

JACQUELINE ALCALA-SURGICAL COORDINATOR
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My surgeon is Dr. _____

IMPORTANT DATES

SURGERY DATE: _____ (SCHEDULER WILL CALL WITH ARRIVAL TIME)

PRE-OPERATIVE SCREENING: _____ (PHONE CALL WITH ANESTHESIA-UPAC NURSE)

1ST POST-OPERATIVE APPOINTMENT: _____ (1ST VISIT IS USUALLY WITH THE PA)

COVID TESTING IS DONE 1-2 DAYS PRIOR TO SURGERY- THIS APPOINTMENT IS SCHEDULED WITH UPAC-305-689-0681, DURING THE PRE-OPERATIVE PHONE CALL

**** MAKE SURE TO SCHEDULE YOUR PHYSICAL THERAPY EVALUATION AT LEAST 2 WEEKS BEFORE YOUR SURGERY** SLOTS FILL UP QUICK! MAKE SURE YOU MAKE THIS APPOINTMENT BEFORE YOU LEAVE TODAY- The physical therapy department at Lennar is located on the 3rd floor close to the elevators. Contact phone number is 305-689-8888**

CANCELLATION POLICY

Please check your calendar carefully prior to choosing the date for your surgery. If you should have to cancel your surgery, please keep in mind rescheduling the procedure is labor-intensive. It may require obtaining insurance authorizations, anesthesia orders and pre-operative information again. A notice of 5 business days is expected to cancel or reschedule a surgical procedure. Cancelling your procedure in a timely manner allows us to offer your time to another surgical patient. We appreciate your cooperation and understanding.

The surgical scheduler will be calling you the day before your procedure and will advise you of the surgical arrival time. Please arrive on time. This allows adequate time for your pre-surgical team to begin the admission process to prepare you for your surgery. This will include review of your chart, changing into a surgical gown, obtaining vital signs, starting an intravenous (IV) line, starting nerve blocks, and discussing your surgery with you.

The following guide is designed to provide you with information regarding preparation for your upcoming surgery. After you and your physician's surgical scheduler have picked a surgery date, your physician may need you to have lab work, x-rays, and/ or an EKG completed prior to your day of surgery and will schedule you for a pre-operative assessment at the UPAC (UHealth Perioperative Assessment Center) if necessary. If an in person visit to UPAC is not required, you will still receive a phone call from the UPAC nurse about 2 weeks prior to your day of surgery to verify your medical history, medications, and provide you with additional instructions (please see date above). Please do not be alarmed if you are not required to obtain any pre surgical labs or obtain clearance. Most Sport Medicine procedures do not require an in person visit to UPAC or patient's primary care, and may be screened over the phone.

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SURGICAL INSURANCE APPROVAL:

The date you have chosen for your surgery is not a guarantee; this date is dependent on the surgical coordinator obtaining authorization from the insurance BEFORE your surgery. Most surgical procedures done at an outpatient hospital require authorization from your insurance company. We must have all notes from your visits with the doctor and all imaging reports to start this process. The start of the authorization process can take approximately 24-48 hours after your visit with us. The process of receiving approval for surgery from an insurance carrier can take approximately 1-30 days depending on the insurance carrier. Once insurance approval is obtained, your account is reviewed within our billing/estimates department. We also review your insurance benefits to see if there is a co-payment or co-insurance due. All known financial responsibility will be collected on the day of surgery or before. We require that all balances be paid in full before surgery. If you have any question regarding your benefits and financial responsibility, please call our estimates department 305-326-6486.

DAY BEFORE SURGERY

Expect a telephone call from the surgical coordinator the day prior to your procedure to verify the time you are to arrive at the hospital. **Unfortunately, we cannot grant requests for surgical start times.** Depending on the type of procedure, the recovery period, medical history, and emergency cases, the length of stay varies from patient to patient.

Please keep in mind surgery times are subject to change. Please provide the surgical coordinator with an alternative telephone number or e-mail address where you may be reached should your scheduled surgery time change.

Please inform your surgeon or call the UPAC Department at 305-689-0682/305-689-0681.If you have any of the following before your day of surgery:

- Rash near planned surgical site
- Productive cough
- Fever

HAVE A PLAN:

Plan to have a care provider for about two weeks following your surgery. You may not need them for that long, but it is best to plan. Make a list of the things you will need in your house before surgery because that is the last thing you will want to do afterwards. Have your care provider nearby before trying things for the first time, such as using the toilet, showering, and cooking. From this first experience, you will be able to gauge what kind of support you will need. You will not be able to drive for at least 1-2 weeks or until cleared by the doctor. If you have small children, plan to have a trusted caregiver for them until you are independently taking care of yourself

MIDNIGHT BEFORE SURGERY:

- **DO NOT eat any food**
- **DO NOT skip the medications that our UPAC team approved during your UPAC phone screen**
- **DO NOT drink alcohol**
- **DO NOT drink any smoothies or shakes**
- **DO NOT have any milk or cream or sweeteners with any drinks**
- **DO NOT drink any drinks with any red coloring, including sports drinks like Gatorade or PowerAde**
- **DO NOT smoke prior to surgery this includes nicotine, marijuana and vaping**

ALLOWED DAY OF SURGERY

- **DO take the medications that our UPAC team approved during your UPAC phone screen**
- **DO drink up to 16 ounces combined total of only the following liquids:**
 - **Water**
 - **Black coffee without any milk or cream or sweeteners**
 - **Tea without any milk or cream or sweeteners**
 - **Apple juice**
 - **Green, yellow, blue, orange, or clear sports drink (e.g., Gatorade, Powerade)**

YOU MAY DRINK UP TO 2 HOURS PRIOR TO YOUR SURGERY

clear liquids only

For example, if your surgery is scheduled for 7:30 am, you must be finished drinking at 5:30 am and cannot drink anything after 5:30 am.

Clear liquids are see-through. They do not have any solids or pulp in them. Foods that melt into clear liquids at room temperature, like ice pops and gelatin, are also allowed on a clear liquid diet.

Smoking: Do NOT smoke the evening before or the morning of your procedure. Smoking causes bronchial irritation and may increase the likelihood of breathing problems during anesthesia. Smoking may lead to cancellation of your surgery.

Bathing: On the evening before surgery, or the morning of surgery, please take a shower or bath using chlorhexidine (**Hibiclens**) soap. This special soap is available at most retail pharmacies as an over-the-counter item. Do not use this soap (**Hibiclens**) on your face, hair, or genitals

Shaving: DO NOT shave the planned surgical site. Shaving with a razor causes skin abrasions and microscopic cuts that can increase the risk of infection. Should it be necessary to remove hair near the planned surgical site, the surgical team will do so using clippers immediately before surgery.

DAY OF SURGERY

Valuables: Leave your valuables at home for safekeeping. Do NOT bring credit cards, money, jewelry, cell phone or other electronic device. Please remove all make-up, perfume, jewelry, and body piercings.

Transportation: You are not able to drive for 24 hours post-operatively or until cleared by your surgeon. You will need someone to provide you with transportation home after surgery.

Clothing: Please wear loose, comfortable clothing on your day of surgery. You also might like to bring a blanket or sweater; it can get cold in our pre op and post op areas.

Knee surgery-clothing suggestion: Loose athletic shorts/pants, comfortable loungewear.

Shoulder surgery-clothing suggestion: Button down nightdress, comfortable loungewear, or a big t-shirt and loose comfortable bottoms.

Glasses: If you wear glasses, bring a case in which to secure them during your procedure. Do not wear contact lenses.

Food and Drink: Do NOT eat on the day of surgery. **NO BREAKFAST, NO SNACKS.**

MEDICATIONS, INCLUDING OVER-THE-COUNTER, HERBAL, AND SUPPLEMENTS:

Routine heart, breathing, or blood pressure medications should be taken with a small sip of water on the day of your surgery. Please ask your doctor or UPAC nurse which medications to take on the morning of your surgery. In general, you should not take any herbal medications. Your doctor **may** ask you to stop taking medicine that "thins" your blood. You may need to stop these medications anywhere from 24 hours to 7 days before your procedure. **Ask your UPAC nurses or PCP when you should stop them.** Blood thinners include:

- Aspirin, Excedrin, Ascriptin, and Ecotrin
- Plavix, Pradaxa, Effient
- Vitamins and Herbal supplements
- Coumadin or Warfarin
- Ibuprofen, Advil, Motrin, Nuprin and Aleve

*If you take Aspirin or Coumadin daily, you **must** talk with your surgeon before discontinuing the medication.

On the day of surgery, please bring with you:

- A written list of all medications with their dosages that you are currently taking on a daily basis. This includes all prescriptions, over the counter and herbal medications
- Copy of your living will or advanced directives if previously completed
- Power of attorney or legal guardianship, if applicable
- Pacemaker/AICD card/information
- CPAP machine for sleep apnea (if you are using one)

ARRIVING AT THE LENNAR FOUNDATION MEDICAL CENTER:

You may valet your car from the front or the back of the building or you can self-park in the Ponce de Leon garage next door. See page 6 of this guide for a map. When you arrive on your day of surgery, walk through the front lobby and proceed directly to the second floor registration desk. We have a surgical waiting area that is intended for surgical patients and their family or friends. If your family or friend that is

driving you home must leave, please have them check in at the registration desk and provide a cell number where they can be reached if needed. If you are the parent of a minor, we ask that you remain on site throughout the patient's admission, surgery, and recovery. **You must have a responsible adult to drive you home and sign discharge instructions for you after your procedure. You also need to have adult care at home for the next 24 hours due to possible anesthesia side effects.**

Safety: Your operating room nurse will verify the following before taking you to the operating room:

- Your name
- Your date of birth
- Your allergies
- Your surgeon
- A brief description of your surgery
- Planned surgical site, with emphasis on laterality (left vs. right)

Anesthesia: Anesthesia is an important part of surgery. Before your surgery, your anesthesiologist, and your Certified Registered Nurse Anesthetist (CRNA) will conduct a thorough review of your medical information. Together you will discuss your anesthesia plan, alternatives, and risks.

RECOVERY UNIT (POST ANESTHESIA CARE UNIT or PACU)

Immediately after surgery you will be transported to PACU, and during your stay here we will:

- Check you and your overall well being
- Monitor your comfort and pain
- Help you move and change positions
- Assist you with trips to the bathroom
- Address questions or concerns

You will receive care from a trained Recovery Room Registered Nurse, who will monitor your vital signs (blood pressure, pulse, respirations, oxygen saturation) frequently until you are ready to go home. As you awaken, you may notice the bright lights and cool temperature. We will provide you with warm blankets to ensure that your comfort needs are addressed. You will be asked frequent questions to determine if anesthesia is wearing off. You may have on an oxygen mask or cannula.

PAIN CONTROL

After your surgery, you may or may not experience some discomfort. If you do experience discomfort, tell your nurse. Pain medication may be ordered by your surgeon either to be given by mouth or through your IV via PCA PUMP. A PCA pump allows you to control pain medication using a button attached to an infusion pump. When you press the button, a small amount of medication will be delivered through your intravenous line. Your pump will be programmed so that only a limited amount of medication can be delivered each hour.

Our goal is to keep you as comfortable as possible after your procedure. It is very important to be open and honest with your nurse about your comfort level and any pain experienced after your procedure.

For best results:

- Take or ask for pain relief drugs when pain first begins. Waiting until your pain becomes severe limits how well the medicine works.
- In order to help your nurse control your discomfort, you will be asked to rate your discomfort on a scale of 0-10. Before you are discharged, patient discomfort should be tolerable.

- Our goal is to get you at a level of pain that will allow you to walk and sleep with the least amount of discomfort as possible. Tell the nurse or doctor about any pain that will not go away. Pain can sometimes be a sign of problems.

Pain medicine may cause you to become drowsy, dizzy, or lightheaded. Do not drive, use machines, or drink alcohol while taking prescription pain medication.

AFTER SURGERY

After surgery, your surgeon will have specific discharge instructions for you to follow. Before you leave the hospital, you will have these instructions reviewed with you by your nurse. These instructions will be written and given to you before you leave. Information will include diet, activity, incisional care, medications, and follow-up appointment at your doctor’s office.

Walking re-awakens all of your systems, promoting normal body functions. After your surgery, you should expect to get out of bed and walk. Be sure to have help the first time you get out of bed and begin walking. Ankle exercises also help promote circulation in your legs. You may also do ankle pumps. Sit or lie down with your legs straight and point your toes toward your nose and then back down as far as you can. You should feel your calf muscles tighten and relax. Do ten pumps in a row about every hour after you are awake from surgery. This pumping action is similar to the movement of your calf muscle during walking.

IF YOU HAVE ANY QUESTIONS POST OPERATIVE QUESTIONS, YOU MAY ALSO SEND A MESSAGE DIRECTLY TO THE DOCTOR AND TEAM THROUGH MY UHEALTH CHART.

IMPORTANT CONTACT PHONE NUMBERS

The Lennar Foundation Medical Center	305-689-5555
Surgery Reception Area	305-689-0389
UHealth Perioperative Assessment Center	305-689-0681
Pre-OP/Holding Unit	305-689-0557
Surgical Recovery Area	305-689-0559
AFTER HOURS POST OP CARE LINE	305-243-1000

PARKING AT LENNAR – DAY OF SURGERY AND FOLLOW UP APPOINTMENTS

Self Parking is located in the Ponce de Leon Garage next door to The Lennar Foundation Medical Center. Valet parking is available in the front of the building off of Ponce de Leon Blvd or in the back of the building off of Dickinson Drive. Pick up is located in the back of the building off of Dickinson Drive.

DEDICATION OF THE LENNAR FOUNDATION MEDICAL CENTER
5555 PONCE DE LEON BOULEVARD | CORAL GABLES, FLORIDA 33146

DRIVING DIRECTIONS

FROM THE NORTH
Take I-95 south to US 1/South Dixie Highway and continue to Stanford Drive.
Turn right on Stanford Drive.
At the next light, turn left on Ponce de Leon Boulevard.
Follow signage to valet or self-parking.

FROM THE SOUTH
Travel north on US 1/South Dixie Highway to South Alhambra Circle.
Turn left on South Alhambra Circle.
Follow signage to valet or self-parking.

VALET

HOME POST-OP CARE

(Please also refer to your discharge instructions)

Dressing: After surgery, the wound is covered with gauze and ace wraps. These should be left in place for 2 days after surgery. Due to the large amount of fluid used during an arthroscopic procedure, it is normal to see some bloody drainage on the dressings. If bright red blood persists despite elevation and applying ice, please call our office: 305-689-5555 or send a message through the MY UHEALTH CHART. On the 3rd day after surgery, the dressing may be removed and wounds can be covered with sterile gauze or waterproof Band-Aids.

Do not remove the steri-strips and/or tape. Please do not cut any of the visible sutures. You can reapply the ace wrap to control swelling.

Showering: Do not get the operative site wet until cleared by the doctor. You may cover the incision site with a plastic bag and bathe around the area.

Ice Therapy: Applying ice is very important for the first 5-7 postoperative days to decrease swelling and pain. While the post-operative dressing is in place, applying ice can be continuous. Once the dressing is removed on the third post-operative day, ice can be applied for 15-20 minute periods, 3-4 times per day. Care must be taken with applying ice to avoid frostbite to the skin. Do not apply cooling pad or ice pack directly on the skin.

Pain Control: Local pain medication is injected during surgery; this will wear off within 4-6 hours. Most patients will require narcotic pain medication (e.g., Vicodin, Norco, Percocet, or other codeine-derivative medications) for 1-2 days after surgery – please take as instructed. It is important not to drink alcohol or drive while taking narcotic medication. If your pain is minimal, you may discontinue the use of narcotics. Ibuprofen 400-800 mg (e.g., Advil) may be taken as needed in between doses of narcotic pain medication for additional pain control. Keep your extremity elevated. This helps with swelling and pain. Pain medicine can cause itching, nausea and/or constipation. These are all normal, common side effects from narcotic medication.

Diet: The anesthetic drugs used during your surgery may cause nausea for the first 24 hours. Following surgery, begin with clear liquids and light foods. You can progress to your normal diet if not nauseated. If nausea and vomiting become severe, or if you show signs of dehydration (lack of urination), please call our office.

Driving: No driving until cleared by your doctor, this usually takes place at your first post-operative appointment

Physical therapy: Initiate outpatient physical therapy 2-3 days after surgery unless instructed otherwise by the doctor. Please call our Physical Therapy department at 305-689-8888.

CALL OUR OFFICE AFTER SURGERY WITH ANY OF THESE SYMPTOMS

1. Temperature above 101° or higher
2. Severe chills
3. Persistent nausea and vomiting
4. Excessive bleeding or drainage on the dressing
5. Numbness, tingling, or loss of feeling to the extremity that does not improve with repositioning

6. Increased pain that is not relieved by pain medication

If you have further questions, please refer to discharge paperwork that was given to you the day of surgery.



FMLA/ SHORT-TERM DISABILITY /WORK LETTER REQUEST



Family and Medical Leave Act (FMLA) and Short-Term Disability Checklist

PLEASE FILL OUT "REQUEST FOR PAPERWORK FORM" (ATTACHED)

BEFORE SUBMITTING, PLEASE GATHER ALL DOCUMENTS LISTED BELOW:

- FMLA or short-term disability form(s)
- Paper work request form – attached
- Specific dates you are requesting to be off of work – your surgical date is considered "start date"

Fax or email all requests, including all of the above documents, to our surgical coordinator:

Fax: 305-689-0633 (Attach cover page with patient name, surgical date, and doctor)

Email: jxa328@miami.edu (Subject line: Patient name, surgical date, and doctor)

IF ANY EMAIL OR FAX ARE INCOMPLETE (ITEMS ON CHECKLIST MISSING) THEY WILL NOT BE WORKED ON UNTIL ALL DOCUMENTS ARE RECEIVED.

****ALL FORMS WILL BE COMPLETED IN 7-10 BUSINESS DAYS****

