

PRE-SURGERY INSTRUCTIONS

A successful surgery requires a partnership between you and Dr. Adam Newman, MD.

The following instructions are essential to a safe experience and good outcome. Use this checklist as you approach your surgery date. If you are unable to comply with these instructions, you must notify our office as soon as possible. As a result, your surgery may have to be postponed or delayed, at the judgment of Dr. Adam Newman, MD. This is essential to your health and safety.

___ **Practice proper fitness:** Practicing good fitness habits is an important factor in your overall health and well being.

___ **Good Nutrition:** Eat well during the weeks prior to surgery. Crash dieting, over-eating or high alcohol intake can greatly affect your overall health and well-being. A healthy, balanced diet is essential

___ **Stop smoking:** Smoking can greatly impair you ability to heal. **You must be nicotine and smoke-free for at least 6 weeks prior to surgery. This includes nicotine patch or nicotine based products such as gum or vapor cigarettes. A nicotine test may be required prior to your procedure. Results from this test may take up to 2 weeks to obtain. If results show nicotine your scheduled procedure will have to be rescheduled. This is essential to your health and safety.**

___ **Lead a healthy lifestyle:** In the weeks prior to surgery maintain the best of health and hygiene. Make certain to address any illness immediately, and advise our office of any serious illness or change in your health.

___ **Prepare and plan:** Schedule any time off of work, and any support you will need at home in the days following surgery, including housework, childcare, shopping and driving. Make certain a responsible adult is enlisted and confirmed to drive you to and from surgery, and that one is confirmed available to stay with you around the clock for 24 hours, at least, following surgery.

___ **Pre-operative testing:** Make certain to schedule all of the pre-operative testing and medical clearance you have been given. Make certain all test results and medical clearance are faxed to Dr. Newman's office as required. If certain test or medical clearance is required and not received, surgery may be cancelled at **your cost**. Fax # 870-425-6402.

___ **STOP taking the following for one week prior to your surgery:** Taking any of the following can increase your risk of bleeding and other complications.

- Aspirin and medications containing aspirin
- Ibuprofen and anti-inflammatory agents
- Vitamin E
- Fish oil

___ **Vital information:** A pre-operative visit may be necessary to review your health, your goals, and any vital information including allergies, medications and health considerations.

DAY BEFORE SURGERY INSTRUCTIONS

___ **Shower as directed:** Use an antibacterial, fragrance free soap. We suggest Hibiclens which can be purchased over the counter at most drug stores.

___ **Nothing by mouth:** Anesthesia requires you to be NPO after midnight the night before your surgery. This means you cannot eat or drink anything after midnight. Anything more than a small sip of water needed for brushing teeth or swallowing medications may result in the need to cancel surgery. This includes candy, gum, mints and any beverage including water.

DAY OF SURGERY INSTRUCTIONS

__Shower as directed: Use an antibacterial, fragrance free soap. We suggest Hibiclens which can be purchased over the counter at most drug stores. Showering the night before and morning of your surgery greatly reduces the skins surface bacteria and helps prevent infection.

__Nothing by mouth: Do not eat or drink anything. Anything more than a small sip of water needed for brushing teeth or swallowing medications may result in the need to cancel surgery. This includes candy, gum, mints and any beverage including water.

__Dress appropriately: Do not wear cosmetics, jewelry of any kind, contact lenses, hair clips or body piercings **(If there is something you cannot remove, let the admitting nurse know right away.)**

__Wear comfortable, clean, loose-fitting clothing: Do not wear jeans or any tight-fitting bottom; rather have a pair of loose, drawstring sweatpants to wear home. You may wear a robe. Wear slip on, flat shoes with a slip proof sole; no heels. Wear clean cotton socks, as the operating room can feel cool. For your comfort, wear a zip or button front top. No turtlenecks.

I have read and understand all of the above instructions. I understand that following these instructions is solely my responsibility. I understand that it is also my responsibility to ask my doctor and his or her staff any questions I have related to these instructions or about my procedure, health and healing.

Patient Signature

Date

Printed Name of Patient

Signature of Practice Representative and Witness