

Orthopaedic Surgery Clinic Los Gatos

SURGERY INFORMATION PACKET

Scheduling your surgery date:

The date of your surgery will be scheduled according to Dr. Vaughn's operating room schedule, the type of surgery you will undergo and your desired time frame. We will do everything we can to accommodate your wishes. While scheduling your exact surgery date, you will also be scheduled for any needed pre-operative and/or anesthesia appointments. You may also be provided with a list of any tasks that are required to be completed (such as needing a note of medical clearance from your primary doctor). The initial post-operative appointments will also be scheduled at this time. Dr. Vaughn and/or his assistant Jesse Smith PA-C or Sanam Nejad PA-C, will see you in the office for your initial follow up at approximately 2 weeks after the surgery. If you are from out of state or country, you may wish to stay overnight locally and follow up the day after surgery before traveling home. This would be discussed during your initial visits. Any additional appointments will be scheduled at that 2nd post-operative visit as needed.

The **exact time of your surgery** will typically be determined the day prior to your scheduled surgery date. The OR staff will contact you by telephone **the day before** between 4-7 PM to notify you of the time you should arrive for your surgery.

Equipment needs:

To maximize your comfort and overall outcome after surgery, we will typically arrange certain equipment items for you to have after surgery. Depending on the type of surgery, this MAY include a brace or sling, crutches, a CPM device (Continuous Passive Motion), or cryotherapy cuffs (ice machine). Our representatives for these devices will contact you as needed **before your surgery** to arrange for these items. Our surgical coordinator, will set this up for you and any questions regarding this can be directed to her at **(408) 866-6651**. Specific information regarding the use of these devices can be found under the topic of **Post-operative Equipment** in this packet.

What to do in the days - weeks prior to surgery:

In the days leading up to your surgery, **you MIGHT have a few tasks** that need to be completed. These will be listed on your scheduling sheet and you will clearly know if you have anything to complete (typically there is nothing to complete). If there is nothing specific we have asked of you, then rest assured that we are ready to go. We will contact you if any issues arise.

Shortly before your surgery, you may require a **pre-operative appointment** to review your medical history, update a physical exam and review the planned surgery. Depending on the timing and scheduling of your surgery, this may happen at your initial clinic visit, or may be done separately. You will also be discussing numerous items such as physical therapy, use of crutches, bracing or sling, and time for full recovery. You will also be given any prescriptions that you may require for your recovery period.

THINGS FOR YOU TO COORDINATE PRIOR TO YOUR SURGERY

- A ride to and from surgery

You will need an adult licensed driver to provide you a ride to and from the surgery. If this is not arranged, YOUR SURGERY MAY BE CANCELLED.

- Space in your vehicle

Depending on the type of surgery, you will have some equipment to transport home with you (crutches, brace, CPM device etc). This may require having some extra room in your vehicle. Also, if you are required to wear a special brace temporarily after surgery, you will need to plan for some added leg room

- Transportation needs before returning to driving

Often after surgery, you will not be capable of driving for some time and you will need to determine how best to deal with this temporary limitation. This can be for a duration of just a couple days to several weeks, depending on the type of surgery that you have. Dr. Vaughn will review the details of this with you in your pre-operative discussion

- Time off of work

Likely after your surgery, a short period of time off of work will be required, or at least beneficial for your recovery. The duration of this is highly variable depending on your job duties and type of surgery, so Dr. Vaughn will discuss this with you in some detail and individualize this for you during your pre-operative discussions

- Help / Support at home

Be sure you understand the restrictions or limitations that will be a factor after the surgery and what needs you have at home with family and friends. These issues will be addressed in your pre-operative discussions with Dr. Vaughn, but be sure that you have the help you may need so everything goes smoothly. This could include help with your daily activities (showering, changing clothes, cooking, getting around the house, getting to required appointments) or taking care of your family (children, spouse, parents etc)

- Time for Physical Therapy

Most surgical procedures will be optimized by, or require, physical therapy for a certain amount of time after surgery. You will need to plan accordingly to allow for time in your work or school schedule to complete these activities. Typically therapy consists of 2-3 times per week in the first couple weeks, followed by less frequent sessions thereafter. Also, it will be expected that you perform many of these exercises at home. Your particular needs based on your surgery will be reviewed in detail with Dr. Vaughn in your pre-operative discussion

- STOPPING CERTAIN MEDICATIONS

Aspirin, aspirin related products, and anti-inflammatory medications (such as Advil, Aleve, Motrin, Diclofenac etc) **MAY NEED TO BE STOPPED** prior to surgery. Details will be discussed at your pre-operative visit.



What to do THE DAY PRIOR TO SURGERY:

Hopefully you have already made all the necessary arrangements for your surgery and the recovery/rehab period. Be sure to review the items below and also the section on "What to expect on the day of surgery" so there are no surprises.

A few things to consider about the day before surgery:

- be sure you have stopped any medications that you were instructed to stop (see above)
- be sure you have filled the prescriptions given to you for your post-operative pain relief
- be sure you have a ride to and from your surgery
- be sure that you know what time to arrive
 - the OR staff will contact you typically between 4-7 PM the day before your surgery with this information. Usually, you are expected to arrive approximately 2 hours before your scheduled surgery time for the anesthesia and nursing teams to meet with you, and prepare everything needed for Dr. Vaughn to perform your surgery
 - Please note: if you do not arrive on time, your surgery MAY BE CANCELLED!
- be sure to shower the evening before surgery
 - use the provided antimicrobial scrub sponge given to you at your pre-operative visit
 - use 1 EZ Scrub brush the evening before your surgery. Cleanse your whole body with the sponge brush and special soap, and spend an extra few moments on the area of your surgery
 - repeat this same process with the 2nd provided brush the MORNING OF YOUR SURGERY

- YOU CANNOT HAVE ANY FOOD OR DRINK AFTER MIDNIGHT THE NIGHT BEFORE YOUR SURGERY!

- This is extremely important and your surgery will possibly be cancelled if you
 do not follow this rule. This is potentially a serious risk for complications
 associated with any sedation or anesthesia that will be used during your
 surgery.
- typically any medications that you normally take in the morning (blood pressure medications, diabetes medications, etc) CAN be taken with no more than a sip of water only.
- be sure any and all of your questions or concerns have been addressed and answered for you.
- try to have a relaxing day before your surgery



What to expect on THE DAY OF SURGERY:

Before you arrive:

- Shower/Bathe with the remaining antimicrobial scrub sponge as instructed
- Wear loose, comfortable clothing
 - do not wear perfume/cologne, make-up, nail polish or jewelry
- Leave valuables at home
- Bring your Identification, health insurance card and any insurance forms
- Bring your Personal Medication card

Once you Arrive:

- Register at the Patient Registration Area located just outside the elevators
- You will be directed to the waiting area and the Pre-op nurses will lead you into the Pre-op area. Your family or friends (typically only 1 or 2) are welcome to join you.
 They may stay with you until you are transported to the OR for your surgery. It may be helpful to have them stay until you meet with Dr. Vaughn to do a final review.

In the Pre-operative Area:

- The Pre-op nursing staff will conduct an interview to complete any required paperwork
- You will be asked to confirm your identity, state any allergies you may have, confirm the type of surgery you are scheduled for and the correct site of the surgery.
- Your medical history and medications will be reviewed by the nursing staff
- YOU MUST VERIFY THE LAST TIME YOU HAD ANYTHING TO EAT OR DRINK!
- You will change into a hospital gown and wait on a gurney (small portable bed)
- Your surgical site may require shaving to minimize infection risk
- Dr. Vaughn will meet with you to do a final review and answer any last questions you may have. It may be helpful to have your family or friends present for this review. He will also confirm the surgical site and mark this area with a special marker. The ink from this marker is semi-permanent and will gradually wash off over 1-2 weeks.

PLEASE DO NOT MAKE ANY MARKINGS ON YOUR SKIN YOURSELF!!

- You will meet other members of the treatment team, including the nurses that will help care for you in the OR and the anesthesia team. Either the nurses or the anesthesia team will place an IV in the most appropriate location.
- You will be asked numerous times by the various members of the treatment team to confirm your identity, operative site and procedure as this is a regulation and requirement
- Once the OR room is ready and the team is prepared, you will be brought to the OR on the gurney. At this point your family or friends will be instructed to wait in the waiting area and will be provided with a special identification number so that they can track the progress of your surgery. They should provide contact information with the pre-op nursing staff or the waiting room attendant should they need to be contacted for any reason.



In the Operating Room:

- Once in the OR, you will be transferred to a specialized surgical table. This table is fairly narrow and the OR staff will help position you safely.
- The anesthesia team will apply monitors for a continuous EKG, Blood Pressure, Pulse and Oxygen Saturation measurements
- There will be several members of the OR staff preparing instruments and setting up items for your surgery. Our OR team will be attending to you to make sure you are safe and comfortable during this process.
- The Anesthesiologist will then begin administering the anesthesia for your surgery and once you are safely asleep, your surgery will begin.
- You may be carefully re-positioned while you are asleep, depending on the type of procedure you are having. This is done in a safe and controlled fashion and you are well protected the entire time.
- At the conclusion of the surgery, you will be safely woken up and returned to the gurney for transport to the recovery area.



Immediately after your surgery:

Dr. Vaughn will help get you to the recovery area, arrange for your post-operative equipment needs and discharge instructions. He will then speak with your family and friends to discuss the surgery and notify them that you are safely out of the OR and will be ready to be seen in about usually about 30-60 minutes.

He will likely be back in the OR for his next surgery while you are in the recovery area. He will relay all necessary information to your family or friends, but likely **will not** be able to see you prior to you leaving for home, depending on the length of his other surgeries. If this is the case and you wish to speak with Dr. Vaughn at the end of the day, please leave your preferred contact information with your recovery nurse and ask that Dr. Vaughn contact you once he is done in surgery.



In the Recovery Area:

Phase I - Post-Anesthesia Care Unit (PACU)

- Length of stay in this location is from 45-90 minutes.
- This is where you will be taken immediately after your surgery is completed. You will typically be very sleepy still and may not remember this recovery period due to some of the anesthetic medications. You will have several nurses taking care of you and Dr. Vaughn will be arranging some of your post-operative equipment such as braces, slings, or the ice machine.
- You will be monitored for vital signs and comfort as you fully awaken.
- Family and friends will NOT be allowed in this area until you are fully awake
- In some instances, you will be moved to a secondary area to continue the recovery process with your family or friends to go over instructions

Phase II - Recovery Room

- This is often the same area as the PACU, but designates the time frame where your family and friends may be present
- Length of stay in this location is another 15-30 minutes
- You will change into your regular clothes
- The Recovery Nurses will go over written and verbal instructions specific to your surgery and review your discharge orders with you
- They will also review with you the use of your post-operative equipment (crutches, CPM, Brace, Sling, cold therapy units)

Once you return home, it is advisable that you have someone stay with you overnight for at least one night in case any issues arise.

Should you have any **medical emergency** after surgery, **call 911** immediately

For any **urgent post-operative concerns**, please contact Dr. Vaughn or his covering partner via the Stanford Orthopaedic Surgery Clinic in Los Gatos at (408) 866-6651.

Any **Non-urgent post-operative questions** can be answered in your initial post-operative visit, can be addressed by use of the MyHealth messaging application, by email or by contacting the clinic at (408) 866-6651.



FREQUENTLY ASKED QUESTIONS:

The following are common questions from patients about the surgery process. If you do not find the answers here you are looking for, be sure to ask at your pre-operative appointment or contact us.

PRE-OPERATIVE QUESTIONS

Q: Do I need to stop any medications before surgery?

A: Typically you may continue all of your medications but this will be reviewed with Dr. Vaughn. If you are taking aspirin or aspirin related products, or routine anti-inflammatory medications, these rarely need to be stopped 1 week prior to surgery, as the majority of Dr. Vaughn's surgical procedures will not have concern for bleeding complications.

Q: Do I need to take any special medications or change what I eat before surgery?

A: NO. Only in unique situations will you need a new medication to take BEFORE your surgery. If this is required, Dr. Vaughn will specifically discuss this with you. No special dietary changes are required either.

Q: How do I find out the date/time of my surgery?

A: You will have your surgery date chosen according to Dr. Vaughn's OR schedule, the type of surgery, and your preferences. Our surgical coordinator, Margie Mendoza, will be your contact for scheduling. The specific time of the surgery will be determined the day before your surgery and the OR staff will call you between 4-7pm the day before to notify you on the time to arrive and the scheduled surgery time.

Q: How do I get my post-operative equipment (crutches, brace etc)?

A: All of your equipment needs will be arranged before your surgery by our surgical team. The representatives from the companies providing the equipment will contact you about this prior to your surgery. The equipment will be provided to you either before your surgery or at the surgery center and are yours to take home with you.

Q: Will my insurance cover the cost of surgery?

A: When you discuss scheduling with our surgery coordinator, she will help answer this question for you. You can also contact your insurance company directly and request information regarding this.



POST-OPERATIVE QUESTIONS

Q: What type of transportation do I need after surgery?

A: You will need a licensed adult driver to bring you to and from surgery. Be sure to make these arrangements in advance.

Q: When do I resume taking my medications?

A: Typically you will resume all of your regular medications immediately after surgery. This will be individually reviewed with you by Dr. Vaughn.

Q: How do I get medications for pain relief for after surgery and what if I run out?

A: At your pre-operative visit you will be provided with all the necessary prescriptions for after your surgery. This may include anti-inflammatory medications, relatively strong narcotic medications (such as norco or percocet), and if needed, medications to help with post-operative nausea. Any special medications that may be required will also be given and instructions for each will be provided. Instructions can also be found in the section "post-operative medications" in this packet.

If you are about to run out of pain relieving medications please contact our office BEFORE you run out of the medications. Please be aware that all NARCOTIC pain medications now require a secure prescription according to DEA guidelines, are allowed in limited quantity, and CAN ONLY BE PRESCRIBED FROM OUR CLINICAL OFFICES DURING BUSINESS HOURS.

Q: How much pain can I expect after the surgery?

A: While every patient has a different response to pain and pain medications, typically the minimally invasive techniques that Dr. Vaughn utilizes, including arthroscopy, results in only temporary mild to moderate pain. In most scenarios, you can expect to have pain that may require treatment with the narcotic pain relieving medication for 2-4 days. Multiple modalities are utilized to minimize your experience of pain, including the surgical technique, the use of local anesthetic injections at the conclusion of your surgery, optional nerve block treatments before surgery, the use of cold therapy devices and the combination of anti-inflammatory and narcotic pain medication as appropriate. You may discuss the details of this with Dr. Vaughn at your pre-operative visit.



Q: When and where are my follow up appointments?

A: You can expect to see Dr. Vaughn or his assistant within the first 2 weeks after your surgery. This appointment will be scheduled at the time you schedule your surgery date. Additional appointments will be scheduled at these visits as needed. These will be in our Los Gatos clinic.

Q: Do I need physical therapy after surgery? How much? Where will this occur?

A: Typically in order to maximize your surgical outcome, get you back to your activities safely and quickly, physical therapy will be scheduled for typically within 7-10 days after your surgery. This will be arranged prior to your surgery and coordinated by our surgical team. The specific type of therapy, number of sessions and duration will be dependent upon your surgery. You should expect to undergo sessions 2-3 times per week for at least the first few weeks after surgery. This can occur at any location that works well for you. We have a preferred list of centers that work well with our patients and have an excellent record.

Q: When can I drive after surgery?

A: This will be dependent upon the type of surgery you have and will be discussed at your pre-operative visit.

Q: When can I travel after surgery?

A: Typically the restriction on travel after surgery applies most significantly to surgery on the lower extremity (hip, knee, ankle). With long distance travel in a car and certainly on an airplane, there is an increased risk of developing a blood clot after surgery. This increased risk lasts for approximately 6 weeks after surgery. If you plan to travel within the first 6-8 weeks after your surgery, please discuss this with Dr. Vaughn as some additional precautions may be taken.

Q: When can I shower after surgery?

A: The bandages applied at the time of surgery can generally be removed the day after your surgery with a few exceptions. Please leave steri strip bandaids on for 2 weeks. This will be reviewed with you. No bathing, soaking or swimming will be allowed for 3 weeks from surgery until the incisions are completely healed. This will be discussed in detail with you before and after your surgery. Some commercially available cast and bandage protectors have been used to help in the first week after surgery. One example is www.xerosox.com



Q: What things do I need to look out for after surgery as signs of a problem?

A: Specific instructions will be discussed with you regarding warning signs after surgery by the recovery room nurses, Dr. Vaughn and/or your physical therapist after surgery. These instructions will be provided to you at the time of discharge from the surgery center.

If you experience any of the following, you should immediately contact Dr. Vaughn's office at (408) 866-6651. After-hours concerns can also be directed to our clinic phone number and you will be routed to speak with Dr. Vaughn or his covering partner. If you have difficulty reaching Dr. Vaughn after-hours, you may also go through the Stanford Operator at (650) 723-4000:

- Fever greater than 101.5° F or 38.5° C for more than 3 days
- Pain not reduced by the prescribed pain medication
- Excessive leg swelling and pain
- Redness, swelling, bleeding or excessive drainage from your incision site
- Sudden coldness or discoloration of incision site
- Difficulty breathing, shortness of breath or chest pain
- Persistent nausea, vomiting or diarrhea

IF YOU HAVE A MEDICAL EMERGENCY AFTER SURGERY, CALL 911 IMMEDIATELY



POST OPERATIVE EQUIPMENT

CRUTCHES

For nearly all surgery on the lower extremity (hip, knee, ankle, foot), crutches will be required for a certain amount of time after surgery. The duration of use will be determined based on the type of surgery you have, and may only be determined at the time of surgery. You can expect a minimum time of use of 2 days, but this may continue for 2 months or more. This is to alleviate stress on the operative site immediately after surgery and to allow the required time for healing.

Provided on the day of surgery in the recovery room.

●KNEE BRACE

This is designed to protect certain types of repair or reconstruction of the knee and allow the body to heal. The type of brace, duration and timing of use, as well as amount of motion and weight bearing will be determined by the specific type of surgery you have. Typically this may be removed when you are in the comfort of your own home and resting comfortably with the leg supported or with use of the CPM device. It should be worn for sleeping until you are cleared by Dr. Vaughn.

Provided on the day of surgery and will be fitted to you by Dr. Vaughn.

SHOULDER SLING

For nearly all surgeries on the shoulder, and some elbow surgeries, a shoulder sling will be required. The specific type of sling and the duration of use and motion allowed during its use will be determined by the specific type of surgery you have. It is removable for showering purposes but the same restrictions on motion or lifting will apply in this situation. Typically this may also be removed when you are in the comfort of your own home and resting comfortably with the arm supported with a pillow under the elbow. It should be worn for sleeping until you are cleared by Dr. Vaughn.

Provided on the day of surgery and will be fitted to you by Dr. Vaughn.

● CRYOTHERAPY DEVICE (COLD THERAPY SYSTEM)

The use of compression and cold therapy helps minimize inflammation, irritation and swelling and typically allows for expediting your rehab process. Ideally, the surgical site should be kept cool intermittently for the first 4 days after surgery and these devices are helpful for doing this in a controlled fashion. If these are unable to be purchased or rented, then the use of ice bags or re-useable ice packs are suitable, but the skin must be protected with a thin cloth to prevent skin damage. The cold therapy systems typically can run continuously as needed, while ice packs should not be used for more than 30 minutes at a time.

Provided on the day of surgery in the recovery room. (optional)



● CPM (CONTINUOUS PASSIVE MOTION)

Statistically, the greatest risk after knee surgery is post-operative stiffness. For this reason, and a few other specific scenarios, gentle motion after surgery is a key component to a good outcome. For this reason, a CPM machine is utilized after surgery to begin this process immediately for **some surgical procedures**. The machine has instructions provided with it and the motion allowed will be determined based on your surgery. Typically the machine will be set by Dr. Vaughn's team at an initial safe level of motion based on your procedure and you will be instructed on how to increase the motion during your recovery. This machine is used WITHOUT the brace on. Information will be provided regarding how much time per day and for how long to use the machine. For questions regarding the function of the device, contact our representative, Kim Blanco (contact information is provided on the machine).

Provided typically at the surgery center to take home. Return in our office.

●TED STOCKINGS

Although very rare, one potentially dangerous risk from surgery, primarily on the lower extremity (hip, knee, ankle), is development of a blood clot. This is due to several factors that are impacted by the surgery. To help minimize this risk, special compression stockings are provided to you to wear during the surgery on the non-operative leg, and to wear on both legs after the surgery while having decreased mobility, or until you are cleared by Dr. Vaughn.

Provided on the day of surgery prior to your procedure.

Dr. Vaughn's representative from the company that provide this equipment will be contacting you to arrange the delivery of all equipment as needed, usually within a few days of your scheduled procedure. You should be provided with contact information for them should any problems develop. However, if you are having any difficulty reaching them, contact our surgical coordinator at (408) 866-6651.



POST OPERATIVE MEDICATIONS

NORCO / PERCOCET

These medications are provided for post-operative pain relief only. They are a combined pill containing both a narcotic medication (Hydrocodone or Oxycodone) as well as tylenol (Acetominophen -APAP). They are intended to be used typically on a semi-regular basis for the first few days after your surgery, but only as needed. They then typically will be used sparingly for up to 7-10 days. Occasionally a longer duration of use is required and this can be discussed with Dr. Vaughn. A single prescription will typically be provided initially but should more medication be required, contact our office during business hours before you anticipate running out of medication.

Do not take additional tylenol while using these medications on a regular basis. If you have questions or concerns, please contact us to discuss.

CELEBREX (celecoxib)

This is a brand name (now also generic) specialized anti-inflammatory medication that is preferable for the immediate post-operative period. Certain surgical procedures can potentially be affected negatively by taking anti-inflammatory medications and if this pertains to your surgery, Dr. Vaughn will specifically discuss this with you. This medication is intended to be taken twice daily with food for 1 week to 1 month depending on the surgery. If this medication is unable to be obtained due to insurance or availability, alternate medications will be discussed.

PHENERGAN / ZOFRAN

Unfortunately, one of the more common side effects from the anesthetic given at the time of surgery, and sometimes with the use of the narcotics pain medications, is post-operative nausea and vomiting. To minimize this effect, our anesthesia team takes special precautions and may administer certain medications immediately before, during or after your surgery. As this may continue for a few days after surgery, a prescription for one of these medications may be provided in tablet/capsule form to take at home. These are to be taken only as needed, one tablet every 6-8 hours. Please note that most patients DO NOT have this side effect and therefore this medication is not automatically prescribed.

COLACE

Another possible side effect of the anesthetic and narcotic pain medications is post-operative constipation. For the typical short duration of use of these medications after surgery, this is not a routine problem. However, you may be provided this prescription for your convenience as well. It is taken twice daily as a stool softener and should typically only be taken as needed.

PRESCRIPTIONS FOR THESE MEDICATIONS WILL BE PROVIDED AT YOUR PRE-OPERATIVE APPOINTMENT AND SHOULD BE FILLED PRIOR TO THE DAY OF SURGERY TO AVOID LAST MINUTE PROBLEMS