



PRECISION

ORTHOPEDICS & SPORTS MEDICINE

Date Of Surgery: _____

The hospital will call you a week before surgery as well as the Friday before if your surgery is on Monday, and the day before if your surgery is on Tuesday.

To facilitate preparation for your surgery the following information is provided.

Baylor SurgiCare @ Oakmont	7200 Oakmont Blvd, Fort Worth TX 76132	817-732-3300
Baylor Surgical Hospital Fort Worth	1800 Park Place Ave, Fort Worth TX 76104	682-703-5618
Texas Health Harris SouthWest	6100 Harris Parkway, Fort Worth TX 76132	817-433-1845
Texas Health Southlake	1545 E Southlake Blvd, Southlake TX 76092	817-748-8722
Baylor Surgicare Southlake	905 E Southlake Blvd, Southlake TX 76092	817-410-4300
Medical City Surgical Hospital Alliance	3200 North Tarrant Pkwy, Fort Worth TX 76177	817-502-7300

- A \$50 fee will be required for any FMLA/Disability/Insurance forms to be filled out PER request- and this will be due at the time of request. Please allow 7-10 days to complete these forms.
- If there is a reschedule on a surgery date discussed/confirmed with Dr Downey there will be multiple delays in getting the forms to your employer due to having to re-start the process. Please be patient!
- Fill ALL prescriptions prior to surgery but DO NOT start taking them until after surgery unless discussed by Dr. Downey.
- IF YOU NEED A MEDICATION REFILL AFTER SURGERY PLEASE REACH OUT TO MY NURSE.
- Do NOT eat or drink anything including water after midnight the night before surgery in order to avoid any cancellations or delays.
- If you take medications please refer to the chart on this form for what you should take prior to surgery- including the day of surgery. The hospital will also confirm this.
- Please notify the office if there is any change in your physical condition (i.e. infection, fever/chills, injury)
- Take a shower/bath the night before surgery unless you have been directed otherwise. If you have sustained an injury and have a splint on- please keep the dressing dry/clean and intact.



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- Wear comfortable/ loose clothing the day of surgery.
- You will need a responsible representative to drive you home after surgery/ discharge from the hospital. DO NOT take an UBER, LYFT, TAXI or anything of the sort because you will be sent home.
- Post operative care is detailed below and will be communicated to the person accommodating you during surgery.
- Have all things set up at home as much as possible prior to surgery so that you can rest and take it easy the first couple of days.



Activity After Surgery:

1. You will be placed in a surgical boot and should NOT place any weight on your foot until discussed with Dr. Downey depending on your surgery.
2. If you have major reconstructive surgery or fracture repair you will be placed in a splint. This is a soft type cast to help swelling and keep your foot/ankle protected. You should NOT place any weight on your splint. This will be changed in the office and exchanged with a boot after the sutures are removed.
3. If weight bearing directly after surgery then you should utilize the boot in order to protect your foot/ankle and prevent complications.

Rest when you feel tired. Getting enough sleep will help you recover. **Remember- the more you are off of your surgical foot/ankle, the more you ice and elevate the better off you will be.**

You should not drive until directed by Dr. Downey. If you drive while on narcotics in a boot you are responsible for the risks/unforeseen complications even if you are not at fault.

There will be some drainage through the dressing. This is typically not a problem and the dressings will be changed the following week. Unless there is complete soaking of dressing and blood dripping of the dressing, please keep it elevated, apply mild/moderate pressure and wait for your 1st post operative visit. If there are concerns you can always reach out to our team for medical advice.

It is best to use a bathtub vs shower to keep the surgical dressing dry and prevent water from entering the dressings. Shower Guards are HIGHLY recommended to prevent complications. Should the surgical dressings or padding become wet, use a hair dryer on low and blow dry the surface of the dressing to remove the moisture. If the surgical dressing is soaked, please contact our team so we can further assist you.

Generally you will need to avoid heavy lifting for 3-8 weeks depending on your surgery.

For FMLA a \$50 fee will be required for any FMLA/Disability/Insurance forms to be filled out PER request- and this will be due at the time of request. Please allow 7-10 days to complete these forms. If there is a reschedule on a surgery date discussed/confirmed with Dr Downey there will be multiple delays in getting the forms to your employer due to having to re-start the process. Please be patient! You will probably need to take several weeks off from work depending on your surgery and your ability to stay off of your surgical leg. How much time off depends on the type of work you do and the extent of the surgery. If you are able to perform sedentary (sitting) you can return to work in 1-2 weeks pending your pain tolerance, and if you are still on pain medication.



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Incision Care:

You will leave the hospital with bandages under your boot/splint that are holding your foot/ankle in the correct position. Keep the surgical dressing and bandages intact and *DO NOT* touch the surgical area. This is a clean environment even with the bleeding through the dressing. Removing the dressing may expose pathogens that complicate your recovery or cause infection. Your surgical dressing will be removed when you return to the office after surgery.

You will be in a surgical dressing for 2 weeks and the sutures will typically stay in during this time. Please be advised that you may require longer than the typical 2 weeks for sutures to be removed. This will be determined after surgery. It typically takes 2 weeks for the incisions to heal.

Depending on the surgery after the 2 week time period the sutures will be removed, you may be required to remain in the boot. This will be determined by Dr. Downey and will be discussed as you progress in your post operative treatment regimen.

After sutures are removed you will initiate physical therapy which will be discussed with Dr. Downey and based on the surgical procedure. Formal physical therapy is encouraged and will be discussed with Dr. Downey and will be a major component of the healing process. This will be initiated by Dr. Downey based on the surgery that has been performed.

You can use crutches/knee scooter/ wheelchair to move around the house to do daily tasks. Again please do not put any weight on your surgical foot until directed by Dr. Downey. Crutches can be distributed in the office. If you would like to have crutches for your post operative treatment regimen please discuss this with Dr. Downey at the time of pre op for us to get those for you. Knee Scooters are available for post operative treatment regimen as well. If you are interested please discuss this with Dr. Downey at the time of pre op for us to get those for you. Wheelchairs are available; however typically a prescription is needed-if you would like to have a wheelchair for your post operative treatment regimen discuss this with Dr. Downey at the time of pre op for us to get those for you.

Ice and Elevation:

For pain and swelling control it is recommended to place an ice pack or frozen bag of peas behind your knee. There is a large vessel that runs behind your knee. If you ice that behind your knee the swelling in your foot will decrease. You will not be able to ice directly on your foot/ankle due to the surgical dressing. The amount of time depends on your pain and amount of discomfort. It is recommended to ice 30 minutes on and 30 minutes off. This may be for the entire 2 weeks duration prior to the sutures being removed. Make sure there is a thin cloth between the ice and your skin to prevent irritation. After the sutures have been removed ice/cold packs/frozen peas can be applied directly to the foot/ankle.

Swelling of the foot/ankle can occur 6 months to a year following surgery depending on the procedure you have. The foot/ankle is furthest from your heart and becomes challenging for the vessels to



reorganize their flow. Please be advised of this. Ice/Elevation is also encouraged during your whole recovery process.

Following surgery it is advised for you to elevate your leg on a pillow and/or back of the couch during the first 2 weeks. Try to keep it above the level of your heart. This will help reduce the swelling and subsequently help in your recovery.

Follow up care is the key part of your treatment and safety. Be sure to make/go to all of the appointments, and call your surgeon if you are having problems. It's also a good idea to know your test results and keep a list of the medications you take.

If you have a heart condition you will need cardiac clearance prior to your surgery date. If you an underlying condition, or follow up with a specialist you will need a clearance from them as well. Clearances are required the Friday prior to surgery. This will also be coordinated with Dr. Downey's staff; however, the more proactive you are about getting the clearances the risk of cancellation is reduced. If there is no clearance the surgery will have to be pushed back.

Diet/Medications: *Nausea:*

You can eat your normal diet. At times the anesthesia following surgery causes nausea. If your stomach is upset, try bland, low-fat foods such as plain rice, broiled chicken, toast, and yogurt. An anti-nausea medication will be provided. If you are diabetic a healthy diet will assist in your post operative course. Please adhere to your diabetic nutrition guidelines as well as your diabetic mediations.

Constipation:

You may notice that your bowl movements are not regular directly after your surgery. This is common due to the narcotics as well as the anesthetic utilized during your surgery. Try to avoid constipation and straining with bowel movements. You may want to take a fiber supplement every day as well as an over-the-counter bowel management medication.

Other Medications

Please take all medications exactly as prescribed. These medications are important to your health. Detailed information on how to take your medication is printed on your medication bottles as well as in this packet and you can discuss with your pharmacist when receiving your medication. As stated previously the medication can be filled any time prior to your surgery but should not be taken until the surgery is complete unless advised by Dr. Downey.

Antibiotics will be provided for prophylactic purposes. These will begin the day after surgery has been completed. Dr. Downey will go over your allergies (if you have any to medication); however please notify Dr. Downey if you have had any issues with previous antibiotics to optimize your prophylaxis.



Pain Medication will be provided for your recovery. Please see the narcotic policy below for further details about pain medication.

It is imperative for you to take the blood thinner daily in order to prevent a blood clot in your leg. It should be taken with food and water in order to absorb efficiency. You will be taking the blood thinner medication until you start placing weight on the surgical foot/ankle.

Pain Medication will be provided for your recovery. Please see the narcotic policy below for further details about pain medication.

If you have a fracture and are scheduled for a fracture repair or if you are having major reconstructions it is strongly advised to avoid taking NSAIDS prior to surgery and up to 4-6 weeks after surgery as these medications have been shown to decrease bone healing.

Do not take two or more pain medications at the same time unless you have been advised to do so by your surgeon. Many pain medications have acetaminophen (Tylenol). Too much Tylenol can be harmful.

If you think your pain medication is making you sick to your stomach:

1. Ask your surgeon for a different pain medication
2. Take your pain pills after meals- unless your surgeon has advised otherwise- to assist with any nausea
3. Ask your surgeon for an anti-nausea medication.

If prescription refills are required- please call your pharmacy. Please notify our office by the end of the clinic day on Friday if a refill is needed. All medication refills that are requested over the weekend will be addressed on the next business day. Please keep in mind that controlled substances cannot be refilled without a new prescription from your surgeon.

If you are concerned that you are having a drug reaction such as a rash, persistent nausea, vomiting or diarrheas please contact your surgeon as soon as possible. If it is a severe drug reaction and you are unable to contact our office please call 911.

If you have questions about your medication, please ask your surgeon, your primary care physician, your cardiologist, your anesthesia team, a nurse or a pharmacist. If you take several medications please check with your surgeon what you should/should not take the day of your surgery. You can also ask the anesthesia team during your pre-admission testing (PAT) exam.

Vitamins:

Please stop taking any herbal supplementations/vitamins to include Ginkgo, Ginseng, Garlic, Vitamin E, Omega 3, Fish Oil, CoQ10, Green Tea, and/or St. John's Wort as these have been found to interact



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with your blood thinners and/or increase your blood rate. You can resume these supplements after your surgery has been completed.

You will be prescribed Vitamin C 1000mg daily in order to prevent incidence of complex regional pain syndrome post operatively and nerve pain. This will be provided on your prescriptions for your reference;

However this is an over-the-counter medication and will not be distributed with your other medications at the pharmacy. The type is not a factor. You can purchase this at any pharmacy or grocery store.

In order to assist with bone healing and prevent osteopenia (soft, brittle bone) it is advised that you take Vitamin D 1000 IU daily as well as calcium 1200 mg daily. This will be provided on your prescriptions for your reference; however it is an over the counter medication and will not be distributed with your other medications at the pharmacy. The type is not a factor. You can purchase this at any pharmacy or grocery store.

It is advised to take Vitamin C, Vitamin D and Calcium up to but not limited to 50 days after your surgery. If you are taking a multivitamin please check the dosage on these specific vitamins if you are taking the recommended amount please up the dosage you are taking of the multivitamin.

DVT Prophylaxis (I.E Blood Thinners)

A deep vein thrombosis (DVT) occurs when a blood clot develops in the veins of the leg. Some DVT's cause no pain where as others can be painful. Below are some risk factors that increase the risk of blood clots.

Heart Disease	Immobilization	Previous DVT
Coagulopathy	Increased Age	Obesity
Tobacco Use	History of Cancer	Surgery
Injury	Trauma	Birth Control Pills/Patch

If you experience any symptoms below it is imperative that you contact your surgeon or immediately to the emergency department.

Swelling of the leg	Increased warmth of this leg	Pain or tenderness to the leg/calf
Fever	Redness or discoloration of leg	Shortness or breath

Most DVT's can be treated early if discolored so it is imperative not to delay diagnosed when a DVT is suspected. Confirmed diagnosis involves a noninvasive ultrasound study that is quick and painless. DVTs that are not diagnosed or treated can enlarge, potentially dislodge and travel to the lungs, a condition that is called a Pulmonary Embolism (PE).



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A Pulmonary Embolism (PE) is a blood clot or DVT that lodges in the arteries of the lungs. This is a life threatening condition and must be treated emergently. It shares similar risks factors as a DVT and the signs and symptoms consist of:

Shortness of Breath	Bloody Cough	Fever
Rapid Breathing	Chest Pain	

A PE can be treated when discovered; however it can cause death if not discovered or treated early. It is important to immediately contact your surgeon if you experience any of the signs and symptoms or go to the nearest emergency department.

It is imperative for you to take the blood thinner daily in order to prevent a blood clot in your leg. It should be taken with food and water in order to absorb efficiency. You will be taking the blood thinner medication until you start placing weight on the surgical foot/ankle.

The medication you will be prescribed by the end of the day, the day of pre op will be the following:

1. **Keflex (Cephalexin)** 500mg 3 times a day for 14 days. **(ANTIBIOTIC)**
2. **Colace** 100mg 2 times a day for 10 days. **(STOOL SOFTENER)**
3. **Promethazine (Phenergen)** 25mg 3 times a day AS NEEDED **(NAUSEA)**
4. **Cyclobenzaprine (Flexeril)** 10mg 3 times a day AS NEEDED **(MUSCLE RELAXER)**
5. **Aspirin** 325mg 2 times a day for 30 days **(BLOOD THINNER)**
6. **Percocet** 10/325mg take every 4-6 hours AS NEEDED **(PAIN)**

If you are allergic to PENICILLIN you will be prescribed *CLINDAMYCIN 300MG 3 times a day for 14 days.*

If you have a pain management contract you will not be given the pain medication.

All medication will be sent by the end of the day, the day of pre op. Please go ahead and get this filled, so there is time to do any authorization if there is one needed. If you have any questions or concerns please contact Dr. Downey's Nurse Hannah at 469-207-9683.



Call 9-1-1 if you think you are in need of emergency care such as:

- You pass out (lose consciousness)
- You have sudden chest pain and shortness of breath, or you cough up blood
- You have severe trouble breathing.

Call your surgeon now or seek immediate medical care if:

- You perceive ANYTHING with your surgical foot/ankle to be wrong/not right/different/ changed.
- You have persistent pain that does not get better after you take pain pills, after you have iced vigorously, or after you have elevated as directed above.
- You have a fever over 100.4 F
- You have fallen directly on your surgical foot/ankle.
- Persistent bright red blood has soaked through the bandage over your incision.
- You have signs of infection, such as increasing tenderness, red streaks, or pus from your incision or your foot feels hot to the touch.

If it requires **IMMEDIATE** attention it is recommended to go to the nearest Emergency Room.



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Please be mindful after hours, if **NOT** an emergency please leave a detailed message regarding your concerns/issues and your call will be return the following business. If the pager is called and it is **NOT** emergency your call will be returned the following business day.

Please keep in mind although Dr. Downey may not be available immediately he does check his messages throughout the day and will return your call as soon as possible if there is an **URGENT/EMERGENT** issue.

Please keep in mind Dr. Downey is in surgery Monday and Tuesday and in clinic Wednesday – Friday. Our office staff does check messages throughout the day and will return your call as soon as possible.

OFFICE CONTACTS:

Office Number: **972-438-4636**

Pager/ Answering Service for Dr. Downey (Emergencies ONLY): **682-337-1397**

FMLA/Disability/Other email request please send to:
downey@precisionorthosports.com

Troy Sams: Surgical Director for Dr. Downey: 972-567-4166

Hannah Ramos: Clinical Director for Dr. Downey: 469-207-9683

**Keralene Mims: Surgery Scheduling for Dr. Downey-
keralene.mims@precisionorthosports.com**

If it requires **IMMEDIATE** attention it is recommended to go to the nearest Emergency Room.