



Dr. Derek Shia

9250 SW Hall Blvd., Tigard, OR 97223

503-293-0161

Pre-Op Instructions & Checklist

Patient's Name: _____ Surgery date: _____

1. Your surgery has been scheduled at the following facility. You will be contacted about the time of your surgery. Please arrive at the main admitting desk at least 1-2 hours before your surgery time.

_____ Alberty Surgical Center (1 hr. prior)	_____ Center for Specialty Surgery (1 hr. prior)
_____ St. Vincent Hospital (2 hrs. prior)	_____ Good Samaritan Hospital (2 hrs. prior)
2. Please **be available** by phone the night before/day of surgery in case there is a change in the schedule which may require you to arrive earlier/later. The Anesthesiologist will contact you before surgery to review your health status.
3. **EATING & DRINKING. Do not eat or drink anything after midnight before your surgery!!** This means no coffee/tea, juice, water, food, hard candy or even chewing gum.
4. **MEDICATIONS.** Please discontinue taking **aspirin** or any product containing aspirin one week prior to surgery. The non-steroidal anti-inflammatory (**NSAID's**) medicine such as Advil, Motrin, Aleve, Ibuprofen should be discontinued 24 hours prior to surgery. If you are currently taking Coumadin/Warfarin, we will have to coordinate that with your PCP &/or the Coagulation Clinic. Please discontinue all **herbal supplements & Vitamin E** two weeks prior to surgery as they may interfere with the anesthesia. If you take **any other medications**, please check with your primary care doctor—some medicine should wait to be taken until after surgery. If you have a medicine that needs to be taken that morning, you may take it with a sip of water. *****It is imperative that we have a current detailed medication list with doses & directions.**
5. Wear loose fitting, **comfortable clothing** to the hospital. A gown and robe will be provided for you upon arrival. Please do not bring anything valuable—leave jewelry & valuables at home.
6. Please arrange for a family member or a friend to take you home a few hours after surgery. **All patients must be accompanied by an adult escort for discharge.** You will not be allowed to drive yourself home nor take a taxi/bus if you are alone. If you need **crutches**, they will be supplied by the surgical facility upon discharge.
7. Please notify us immediately if you have developed any type of **illness or infection** (flu, cold, fever etc). We would also like to know if you have an open sore, rash or skin irritation near the surgical site.
8. Do not make any sudden changes in your diet. Eat as you normally would and try to keep your diet consistent. See the enclosed handout (pink sheet) from our **Nutrition** Department for some post-op **guidelines**.
9. Your 1st **post-op appointment** has been made to come see us in 7-10 days (see enclosed index card).
10. Dr. Shia may have you attend **Physical Therapy** after surgery. If you have a Physical Therapy Referral form (green sheet) in your folder, please schedule an appointment for 3-5 days after surgery. We have PT at our Tigard, Downtown, and South offices. If these are not convenient, we have enclosed a list of other local therapy offices. You **MUST** take the form with you on the first visit—it is your prescription.
11. The **Game Ready Unit** is an ice compression machine that is highly recommended by Dr. Shia for control of your post-operative pain & swelling. He may also have you wear a **brace** after surgery. We will have the company that handles these items contact you with more details. Their brochure & business card are enclosed.
12. Please **read your Post-op Instructions** before your surgery so that you know what to expect. If you have any further questions, please don't hesitate to contact us at (503) 293-0161. **We wish you a speedy recovery!!**