, Captopril, Enalapril, Fosinopril, Lisinopril, Quinapril, Ramipril, or Trandolapril. Or ARB's: Candesartan, Eprosartan, Irbesartan, Losartan, Olmesartan, Telmisartan, Valsartan; Tylenol (acetaminophen) and Celebrex are OK to take.

Do not eat or drink anything after midnight the night before surgery, unless otherwise instructed. This includes gum, candy, water and any tobacco products. If you do smoke, quit! At least cut down 2 weeks before surgery. People who don't smoke heal much faster!

Bring a driver. You must be driven home by a responsible adult. You will **NOT** be allowed to drive yourself home or to call an Uber/Lyft driver due to anesthesia.

Bring your insurance, Medicare, and/or recent Medicaid cards and an updated list of your current medications. Bring something to read or do while waiting to be called to surgery. Also bring a copy of your advance directives if you wish.

If you are diabetic, please bring your glucose monitoring device, and insulin and supplies if you take insulin.

If you have respiratory problems, bring your inhalers, home O2, CPAP machine and other supplies with you to the hospital.

Please inform us if you have a pacemaker or defibrillator.

For more information, please visit lincolnsurgery.com; nebraskasurgery.com; dosclincoln.com; bryanhealth.com; saintelizabethonline.com; amimaging.com/surgery-center/ depending on which facility your surgery is scheduled. The nurses at the facility you are scheduled will also call to go over admit time, medications and health history prior to your procedure.

If you have further questions, please see the back of this sheet, visit our website at prairie-ortho.com or call the office at **402-489-4700**.

Commonly Asked Questions

1. Are there any complications from surgery?
 - They are not common but do occur. Complications include, but are not limited to, surgical failure, infections, persistent pain, stiffness, blood vessel or nerve injury and blood clots.
2. What are some of the warning signs of an infection?
 - Signs include but are not limited to: Painful swelling, temperature above 101, redness or drainage from your incision
 - Call Prairie Orthopaedic & Plastic Surgery, PC immediately at 402-489-4700.
3. Can I change my dressings?
 - Be sure to ask your nurse for guidelines as to how to maintain dressings. These are specific instructions that will be outlined by your physician prior to surgical dismissal.
4. Can I get my wound wet?
 - If the doctor has given the OK to remove dressings you may get the wound wet. Make sure to use clean water from the shower or sink and let it run over the incision – do not scrub. Example of water you should avoid would be dishwater, bathwater, swimming pools, hot tubs and lakes. After cleaning, keep the wound covered by a dry band aid and change daily or more often if it is moist.
5. What if the wrap is too tight?
 - If the wrap is too tight and held in place with an ACE wrap, it is ok to re-wrap more loosely but if splinted you should always keep it in place. If that does not relieve pressure or pain, please contact the office immediately whether it is day or night.
6. Is swelling normal?
 - Yes, it is normal to experience some swelling. To control this, make sure to elevate the extremity, ice and keep wrapped.
7. What if I have continued pain after taking pain medications?
 - If no contraindication for non-steroidal anti-inflammatory drugs (NSAIDS), you can supplement pain management with over-the-counter medications like Ibuprofen (Motrin, Advil) or Naproxen (Aleve). Examples of contraindications are: severe kidney disease, history of stomach ulcers, anaphylactic reaction to NSAIDS, use of blood thinners (Warfarin, Coumadin, Heparin, Lovenox) or you have been previously instructed by your physician to avoid NSAIDS.
 - If, after supplementation with NSAIDS, you have continued pain please call the office.
 - Prescription refills are issued only during office hours (8-4:30) We are not able to fill prescriptions after hours because the on-call physician does not access your prescription records after hours. To initiate a refill, contact your pharmacy directly a **day or two** before you are out to provide your provider adequate time to review your chart to determine your prescription refill authorization. Most pain medication refill prescriptions need to be picked up at our office and hand carried directly to your pharmacy.