

**Bryan M. Saltzman, MD**

Board Certified / Fellowship-Trained  
**Orthopaedic Surgeon**  
Sports Medicine, Knee, and Shoulder/Elbow  
Cartilage Restoration & Complex Knee Reconstruction



Indiana University Health

# Preoperative Instructions

**Bryan M. Saltzman, MD FAAOS**

**Chief, Sports Medicine & Shoulder Surgery**

**Orthopaedic Surgeon and Sports Medicine Specialist at Indiana University Health**

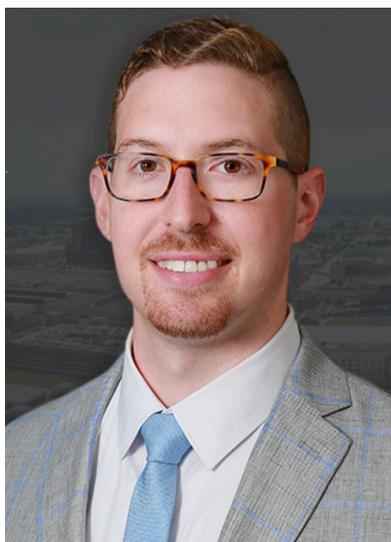
Sports Medicine | Cartilage Restoration | Complex Knee Reconstruction |  
Shoulder/Elbow Surgery

[www.bryansaltzmanmd.com](http://www.bryansaltzmanmd.com)



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Dear Patient,

I consider it an honor and privilege to provide you with the orthopaedic care that you deserve. IU Health Orthopedics and Sports Medicine has long been recognized as a center of excellence for many reasons, not the least of which is our shared passion for helping people like you get back to the activities they love. My goal is to help you achieve yours.

We understand that preparing for surgery can be an overwhelming and sometimes confusing time. This packet of information is intended to streamline the preoperative process and answer many frequently asked questions.

Please contact the office with any questions or concerns.

Sincerely,

Bryan M. Saltzman, MD FAAOS  
Chief, Sports Medicine & Shoulder/Elbow Surgery Division  
Department of Orthopaedic Surgery & Sports Medicine

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IU Health Orthopedic Surgery

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### **Type of Surgery**

- **Ambulatory Surgery:** Procedures from which you are able to go home the same day without an overnight stay. Ambulatory surgery is also called outpatient surgery. The majority of surgeries performed by Dr. Saltzman are ambulatory.
- **23-Hour Stay:** Some patients may be advised to stay overnight for observation, pain control, or due to the late timing of their surgery. This will be discussed at the time of surgery.
- **Inpatient:** Surgeries with an anticipated hospital stay greater than 23-hours. If an overnight stay is planned, this will be discussed at your pre-operative appointment with Dr. Saltzman.

### **Medical Clearance**

Depending upon the planned surgical procedure and your medical history, you may be required to undergo Pre-Admission Testing, medical clearance, and/or obtain clearance from a specialty consultant such as a cardiologist or hematologist.

**NO MEDICAL CLEARANCE REQUIRED:** Healthy patients scheduled for ambulatory surgery are not required to undergo any special pre-admission testing.

#### **PRE-ADMISSION TESTING (PAT):**

- Includes blood and urine tests, x-rays, and EKG.
- Patients scheduled for inpatient surgery should also have a consultation with a medical doctor.
- Bring your medications (prescribed and over the counter) with you to the PAT appointment.

#### **MEDICAL CLEARANCE:** may be obtained from your primary care doctor

- Once your primary care doctor clears you for surgery, they must fax our office a note indicating you are medically cleared for surgery.
- Medical clearance must be completed no more than 30 days prior to your scheduled surgery.
- All outside test results and the medical clearance note must be faxed to our office no later than the Thursday prior to your scheduled surgery.

***CARDIOLOGIST CLEARANCE:*** Required if you have cardiac stents, a pacemaker, history of an arrhythmia, have had any kind of heart surgery, or have had a heart attack.

***HEMATOLOGY RECOMMENDATIONS:*** May be requested if you have a personal history of blood clot (DVT or PE) or a strong family history of blood clots.

***ADDITIONAL MEDICAL SUBSPECIALTY RECOMMENDATIONS:*** May be requested by Dr. Saltzman based upon specific aspects of your health history.

**BLOOD THINNERS:** If you take a blood thinner (Warfarin, Coumadin, Plavix, Clopidogrel, Aspirin, Heparin, Aggrenox, Lovenox, Enoxaparin, Xarelto, Rivaroxaban, etc.), you **MUST** have specific instructions from the prescribing physician regarding stopping and restarting of these medications. In general, we recommend these medications be discontinued approximately 7-10 days prior to your

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planned procedure. Please follow your prescribing doctor's recommendations.

**IMMUNIZATION RECORD:** Anyone under 18 years of age may need to obtain a copy of the immunization records from their school or pediatrician's office.

## **Medications**

Please contact your medical doctor before discontinuing any medications.

- You may take Tylenol up to the time of surgery as needed for pain.
- Do NOT take anti-inflammatories (Aspirin, Naprosyn, Aleve, Advil, Motrin, Ibuprofen, etc.) within 10 days of surgery. These medications increase the bleeding risk during/after surgery.
- Do NOT take any herbal medications, natural products, or vitamin supplements (alfalfa, capsicum, celery seed, chamomile, chondroitin, clove, dandelion, dong quai, feverfew, fish oil, flax seed, gamma linoleic acid, garlic, ginger, ginkgo, ginseng, glucosamine, horseradish, licorice, liver oil, melatonin, onion, papain, papaya, parsley, passionflower, poplar, resveratrol, sweet cover, turmeric, willow bark, etc.) within 10 days of surgery. Many of these increase bleeding risk during/after surgery.
- Birth Control: may increase the risk of developing a blood clot following lower extremity surgery. It is recommended that you stop birth control until you are full weight bearing and are walking normally without crutches.

## **Preparing for Surgery**

**PREOPERATIVE VISIT:** For some surgeries, a pre-operative visit will be scheduled with the athletic training team to provide detailed instructions regarding post-surgical needs. Topics range from postop medical equipment needs (braces, slings, crutches, ice machines, etc.) to any exercises which need to be start prior to the first physical therapy appointment. Our pre-op team will also be able to assist in answering common questions related to the operation.

**INSURANCE COVERAGE:** Our pre-services department will call for pre-certification with insurance if required. Please be advised that this process does take time. You should contact your insurance company directly with any questions regarding coverage and benefit information.

**ARRANGE ESCORT:** The hospital requires that ambulatory surgery patients arrange for an escort home. You will not be allowed to leave the hospital without an escort. In some cases, surgery may be cancelled if you have not established this arrangement upon registration.

**BRING IMAGING STUDIES:** Bring any imaging studies (X-ray, MRI, or CT scan) performed outside of IU Health with you on the day of surgery, unless already obtained by our office.

**ICE MACHINE:** If an Ice Machine is pertinent to your specific post-surgical protocol, a representative will discuss this with you during your pre-operative appointment.

## **Day Before Surgery**

**WASH BODY WITH HIBICLENS:** Hibiclens is a special type of soap that kills germs on contact and can continue working for up to 24 hours. It can be purchased at your local pharmacy ([www.hibiclens.com](http://www.hibiclens.com)) without a prescription. Hibiclens kills the bacteria on your skin that can cause

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infection after surgery. It is gentle enough for sensitive skin and has been shown to reduce infection rates. Do NOT use if you have an allergy to chlorohexidine gluconate. Below are instructions for its use:

- Wash your hair first using regular shampoo.
- Rinse hair and body thoroughly with warm water to remove any shampoo residue.
- Move away from the shower stream when applying Hibiclens to avoid it rinsing off too soon.
- Apply Hibiclens directly on your skin or using a wet washcloth.
- Allow Hibiclens to sit on your skin for 2-5 minutes
- Rinse thoroughly with warm water.
- Do NOT use regular soap after applying and rinsing Hibiclens.
- Do NOT apply any lotions to your skin.

**DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT BEFORE YOUR SURGERY** unless specifically instructed by an IU Health representative over the phone.

**DAY OF PROCEDURE ARRIVAL TIME:** You will receive a call from a member of the IU Health staff within the week prior to your surgery regarding the time of the procedure and when you need to arrive. In general, you should plan on arriving at the hospital 2 hours prior to the surgery start time.

- The surgical centers/hospital determines the surgical schedule. As such, changes/delays in your OR time may occur due to unforeseen emergencies. Please be understanding of the dynamic nature of the OR schedule.

## **Day of Surgery**

### **WHAT TO BRING:**

- ✓ One Small Bag which will be securely stored during surgery.
- ✓ Verification of Identity: bring a government issued identification as well as insurance cards.
- ✓ List of Medications: including prescribed, over-the counter, and herbals. Please also keep track of the last time you took each of your medications.
- ✓ Immunization Records: if requested for those younger than 18 years.
- ✓ Telephone numbers of people you want to call.
- ✓ Primary Care Physician's Contact Info

**PREGNANCY TEST:** Mandatory for all women who are menstruating and menopausal women who have menstruated within the preceding year.

**DR. SALTZMAN WILL MEET WITH YOU BEFORE SURGERY,** confirm the planned surgical procedure, answer any remaining questions, and mark the operative site with his initials.

**ANESTHESIA:** You will meet with the anesthesiologist prior to surgery and have the opportunity to ask questions about the type of anesthesia you will be receiving.

- Regional (nerve block) Anesthesia: is a technique where a portion of the patient's body is rendered insensitve (numb) so that you don't feel any pain during surgery. You will also be given sedation so that you sleep through the procedure, however you continue to breath on your own.
- General Anesthesia: is when you are completely asleep during the procedure, and may require a breathing tube.

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### After Surgery

**RECOVERY ROOM (PACU):** The anesthesia team and nursing staff will monitor your postoperative care and your return to full awareness. Regardless of the type of anesthesia performed, you will stay at the hospital until your condition is stable and you are safe to leave.

**POSTOPERATIVE INSTRUCTIONS:** You will be provided detailed postoperative instructions after surgery. If you wish to review general postoperative instructions and answers to frequently asked questions prior to your surgery you can do so on our website: [www.bryansaltzmanmd.com](http://www.bryansaltzmanmd.com).

**PRESCRIPTIONS:** You will be given prescriptions for pain medication and any other required medications after surgery – **these will be prescribed the weekend prior to your surgical date so that you may pick them up in advance of your date of surgery.**

**DISCHARGE:** In order to be considered safe to go home you must be able to stand up and walk without feeling dizzy or lightheaded, tolerate food and drink, and be able to urinate. When you are considered safe to leave, the person escorting you home will be asked to bring the car to the main hospital entrance. Surgicenter surgical personnel will escort you to the car and assist with your departure.

**PHONE CALL:** You will receive a call within a couple days after surgery to check on you and answer questions.

**FIRST POSTOPERATIVE VISIT:** Typically occurs 7-10 days after surgery. This will typically be arranged pre-operatively. If not, please call the office to arrange.

### Returning To Work or School

- This varies widely by patient and type of surgery performed.
- Many patients are able to return to sedentary work or school 3-7 days after surgery.
- You must no longer require narcotic pain medication during work/school hours.
- Dr. Saltzman will determine when you may return to more physically rigorous demands.
- If you require any specific letters for work or school, please let us know.
- If you have leave paperwork, such as short-term disability or FMLA please fax to our office: 317-963-3289. Allow 5-7 business days for our team to complete any paperwork.

If you wish to review general postoperative instructions, physical therapy guidelines, return to activity programs, etc., they are available at [www.bryansaltzmanmd.com](http://www.bryansaltzmanmd.com) under the Patient Info tab.