

Pre-Operative Instructions

We understand that this is a stressful time and we first of all wanted to thank you for choosing **The Center for Gynecologic Oncology** for your surgical care. We have provided this informative letter to help you navigate your preoperative period by answering many common questions you may have. Please read the following preoperative information and contact us if you have any further questions after reviewing.

Patient Name: _____ **Surgery Date:** _____

Surgery Location:

<input type="checkbox"/> Memorial Hospital Miramar 1901 SW 172nd Ave. Miramar, FL 33029 (954) 538-5000	<input type="checkbox"/> Memorial Regional Hospital 3501 Johnson St. Hollywood, FL 33021 (954) 987-2000	<input type="checkbox"/> Memorial Hospital West 702 N. Flamingo Rd Pembroke Pines, FL 33028 (954) 436-5000
<input type="checkbox"/> Palmetto General Hospital 2001 W. 68th St. Hialeah, FL 33016 (305) 823-5000	<input type="checkbox"/> Plantation General Hospital 401 NW 42nd Ave. Plantation, FL 33317 (954) 587-5010	<input type="checkbox"/> Westside Regional Hospital 8201 W. Broward Blvd. Plantation, FL 33324 (954) 473-6600
<input type="checkbox"/> Surgicare of Miramar 14601 SW 29th St. Miramar, FL 33027 (954) 266-3801		

If you do not have a surgery date, one of our surgical coordinators will contact you within the next 24-48 hours. If you have not gotten a call after 48 hours, please call our office at: (954) 602-9723.

Our surgical coordinators will advise you of one or more items necessary before the surgery:

- ____ Medical Clearance (copy of medical clearance orders given to patient)
- ____ Labs to be done at the hospital (the hospital will contact you a few days prior to surgery)
- ____ Labs to be done at Quest Diagnostics or Labcorp. (Make an appointment and bring the order provided by our office)

You will receive **Pre-Operative** and **Post-Operative Instruction Packets**. These packets contain information regarding your medications, skin preparation, food preparation, billing information, pain management, activity restrictions, FMLA/disability forms, and other important information.

If you have any questions that are not answered in the packet or by your coordinator, please call us at (954) 602-9723 or email us at surgery@salomtangir.org.

Initials

Phone: 954-602-9723



Fax: 954-602-9724



surgery@salomtangir.org

Instructions For Surgery

Scheduled Surgery Time:

The hospital will contact you with your **scheduled surgery time** and the **scheduled arrival time** in the afternoon prior to the surgery day. Please adhere to your scheduled arrival time to avoid any cancellations. If you do not receive a call from the hospital by the afternoon before the day of surgery, please contact us by phone: 954-602-9723 or email: surgery@salomtangir.org

Preoperative Labs and Medical Clearance:

- Please ensure all lab results and medical clearance notes are faxed to the office minimum **1 week prior** to your scheduled surgery. **Fax: (954) 602-9724**

Preoperative Bathing Instruction for abdominal surgery:

The night prior to your surgery, shower and wash the body with **Hibiclenz** (can be purchased at your local pharmacy over the counter). Repeat a shower with **Hibiclenz** the morning of surgery:

- Soak a washcloth in **Hibiclenz** and wash your body from the neck down paying close attention to the abdomen, belly button, and external genitalia
- Do not use **Hibiclenz** on the head, face or internal genitalia
- Rinse thoroughly
- Do not shave the abdomen or genitalia prior to surgery as this can increase the risk of infection
- Following the shower, do not use deodorants or powders

Preoperative Eating Instructions:

- You may eat solid food up until midnight the day before surgery (except in special circumstances. You would be informed ahead of time.)
- To help your recovery you should stay hydrated prior to surgery by drinking the following:
 - 16 oz of Gatorade (**NOT BLUE, RED, or PURPLE**) the night before surgery
 - Drink a final 16 oz of Gatorade (**NOT BLUE, RED, or PURPLE**) 3 hours before the scheduled time of your surgery

Instructions Regarding Medications: (If your medications are not on this list, or you have further questions, please contact your primary care physician for further instructions)

- Herbal supplements or multivitamins
 - Discontinue 7 days prior to surgery
 - Restart as per primary care physician recommendations
- Beta blockers (i.e., propranolol, atenolol, or metoprolol)
 - continue taking as prescribed including the day of surgery
- Calcium channel blockers (i.e. amlodipine)
 - continue taking as prescribed including the day of surgery

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- ACE/ARB inhibitor (i.e., lisinopril or losartan)
 - do not take the morning of surgery
 - restart medication the day after surgery
- Diuretic medication (i.e., hydrochlorothiazide or furosemide)
 - Do not take the morning of surgery
 - Restart medication the day after surgery
- Antiplatelet medication (i.e., Aspirin and clopidogrel/Plavix)
 - Discontinue 7 days prior to surgery
 - Restart medication the day after surgery
- Warfarin
 - Discontinue 7 days prior to surgery
 - Restart the day after surgery
- Anticoagulant medication (i.e., dabigatran, rivaroxaban, apixaban)
 - Discontinue 3 days prior to surgery
 - Restart medication the day after surgery
- Thyroid medication (i.e., levothyroxine)
 - Do not take the morning of surgery
 - Restart medication the day after surgery
- Inhaled pulmonary medications (i.e., albuterol, ipratropium)
 - Continue taking as prescribed including the day of surgery
- Oral diabetic medication (i.e., glipizide, metformin)
 - Do not take the morning of surgery
 - Restart medication the day after surgery
- Statins (i.e., atorvastatin)
 - Do not take the morning of surgery
 - Restart medication the day after surgery

Billing, insurance, copayment, and deductibles:

- All copayments, deductibles, and/or coinsurance related to surgeons fees must be paid prior to surgery at the contracted rate of your insurance company.
- The surgical team consists of other staff and providers i.e., hospital staff, anesthesiology and pathology. Payment for these services are separate from our office. They will be collected at the hospital and/or you will be billed.
- For any questions involving our primary surgeon fees, you may contact us at **(954) 602-9723** or surgery@salomtangir.org
- For any questions involving hospital fees, or other provider fees, please contact them directly.

Initials

FMLA or Disability Forms

- Please fax or email any FMLA or Disability forms to fax: **(954) 602-9724** or email: surgery@salomtangir.org
- There is a \$25 fee to complete all FMLA or Disability forms
- Please allow 7-10 days for completion of forms

Patient Signature

Date

Witness

Date