

**University Place
Orthopaedics**

Dr. Andrew Feldman

95 University Place, 8th Floor / New York, NY 10003
212-604-1340 Fax# 212-604-1338

PRE-OP INSTRUCTIONS

Book surgery with Carmen Carmona 212-604-1345 or Melissa Paredes at 212-604-1340.

Health Survey must be completed. Pre-Surgical Testing / Medical Clearance is required. Please have your Medical Doctor fill out form or schedule pre-testing appointment at the hospital.

Hospital: NYU Langone Orthopedic Hospital (Wed) NYU Langone Medical Center (Fri)
301 East 17th Street (2nd Avenue) 339 East 38th Street (1st Avenue)
Level C1 Room #135 212-263-1515
212-598-6343

Surgery Date: _____ PreTesting: _____ at
NYU Langone Orthopedic Hospital 303 Second Ave, 1st Fl, Rm# 16 (17 & 18 Street) (212)598-6176

Time of surgery :

NYU Langone Orthopedic Hospital formerly Hospital for Joint Diseases 212-598-6343 the nurse will call you the day before between 5pm and 7pm with time of surgery. The nurse will be at this desk @ 5:30 (212)598-6345.

NYU Langone Medical Center 212-263-1515 call the day before surgery between 1pm and 4pm for the time.

*** PLEASE DO NOT EAT OR DRINK ANYTHING AFTER 12:00 MIDNIGHT THE NIGHT BEFORE YOUR SURGERY; NOT EVEN WATER. ****

*** DO NOT DRINK OR EAT ANYTHING IN THE MORNING **NO GUM, MINTS OR ICE*****

*** THE HOSPITAL REQUIRES YOU TO HAVE AN ESCORT TO TAKE YOU HOME AFTER SURGERY. (Your escort does not have to be there waiting for you, they can come after the procedure to escort you from the hospital – Just inform the Nurse in the Recovery Room and she will call your escort when you are ready).**

*** All medications containing ASPIRIN must be stopped at least 5 days prior to surgery. If you are taking any blood thinners i.e.: Coumadin, Warfarin, Plavix or Baby Aspirin Please Contact your Medical Doctor prior to discontinuing medications.**

All Anti-inflammatory meds contain ASPIRIN i.e. Voltaren, Motrin, Advil, Aleve, Naproxen, Naprosyn, Celebrex MUST BE STOPPED.

*** STOP taking Herbal Supplements, Fish oil, Vitamin E, St. John's Wort & Ginko Biloba a week before surgery.**

*** PLEASE INFORM OFFICE AND DOCTOR IF YOU ARE ALLERGIC TO ANY MEDICATIONS, LATEX OR FOODS ***

CALL Anesthesia : Please contact 877-675-5174 to verify that they participate with your insurance plan.

Finance Dept: HJD 212-598-2734 or NYU 646-381-9425 if any insurance questions.

Patients are required to pay insurance deductibles and co-payment amounts in advance of their surgical procedure.

Cold Therapy Unit (ice machine) this unit decreases swelling and pain. Recommended by Dr. Feldman. Please contact Moe at 212-604-1340 or 718-710-0423 to rent or purchase unit Monday thru Thursday 9:00 to 4:30pm and Friday 9:00 to 2:30pm (NOT between 1-2pm break time) at Dr. Feldman's office on 95 University Place 8th Floor. ** Bring the Sleeve for ice machine to the hospital **

Please make sure you bring your cane or crutches for the procedure, if it is required or you can purchase them at the hospital \$25 cane and \$50 crutches.
Slings will be supplied at the hospital.

Disability Forms : Due to high volume of surgery we ask that all disability forms be submitted as early as possible so that we may return them to you in a timely manner. These forms take time to complete; we need at least one weeks notice. There is a \$10 fee for completion of forms.

Traveling by plane is not advised by Dr. Feldman due to risk of Deep Vein Thrombosis (Blood Clots) if you have lower extremity surgery.

CHECKLIST:

___ Is Medical Clearance Form completed and returned to Dr. Feldman's office.

___ Did your Medical Doctor advise you to STOP taking Aspirin and Blood Thinning Medications.

BRING WITH YOU TO THE HOSPITAL THE DAY OF SURGERY:

___ BRING your Insurance Card and Identification Card.

___ BRING Cane or Crutches or ordered Sling. Basic Sling at hospital.

___ BRING Ice Machine Sleeve. (Leave Cooling Machine at home)

___ BRING MRI and/or XRAYs.(If Dr. Feldman request them)

___ BRING Medications and/or Insulin.