



Central Park Medical Office Building  
900 W. 38<sup>th</sup> Street • Suite 300  
Austin, TX 78705  
(tel) 512-450-1300  
(fax) 512-450-1339  
[www.AustinSportsMed.com](http://www.AustinSportsMed.com)

Dear Patient,

Together we have decided that surgical intervention is the best course of treatment for your problem. We understand that the surgical process is an interruption in your life, but we are here to make it as smooth as possible. There are a few things that we need your help with. Please read this packet thoroughly and keep it in a safe place to reference often. Please follow the steps outlined in this packet carefully. If you have any questions or concerns, CALL US!

The name of the procedure you will have done is:

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Your procedure will be performed at the following location:

Central Park Surgery Center • 900 W. 38th Street, Suite 200 • 512-323-2061

Other:

## You **MUST** Pre-Register for your Surgery Online!

1. Please go to the website [www.OneMedicalPassport.com](http://www.OneMedicalPassport.com)
2. Register to CREATE an account (user name/password)
3. Select TEXAS for the state
4. Choose CENTRAL PARK SURGERY CENTER (Austin) as the location
5. Once completed, hit FINISH and there is no need to print
6. Scroll down for pre-operative instructions

\*\*If you have any questions, feel free to call or email the Pre-Op testing Nurse – Nancy A. Scoggins RN BSN  
512-439-5771 – [Nancy.Scoggins@hcahealthcare.com](mailto:Nancy.Scoggins@hcahealthcare.com)  
Other Questions: Ask the Medical Assistant

# Before Your Surgery

#1

• Do **NOT** eat or drink anything 12 hours prior to your surgery. You may brush your teeth but do not swallow the water. Do **NOT** chew gum.

#2

• Do **NOT** drink any alcoholic beverages 24 hours prior to surgery.

#3

• Do **NOT** take any medications unless otherwise instructed by your physician. Bring any prescribed daily medications with you to surgery.

#4

• Do **NOT** wear fingernail polish or eye makeup and remove all hair ornaments.

#5

• Do **NOT** wear glasses or contacts into surgery. Bring a case to put them in.

#6

• You **CANNOT** wear dentures or removable bridgework into surgery. A denture container will be provided for you.

#7

• Wear loose fitting, comfortable clothing for easy redress after surgery.

#8

• Discontinue all anti-inflammatory medications **3-10 days** prior to surgery. This includes Advil, Aleve, ibuprofen, and aspirin. Get specific instructions from your MD.

#9

• Prescriptions will be given for pain and inflammation. Please notify the pre-op nurse if you are allergic to any medications.

#10

• If you have been given crutches for your procedure, bring them with you to and leave them in the vehicle that you will be riding home in.

#11

• If you have been given a PolarCare Unit, please bring it into the facility where you will be having surgery.

#12

• **VERY IMPORTANT** - If you develop any illness prior to your surgery such as fever, cough, cold symptoms, or any indication of infection, please notify your doctor for further instructions.

# After Your Surgery



Please refer to your Post-Operative Handout for specific instructions from your physician.



## Helpful Numbers

We are here if you need us!

Emergency	Call 911
After Hours	Call our main number 512-450-1300 and page the Doctor on call.
Central Park Surgery Center	512-323-2061
Dr. _____ Assistant	512-450-1300 x _____
Urgent post-operative care	512-450-1300 x 302 (M-F from 8am-5pm)
Medical Equipment Issues	512-450-1300 x 113
Austin Anesthesia Group (AAG)	512-343-2292

# Polar Care Instructions

You may have been provided with a cold therapy (Polar Care) unit to assist with controlling pain and swelling postoperatively. This unit consists of a pad, pump, cooler, and plug. The cooler holds ice and water that is circulated by the pump through the pad.

You must have a layer of material (gauze, washcloth, or cotton padding) between your skin and the pad to prevent a freeze burn.

#1

•Fill the cooler with ice and add water to the top of the ice. Place the pump in the ice water, making sure the pump is completely covered with water. Place the cooler at or below the height of the pad, but no more than 2 feet below. Check ice water every 2-4 hours.

#2

•Connect the pump to the pad by pushing the couplings together firmly until you hear a click.

#3

•To start the pump, plug the transformer into a 110 VAC, 60 Hz wall outlet. Insert the molded plug into the polar pump controller.

#4

•Set the control knob on the PolarCare to midrange if applicable.

#5

•**Replace ice and water before ice has melted completely.**

#6

•To stop the pump, remove the plug at the pump controller or the transformer from the wall. Stop pumping before disconnecting the pad.

#7

•Use the unit continuously for the first 48-72 hours after surgery. Then use it for 20 minutes, 4-5 times per day until you return for your follow up appointment.

## Polar Care Troubleshooting Guide

- Moisture on the lines, controller, and pad are normal and are caused by the moisture in the air collecting on a cold surface.
- The height of the cooler affects the pressure in the pad. It is essential to keep the height of the cooler at or below the pad height, but no more than 2 feet below.
- It is normal for a small amount of water to be present when disconnecting the pad from the pump.
- Be sure there are no folds or kinks in the pad when applied. Pad kinking is the most common reason for improper performance.

*Before returning the pump to the office at your first postop visit, please drain and dry it with a soft cloth. You may dispose of the pad after use. If you experienced any problems with the unit, please inform the office staff.*

# Continuous Passive Motion (CPM) Instructions

You may have been provided with a CPM machine to help assist in flexion and extension of your knee postoperatively.

*YOU SHOULD START USING THE CPM MACHINE AS INSTRUCTED BY YOUR DOCTOR*

#1

•The machine has adjustable knobs on each side so you can set the machine to your leg length. Place your foot in the foot pad and use the Velcro straps to secure it in place. Do not let your foot roll out as this will prevent the knee from reaching full extension.

#2

•Adjust the knobs on the sides of the foot plate so your foot is resting at a comfortable angle.

#3

•Adjust all other knobs to move the machine to fit your leg length. The end of the machine should rest slightly against your buttocks.

#4

•Plug the transformer into a wall outlet and turn the machine on. The switch is located at the end of the machine.

#6

•The brace should remain on your leg at all times and should be worn even when using the CPM machine. However, the brace can be in a locked or unlocked position. To lock and unlock the brace, press the buttons on both sides of the brace, above the hinges.

#7

•When using the CPM, the brace should be unlocked so your knee will bend.

#8

•When NOT using the CPM, the brace should be locked with your leg in a straight position - unless otherwise instructed.

#9

•The machine comes with a controller to adjust the degrees of flexion and extension. The machine will be preset to your appropriate degree of flexion and extension as desired by your physician.

#10

•**Everyday increase flexion by 5 to 10° or   . You only need to go to 90° of flexion or   .** The key to the CPM is the motion, not the degrees.

#11

•You should use the machine            **hours/day for            weeks.** You may sleep in the machine if it is comfortable for you. If you continue to wake up during the night, turn the machine off and use during the day.

#12

•You will use the CPM machine for a total of 3 weeks, or            and it should be returned at your 2<sup>nd</sup> post op visit, which is also at 3 weeks.

## CPM Troubleshooting Guide

- If you have bleeding through the dressing after 48 hours postoperative, stop the machine for 24 hours to allow the active bleeding to stop.
- If at any time during non-office hours your machine stops functioning correctly, you must wait until the office opens to contact us for machine support.

# Compression Stocking Instructions

You may have been provided with compression stocking. These are special support stockings for your legs designed to help improve circulation and prevent blood clots after surgery. We will apply one sock to your non-operative leg before surgery, and this should be worn for 2-3 days after surgery, taking it off to sleep. You will be given another stocking to be applied to your operative leg after the first dressing change postoperatively.

#1

- Reach into the stocking, pulling the stocking over your arm and wrist until your hand reaches the foot of the sock. You should be able to see the knuckles of your fingers through the small hole in the foot of the sock.

#2

- Fold the long part of the stocking down over your hand until the stocking is only covering your wrist and hand.

#3

- Remove your hand from inside the stocking, leaving it folded.

#4

- Insert your foot into the stocking. Make sure that the small hole in the foot of the sock is on the top of the foot.

#5

- Grasp the end of the stocking and pull the long part up over your leg. Check to make sure that the stocking is not twisted on your leg.

## Tips and Warnings

- Do NOT sleep overnight with the stocking on unless instructed to do so by your physician. Remove before bed and re-apply before you get out of bed in the morning.
- Ensure the stocking is smooth, without folds or overlaps.
- Sprinkling a tiny bit of baby powder into the stocking will help it slide on more easily. Do not put lotion on before applying stocking.
- Do not use an ace bandage over or under the stocking.
- If you have increased swelling in your foot/ankle with the stocking on, remove the sock and notify your physician.
- Hand wash the stocking and allow to air dry.

# Constipation in Surgical Patients

There are many reasons why a surgical patient may have constipation

- Some medications and certain antiemetics can cause constipation. Constipation from narcotic pain relievers occurs in most patients, and should be prevented in advance.
- Reduced activity and poor eating habits can cause constipation. Reduced intake of fluids and high fiber foods, along with general weakness and fatigue, decrease the body's ability to keep regular bowel movements.

Common symptoms of constipation

- No regular bowel movements for three or more days.
- Small or hard stool.
- Stomach ache or cramps, bloated stomach, feeling of fullness or discomfort.
- Passing excess gas or belching.
- Nausea or vomiting.

What you should do if you notice any of these symptoms

- Increase consumption of fluids and fiber rich foods.
- Try taking a stool softener or stimulant laxative like Senokot or Colace.
- Call our office if you have not had a bowel movement in three or more days, if you have blood in your stool, or abdominal cramps/pain for two or more days.

Thank you for allowing us to participate in your care.



A U S T I N  
S P O R T S  
M E D I C I N E

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