



PATIENT NAME Holly

SURGEON: **DR. BENGARD**

FACILITY: **ORTHOPEDIC OUTPATIENT CENTER 577 AIRPORT RD MEDFORD**

SURGERY DATE 10/17/2024

**** PLEASE NOTE THAT THE ORTHOPEDIC OUTPATIENT CENTER WILL CALL THE DAY BEFORE TO ADVISE YOU ON YOUR SURGERY TIME****

PRE-OP IN PROVIDERS OFFICE ON _____ AT _____

POST-OP APPOINTMENT IN PROVIDERS OFFICE ON 10/29 AT 11:30am

Please stop taking your Blood Thinner Medication X Days before surgery

Please bring a current medication list with you.

IMPORTANT

- **DO NOT EXPECT A 2ND CALL IF YOU ARE NOT ABLE TO ANSWER THE INITIAL PREOP CALL. IF THIS OCCURS, YOU WILL NEED TO CALL THE FACILITY BACK IN ORDER TO GET YOUR INSTRUCTIONS.**

- If your insurance changes in any way before the surgery date, you must notify us immediately or your service may not be covered. You are ultimately responsible for all expenses related to your medical care
- You received folder at your pre-op visit that contains both pre- and post-op instructions. Please read through them carefully.

Please call Dr. Bengard's Medical Assistant at (541)-608-2581 if you have any additional questions or talk with Dr. Bengard or Mr. Holte on the day of surgery



Orthopedic Outpatient Center

577 Airport Rd | Medford, OR 97504

541-608-2460 | Fax 541-627-7006

Welcome, and thank you for choosing Orthopedic Outpatient Center. Please read this entire packet. It contains important information relevant to your care.

The following physicians have a financial interest in Orthopedic Outpatient Center:

Heidi Bloom, MD, Adam Cabalo MD, Todd Clevenger MD, Daniel Cowley, DO, Patrick Denard MD, Jayme Hiratzka, MD, James Ho MD PhD, Andy Kranenburg MD, Matthew Nugent, MD, Cameron Phillips MD, Paul Sternenberg, MD, Robert Bents, MD

Patient Rights & Responsibilities:

Patient Rights:

1. The right to exercise these rights without regard to age, sex, economic status, educational background, race, color, religion, ancestry, national origin, sexual orientation, marital status, or the source of payment for care.
2. The right to receive information in a manner he/she understands.
3. The right to considerate, respectful care.
4. The right to know the name of the personnel who provide healthcare services to the patient.
5. The right to be well-informed about any exam performed.
6. The right to accept or refuse care, treatment, and services.
7. The right to confidentiality and privacy.
8. The right to be free of neglect, exploitation and verbal, mental, physical, and sexual abuse.
9. The right to examine and receive an explanation of the patient's bill regardless of source of payment.
10. The right to receive information on sources of help regarding Advanced Directives - Patients will be referred to their healthcare professional.
11. The right to file a grievance or complaint with The Joint Commission, Oregon Health Authority, Oregon Medical Board, any governmental agency and/or any organization that awards accreditation or licensing to Orthopedic Outpatient Center.
12. The right to access, request amendment to and obtain information on disclosures of health information in accordance with law and regulation.
13. The right to expect that Orthopedic Outpatient Center will provide service to the best of its ability.
14. The right to pain management - Patients will be referred to their healthcare provider for pain management needs.

Patient Responsibilities:

1. The patient is responsible for providing information that is relevant to the exam, including present complaints, hospitalizations, past illnesses, medications, and other matters related to the patient's health that would pertain to the exam ordered.
2. The patient needs to be considerate of other patients and personnel.
3. The patient needs to be respectful of the property of other persons and the facility.
4. The patient and his/her family are responsible to comply with policies and procedures designed to protect the health and safety of others.
5. The patient is responsible for asking questions if instructions or requests are unclear.
6. The patient is responsible for following instructions to complete the exam.
7. The patient is responsible to inform Orthopedic Outpatient Center if his/her safety or dignity has been compromised during their stay.
8. The patient needs to advise his/her doctor or healthcare professional of any dissatisfaction the patient may have with his/her care or services.
9. The patient is responsible for meeting financial obligations as agreed to pay for treatment.

Office of the Medicare Beneficiary Ombudsman:

The role of the Medicare Beneficiary Ombudsman is to ensure that as a Medicare beneficiary, you receive the information and help you need to understand your Medicare rights and protections. Their website is:

<http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html>

To report a general complaint with the ASC:

Please contact Tammy Spohn, CEO or Pamela Shipley the Civil Rights Coordinator at 541-608-2460

To report a complaint with the state:

Oregon Department of Human Services
Oregon Healthcare Regulation and
Quality Improvement
800 NE Oregon St., Suite 305
Portland, OR 97232
971-673-0540
www.healthoregon.org/hcrqi

State of Oregon, CMS Regional Office
DHHS/CMS/DMSO, Mail Stop RX-48
2201 6th Avenue
Seattle, WA 98121
206-615-2710

To file a complaint with Joint Commission:

Call, submit online, or mail.

1) 630-792-5800

2) <https://www.jointcommission.org/resources/patient-safety-topics/report-a-patient-safety-concern-or-complaint/>

3) Office of Quality and Patient Safety

The Joint Commission

One Renaissance Boulevard

Oakbrook Terrace, Illinois 60181

Advance Directive Policy Notification:

An Advance Directive is a legal document that is prepared in advance of when it is needed that defines critical healthcare decisions about a person's health care and indicates the type of medical treatment the person wishes to receive or not receive in the event that he or she is unable to do so.

Orthopedic Outpatient Center will always honor the intent of the Advance Directive to the extent permitted by law, and subject to the surgery center's limitations on the basis of conscience. The surgery center performs elective procedures that generally enhance or improve the patient's quality of life, therefore: in the event of a medical emergency, it is the policy of the surgery center to always attempt to resuscitate a patient and transfer that patient to a hospital. If you disagree with this policy, please speak with your physician prior to your procedure. If you have an Advance Directive, please bring it with you on the day of your procedure. If you don't have one and would like information, go to www.oregon.gov/dcbd/shiba/docs/advance_directive_form, or you may obtain a form at the surgery center.

Billing Information:

INSURANCE CLAIMS

As a courtesy to our patients, Orthopedic Outpatient Center will bill your insurance for direct payment from your carrier when you provide us with the correct billing information. Ultimately the patient is responsible for charges incurred on the date of service.

PRIOR AUTHORIZATION AND PRE-CERTIFICATION

If your medical insurance plan requires you to have a prior authorization or pre-certification on file for a procedure, this should be obtained before your scheduled appointment.

ESTIMATE OF CHARGES AND PAYMENT ARRANGEMENTS

We require a deposit on the date of service. The deposit amount is based on the estimated charges and/or information given to us by the physician's office and your insurance company. If you do not have insurance, or choose not to use your benefits, we require payment 100% of the estimated charges on the day of the procedure unless specified otherwise in writing. All payment arrangements must be made with a patient liaison prior to the date of service.

PAYMENTS

We accept cash, personal check, Visa, Mastercard, Discover, American Express and Care Credit.

General Instructions:

PATIENT PORTAL

The Surgery Center will ask your health history questions and give you instructions about your upcoming surgery in a link that will come to your text and email. You can access the portal through either means.

CHANGES TO THE SCHEDULE

Surgery schedules change, please expect that changes to your arrival time may occur up to 24 hours prior to your arrival. You will be notified of any time changes.

MEDICATIONS

The only medication that we recommend taking at least 2 hours before surgery with a sip of water are Beta Blockers, examples of Beta Blockers are Metoprolol, Propranolol, Atenolol, Carvedilol, and Labetolol.

Do not take medications called ACE inhibitors for 24 hours prior to surgery, the most common ACE inhibitor is Lisinopril (Zestril), others are Benazepril (Lotensin), Captopril (Capoten), Enalapril (Vasotec). Do not take any other medications, vitamins or supplements the morning of surgery unless instructed by your surgeon.

FOOD AND DRINKS – LOCAL ONLY – NO General Anesthesia

You may have fluids and a light, low fat meal prior to having the numbing medication injected into your surgical site. For your safety you cannot have anything to eat or drink prior to surgery *if you are getting sedation or general anesthesia*.



Your quality of care is important to us. To assist you with your needs, please use the following office telephone directory numbers.

Our office number is: (541) 779-6250 or Toll Free 1-800-866-9887

Other Office telephone numbers available to you:

- Dr. Bengard's MA 541-608-2581
- Medication request/refill 541-608-2480
(48 hour notice please, no refills are given on the weekends)
- Disability and other forms 541-608-2508
- Medical Records 541-608-2515
- Surgery Coordinator 541-608-2526

***For any Urgent medical needs please call the main line and ask to be transferred to Triage**



F.A.Q'S

Is it normal to have bruising?

Bruising is normal after any type of surgical procedure. Some may bruise more than others. Bruising is caused due to leakage of blood from ruptured capillaries (tiny blood vessels) under the skin.

I am experiencing sharp shooting pain, is this normal?

This is normal; it is caused by nerves waking up after the trauma of surgery.

My dressing feels tight or loose, can I adjust it?

You are welcome to reinforce your post-op dressing if needed. If dressing comes off completely or gets wet ok to remove and re-apply new clean dressing. If you have a hard splint that gets wet please contact the office to make an appointment for dressing change.

Is swelling normal, and what can I do to reduce it?

Swelling is normal after any type of surgery. It is very important that you elevate your extremity 6 inches above your heart, open and close your fingers (all the way up and all the way down) to reduce swelling. A bandage that is too tight may also contribute to swelling; you should loosen your dressing if it feels too tight. You may also take ibuprofen as directed to help reduce swelling.



Pain Medication Warnings

Your Doctor may prescribe you Narcotic (Opioid) pain medication after a fracture or surgery. Here are some common risk factors associated with narcotic medication, as well as our office policy on refills.

USAGE

1. **DO NOT EXCEED DOSAGE INSTRUCTIONS.** If your pain is not being managed effectively, please call our office at 541-779-6250 to speak to a Medical Assistant. Call 911 if you take too much medicine.
2. **DO NOT** give your medication to others or take medication that was not prescribed for you.
3. If you have leftover pain medication from your prescription and are no longer using it, you should dispose of the remaining pills.

RISKS

1. Medication can cause **Nausea, Constipation, and Vomiting**. This can be reduced by following our nausea and constipation suggestions.
2. Narcotics (Opioids) impair mental and physical abilities, delay response time and decrease coordination. You may also experience drowsiness, dizziness and/or depression. For these reasons, operating machinery, working on high surfaces, or driving while on this medication is potentially hazardous. **DO NOT DRIVE WHILE TAKING NARCOTIC MEDICATIONS.**
3. Narcotics cause sedation, which may worsen if combined with other medications, such as sleeping medications or benzodiazepines (e.g. Xanax, Ativan, and Valium).
4. **DO NOT DRINK ALCOHOL** while taking narcotics.
5. Overdose can cause reduced breathing leading to death. Take medications as prescribed by your Doctor and never drink alcohol while taking narcotic medication. This risk is increased for patients with sleep apnea. Call 911 if you have shortness of breath.
6. Allergic reaction may occur including hives, rashes or shortness of breath. If you notice any of these symptoms please seek medical attention right away.
7. Some medications contain Tylenol (Acetaminophen). Any excessive use of these over-the-counter medications may result in damage to your liver. **DO NOT TAKE MORE THAN 3000mg OF TYLENOL IN A 24 HOUR PERIOD.**



OFFICE POLICY ON MEDICATION REFILLS

1. Per Oregon Medical Board and Medicare guidelines, initial prescriptions for any narcotics will only be written for a maximum duration of 7 days. You must inform us of any other physicians prescribing similar or same medications to avoid overdosing and to ensure your safety. Failure to do so may result in discontinuation of further prescription refills and possible discharge from this practice.
2. **Refills need to be addressed prior to 3pm on Fridays.** No refills will be given after hours, on holidays, or on the weekends. Please plan accordingly.
3. You will need to contact your provider **24-48 hours** prior to needing a refill to allow for processing time. Call the prescription refill line at 541-608-2480 and leave a voicemail message with your name, date of birth, what medication you need, what pharmacy you use, and your phone number. **Please note that some prescriptions require to be written therefore you will have to come to the office to pick them up in person, you or the person picking up the prescription will be asked for photo I.D.**
4. We do not replace lost or stolen medications. It is your responsibility to keep your medications in a safe and secure location. Store away from children.



Post-Operative Nausea and Constipation Care:

If you are experiencing **nausea or vomiting** we recommend the following:

1. Start by drinking small amounts of clear, cool liquids like water, Jell-O, soup broth, Gatorade, ginger ale, or popsicles. Then progress to eating, small meals of bland foods such as those in the B.R.A.T diet – bananas, rice, applesauce and toast. You may also try saltine crackers. Avoid spicy or greasy foods.
2. Do not drink large amounts of fluid while eating. Also, rest before and after meals but do not lie down for 2 hours after eating.
3. We advise eating small snacks with your medication, which may help avoid an upset stomach.
4. **If nausea and/or vomiting persist please call our office at 541-779-6250.**

Constipation is the inability to have a bowel movement in several days (more than three) and/or inability to have a bowel movement without straining. This is a common side effect of opioid (narcotic) pain medication. You can minimize constipation by increasing your fluid and fiber intake with bran, green leafy vegetables or over-the-counter fiber supplements. To minimize constipation, we recommend the following:

1. Take Colace or Sennakot- Over-the-counter stool softeners (2 tablets, twice daily).
2. If you do not experience relief after 24 hours add Milk of Magnesium (30ml, twice daily) or Miralax (1 capful, twice daily)
3. If you have no bowel movement after 3 days, you may take an over-the-counter Dulcolax Suppository rectally as directed and/or an over-the-counter Fleets enema as directed.

If you have no bowel movement after four hours, call your Primary Care Provider for further treatment. After you have a bowel movement you may continue to take stool softener as directed. If you get diarrhea, stop taking medication until normal soft stool returns.



PLEASE NOTE THAT
CLEANING WITH HIBICLENS
IS MANDATORY NO MATTER
WHAT PROCEDURE YOU ARE
HAVING.

**Proper Protection Starts At Home
Hibiclens Skin Cleansing to Prevent Infection**

Washing with Hibiclens cleanser prior to any surgery with a skin incision helps reduce skin contamination and the spread of germs by decreasing the bacterial count on skin. Showing with Hibiclens the night before surgery; and again the morning of surgery aids in reduction of germs on our skin and prevention of surgical wound contamination.

Note: Hibiclens can be purchased at pharmacies and retailers such as Fred Meyer, Walgreens, Rite Aid or Walmart. Please purchase 3-7 days prior to surgery.

Carefully read the instructions below and check off each item:

To prevent infection, it is very important that you do not shave around the surgery site for seven (7) days before your surgery.

___ The night before surgery, remove all make-up and all jewelry prior to showering, leave jewelry off until after your surgery

___ Fingernails and Toenails should be clean, short and natural without artificial nail surfaces in you are having hand, wrist or foot surgery.

___ Wash your hair with regular shampoo, then rinse your hair and body thoroughly to remove any shampoo residue before using Hibiclens.

___ Wash your face and body with regular soap then thoroughly rinse your entire body with running water before using Hibiclens.

___ Take a Hibiclens shower **twice**, once before bedtime and again in the morning before surgery.

- For each shower use a few capfuls of Hibiclens from the bottle (or contents of one packet) to wash your entire body from your neck, down to your toes including all skin folds.
- If possible have someone wash your back and hard to reach areas. Do not get Hibiclens in your eyes, ears, or genital area, if you do, rinse immediately.
- Finish your shower by rinsing with running water. Do not use soap or other products on your skin after using Hibiclens.

___ Use a **clean towel** to dry off after each shower; dress in clean clothes or pajamas.

___ Do not apply lotion, powder, deodorant, perfume, or aftershave after bathing.

___ On the night before your surgery, be sure to sleep on clean sheets.

___ Do not allow pets on your bed before surgery and until your incision is completely healed.



Important recommendations for patients taking GLP-1 agonists for Diabetes or weight loss prior to elective surgery:

GLP-agonistslist
Generic Dulaglutide Exenatideextended release/exenatide Insulindegludecandliraglutide (combo product) InsulinglarginelandLixisenatide (combo product) Liraglutide Lixisenatide Semaglutide Tirzepatide Jardiance
Brand® Trulicity Bydureon,BydureonBCise,ByettaXultophy Victoza, Saxenda Adlyxin Ozempic,Rybelsus,Wegovy,Mounjaro



Day or week prior to the procedure:

- Hold GLP-1 and SGLT2 (Jardiance) agonists 3 days prior to procedure/surgery for patients who take the medication daily. For urgent cases, notify anesthesiologist.
- Hold GLP-1 agonists a week prior to the procedure/surgery for patients who take the medication weekly.
- Consider consulting with an endocrinologist for guidance in patients who are taking GLP-1 agonists for diabetes management to help control their condition and prevent hyperglycemia (high blood sugar).