Pre-Operative Surgical Packet

We know that you have many questions about your surgery and what to expect. The following pages contain answers to the questions most commonly asked by our patients and their families and was created with their input. Please take time to carefully read through the material.

The following phone numbers will also be helpful for your pre- and post-operative care. Please do not hesitate to contact The Orthopaedic Foot & Ankle Center / The Orthopaedic Foot & Ankle Center- A Division of The Centers for Advanced Orthopaedics (OFAC / OFAC-CAO) with your pre- and post-operative questions and concerns.

The surgery scheduler will contact you to schedule surgery within 3 BUSINESS days from your last scheduled appointment.

Main Tel: 703.584.2040
Fax: 703.560.7218

*** Important Dates to Remember ***

<table>
<thead>
<tr>
<th>Event</th>
<th>Date/Time</th>
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<tbody>
<tr>
<td>Surgery Clearance Appointment with PCP</td>
<td>____________________________</td>
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<tr>
<td>Pre-operative Appointment Date/Time</td>
<td>____________________________</td>
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<tr>
<td>Surgery Date</td>
<td>____________________________</td>
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<tr>
<td>1st Post-operative Appointment</td>
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***The type of procedure, as well as your insurance, will determine where your surgery will be performed. You will be given your surgery time two days prior to surgery.***
Pre-Operative Check-List

• Your procedure is scheduled for _____________ at ________________________.

• Is this procedure covered under Workman’s Compensation or your primary insurance? Please bring your insurance card with you.

• Do not eat or drink anything after midnight. This includes water, gum, candy, and tobacco products.

• Do not bring valuables to the Center.

• Do not wear jewelry, nail polish, contact lenses, or make-up.

• Wear comfortable, loose-fitting clothes.

• If applicable, bring your crutches, ice machine, orthopaedic shoe, brace, or assistive devices.

• Who will be driving you home? You must have someone available to drive you home after your surgery.

• Who will be staying with you at home for the first 24 hours? For your safety, someone must be with you the first 24 hours following your procedure.

• Will your home be safe and easy to get around in after your surgery? Have someone help you clear indoor and outdoor walkways of clutter and obstacles such as plants, furniture, or small rugs. Place items you use everyday within easy reach.

• Have Prescription Medications filled and ready to take as directed at Pre-Operative appointment.

• Have ice ready to use.

• Your weight bearing status until your 1st Post-Operative appointment should be:
  _____ Weight bearing to tolerance in post-op shoe
  _____ Completely non weight bearing until instructed otherwise by Physician

• Additional Comments/Instructions:
Patient’s Responsibilities

1. Pre-Operative Testing

Please schedule your surgical clearance visit with your Primary Care Physician (PCP) within 30 days of your scheduled surgery, and at least one week prior to your pre-operative visit. This appointment will be to perform a physical examination, and order any necessary tests, such as blood work, chest x-ray or an EKG. Individuals over 50 or any patient with cardiac risk factors as determined by your PCP require a pre-operative EKG, CBC, CMP. Other tests are patient specific and are ordered at the discretion of your PCP. In some cases, your PCP will require that you have special testing before you are scheduled for surgery, especially if you have a history of heart disease, diabetes, smoking, or have problems with circulation of blood to your feet. These tests are necessary to be sure you are safe for surgery and that the surgery will be successful.

2. Pre-Operative Visit

A pre-operative visit with one of OFAC’s physician assistants is required approximately 1 week prior to your surgery date. This visit is to go over post-operative prescriptions, answer any last minute questions you may have, and obtain any necessary medical equipment. Please bring a current list of your medications along with dosages to this appointment. We recommend you bring someone with you to your pre-operative office visit for caregiver instructions.

3. Pre-Surgical Interviews

In order to schedule a pre-operative phone interview, contact the Pre-Operative Testing Center at Virginia Hospital Center, 2 weeks prior to surgery. Virginia Hospital Center (703)558-6159

If your surgery is schedule at Fairfax Surgery Center, Woodburn Surgery Center, Piccard Surgery Center or Fair Oaks, a nurse from that facility will contact you to complete your pre-operative phone interview.
4. **Your Financial Responsibility**

   A. Our business office staff will contact your insurance carrier and ascertain your financial obligation prior to your surgery. This is for your surgeon’s portion of the surgery **ONLY**. You will receive separate statements from the anesthesiologist and the facility. If you have any questions, please call our insurance specialist, at 703-584-2040 extension 1753.

   B. **Referrals:** If your health insurance company requires you to have referrals to see one of the OFAC providers, you must obtain the referral from your PCP before any appointments. It is **your responsibility** to contact the appropriate parties to ensure that the referral reaches the office.

   C. **Pre-authorization:** Pre-authorization (or pre-certification) is often confused with a referral, but it is very different. Information from the referral is used to authorize procedures such as those performed in the office, outpatient testing (i.e. MRI or CT scan), and surgery.

   D. The Orthopaedic Foot & Ankle Center completes the surgery pre-certification with your health insurance company. In rare instances, your surgery may be delayed due to insurance issues. You will be notified immediately if this occurs. Our staff will work diligently to provide the needed information to the insurance company in order to receive approval.

5. **Extended care facilities:** In some instances, you may want to consider recuperating in an extended care facility or rehabilitation center. In order for your insurance company to pay for the admission, certain strict criteria must be met. Some health insurance companies do not pay for admission to an extended care facility or for visiting nurse care. You may choose to pay for these services on an out-of-pocket basis. **We urge you to contact your health insurance company to discuss your needs and your coverage as soon as your surgery date has been determined.**

6. **Prescription Medications**

   The hospital or surgical center will give you specific instructions on which medications you may or may not take the morning of your surgery. If you do not get this information, please contact our office for instructions.

   **If you take medications such as anti-inflammatories (aspirin, ibuprofen, Motrin, Advil, Naprosyn, Lodine, Voltaren, Relafen), vitamin E, or herbal supplements, they must be stopped 10 days prior to surgery. Surgery may be cancelled if you do not stop these medications.**

   **If you take medications such as Coumadin, blood thinners, insulin or steroids, contact the prescribing provider for specific instructions on stopping or tapering the dosage before your surgery. Again, surgery may be cancelled if these medications are not stopped or the dosing modified.**
7. **Daily Aspirin Therapy for prevention of blood clots (deep vein thrombosis or DVT).**

If you are placed in a cast or a boot after your surgery, we recommend a single adult dose aspirin (325mg) daily during this time to aid in prevention of DVT. This should be started the night you get home from surgery. **Please speak with your primary care regarding this recommendation. If your PCP feels that you are unable to take a daily aspirin please let the Physician Assistant know at your pre-operative visit.**

8. **Smoking**

It is essential that you stop smoking a minimum of one month before surgery and continue at least three months post-operatively. There is up to a **20-fold increase** in risk and/or complications with wound and bone healing for patients who smoke. If you continue to smoke, you will place your surgery and its outcome at risk. If you need referrals to a support group to help you quit smoking, we will be happy to assist you. Please contact your primary care provider for other assistance.

9. **Worker’s Compensation**

If your surgery is a result of a work-related accident or injury, we must have all contact information as soon as possible. If you are working with an attorney or have a case manager, please be prepared to provide that information. **We will not be able to schedule surgery or subsequent follow-up appointments without clearance from the worker’s compensation carrier.** In some instances, surgery will be delayed pending approval from the carrier.

Please be advised that we are required to complete considerable paperwork and documentation for worker’s compensation cases. Worker’s compensation information is not protected under the HIPAA (Health Insurance Portability and Accountability Act) and your signed consent is not required each time documentation is requested. We strive to maintain the confidentiality of your information and will release only that information which is specifically requested by the carrier or adjuster.