



Cardiovascular Surgery OF SOUTHERN NEVADA

Pre-op Instructions

Our surgery scheduler will contact you within one week of leaving our office. Your availability for surgery will be determined during that phone call. Our scheduler will then call the hospital and schedule surgery. After surgery is scheduled our scheduler will obtain insurance authorization for the procedure. Our scheduler will contact you with the following information:

- *Hospital*
- *Date and time of surgery*
- *Date and time of pre-op at the hospital*

You may require pre-operative clearance from other physicians before we can proceed with scheduling and surgery. If this is the case, we would need to obtain written clearance from the treating physician. We will work with your physicians to get written clearance.

What to do before surgery . . .

- *Showers the morning of surgery with antibacterial soap and water.*
- *The day of surgery do not use mouthwash, throat lozenges, ice chips, water, chewing gum, or chewing tobacco. Also do not smoke the day of surgery.*
- *You will be required to pre-register (pre-op) two days prior to surgery and we will notify you of the date and time. This will include but not be limited to lab work, radiology testing, etc. You will need to bring a picture ID, insurance information, and a list of your current medications with you to the pre-op appointment. You do **NOT** need to fast for pre-op.*
- *Do **NOT** eat or drink after midnight the night before your surgery.*
- *You may **ONLY** take blood pressure and heart medications the morning of surgery with a few sips of water. Our office will instruct you about your other medications when we call with your pre-op instructions three to four days before surgery.*
- *Please arrive for your surgery at the time instructed. Be sure to provide us with a telephone number that you can be reached at before you go to the hospital in case there are any last minute scheduling changes. If you are staying at a hotel, please provide the hotel phone number and your cell phone number as well.*
- *You **MUST** bring your films/CD with you **ON** the day of surgery.*

Special considerations:

*You **MUST** discontinue blood thinners prior to your surgery and we will inform you of what date to take your last dose depending on which medication you are taking. In addition you may need to stop other medications that affect your surgery. Our office will inform you about your medications when we call with pre-op instructions.*

Other instructions: _____

Please note: *Family members may stay with you prior to your surgery in the holding area. There is a waiting area for them while you are in surgery. Your surgeon will talk to them when you are out of surgery. A surgeon from our group will see you daily during your hospital stay. You will need to schedule a follow up appointment with your surgeon in our office after you are discharged from the hospital.*

Please feel free to call our office at (702) 737-3808 if you have any questions or concerns.

5320 S. Rainbow Blvd, Suite 282, Las Vegas, NV 89118

Phone (702) 737-3808 www.cvsurgnv.com

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Surgery Scheduling Process

1. *Our surgery scheduler will get the patient's chart to review for scheduling generally within a few hours after the patient's visit with our physician.*
2. *Within one week of the office appointment, the patient will receive a phone call from our scheduler to arrange and confirm the surgery date and time.*
3. *During the phone call in number two above, the patient will be advised about the date and time for hospital registration and pre-operative testing and blood work. The hospital registration and surgery pre-op tests and blood work are usually done two days prior to surgery. Our office will fax orders for the surgery and pre-op tests to the hospital admitting department.*
4. *Our surgery scheduler will obtain insurance authorization if required, as well as provide the date of surgery to the insurance company if necessary.*
5. *Our office will send a courtesy fax to the patient's referring physician, notifying the doctor of the planned surgery.*
6. *Three or four days prior to surgery, the patient will receive a phone call from our medical assistant. Surgery will be re-confirmed and additional instructions will be given that include the following:*
 - a. *Medications to take the morning of surgery.*
 - b. *Advise no food or water after midnight the night before surgery.*
 - c. *Remind to take X-rays to the hospital the day of surgery.*



Cardiovascular Surgery OF SOUTHERN NEVADA

Frequently Asked Questions For the Surgery Scheduler

WHAT DOES “PRE-OP” ENTAIL?

Prior to surgery (preferably two days before) the patient will have a scheduled appointment to go to the hospital admitting department. At that appointment, registration will be done as well as pre-operative testing and blood work that are required for surgery.

DID YOU GET AUTHORIZATION FROM MY INSURANCE?

After your date of surgery is scheduled at the hospital, authorization is requested from your insurance carrier to perform the surgery. Your insurance carrier is provided the date of surgery at the time authorization is requested. If final authorization is not given to us on the initial contact with your insurance carrier, our office will follow-up to obtain the final authorization number prior to surgery.

WHAT DO I DO WITH MY X-RAYS AND/OR CD?

It is most important that X-rays and/or CD's are hand-carried with the patient to the hospital on the day of surgery. The X-rays and/or CD should be kept by the patient until he/she arrives at the surgery area.

WHAT DO I DO WITH MY MEDICATIONS?

Our office medical assistant will call to give pre-op instructions three to four days prior to surgery. These instructions will include what to do with your medications.

WHY DO I NEED TO ARRIVE THREE (OR MORE) HOURS PRIOR TO SURGERY?

Unless the patient's surgery is an early morning case, this is the doctor's policy. Frequently the surgery schedule changes and surgery times fluctuate. We want the patient available if the surgery time moves earlier.

WHERE DO I CHECK IN THE DAY OF SURGERY?

At the pre-operative appointment at the hospital, the patient will be informed where to report on the day of surgery.

HOW SHOULD I PREPARE FOR MY HOSPITAL VISIT?

- *Remove all jewelry, body piercing and any metal hair items and leave them at home.*
- *Do not bring cash, credit cards or valuables (jewelry, etc) to the hospital as the hospital will not assume responsibility for them.*
- *Bring loose, comfortable clothing.*
- *Bring cases for your eyeglasses, hearing aids, dentures or contact lenses as they must be removed prior to surgery.*
- *Bring your Advance Directive if you have one and have not already provided it to the hospital during your preregistration process.*
- *Leave your suitcase in the car until you are assigned to a room.*

DO I NEED SOMEONE TO DRIVE ME?

You will need to arrange for someone to drive you to and from the hospital. You must have a ride home as you will not be allowed to drive or take a taxi or bus following surgery. It is suggested you arrange to have a responsible adult stay with you for 24 hours after surgery/discharge.

5320 S. Rainbow Blvd, Suite 282, Las Vegas, NV 89118

Phone (702) 737-3808 www.cvsurgnv.com

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Cardiovascular Surgery of Southern Nevada

Post Operative Instructions

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This instruction sheet should answer most of your questions. Other questions can be answered at www.cvsurgnv.com. Call the office if you have additional questions or problems.

Wound Care: Clean the incision with soap and water for ten days two times each day. Call the office if you have redness, wound drainage, a fever of 101 degrees or higher, chills, fast or irregular heartbeat, chest pain, shortness of breath, severe pain in or around the wound or are experiencing anything unusual.

Driving: Do not drive while using pain medication. You should not drive for _____ weeks. After this time do not drive if you do not feel up to it.

Lifting: Do not lift more than 10 lbs for _____ weeks.

Incisions: Shower daily, do not bathe in very hot water, do not scrub incision, gently pat dry. Do not go in a Jacuzzi or pool for _____ weeks.

Swelling: Leg swelling is common. When this occurs, your legs should be elevated on two pillows or a reclining chair so your legs are above your heart. Sitting and standing promote swelling and are discouraged.

Medications: Pain medications are usually prescribed by your surgeon. Other medications are usually prescribed by your primary care physician or cardiologist. If pain medication is needed, call our office during regular business hours (Monday – Friday, 9am to 5pm).

Grafts: If you received a synthetic graft or prosthetic valve during surgery, be sure to ask for the American Heart Association SBE prophylaxis protocol and instructions when you come to our office for the above appointment.

Problems: DO NOT HESITATE to call the office with questions or problems. These can be easily handled during regular business hours (Monday – Friday, 9am to 5pm). However, a physician is on call at all times to help you.

Special Instructions:

- Compile a detailed list of all medications you take to bring with you to your appointment. The list should include any aspirin, blood thinners, over-the-counter medications, vitamins and supplements that you may take.
- Bring chest films with you to our office. These should be obtained 1-2 days before your appointment. You should have a prescription for this before hospital discharge.
- You have an appointment for suture removal on _____
- Call our office for a post-operative appointment after your discharge from the rehabilitation facility.

It is imperative you have a follow up appointment with your surgeon in our office after you leave the hospital after surgery. Please call Joy at (702) 737-3808 ext. 132 within two days after leaving the hospital to schedule your appointment and go over these post-op instructions.

CARDIOVASCULAR SURGERY OF SOUTHERN NEVADA



PRESCRIPTION REFILL GUIDELINES

If you need to have a prescription refilled that our physicians have written previously, please call your pharmacy and they will contact us directly.

PHARMACY FAXES ARE ADDRESSED WITHIN 48 HOURS, UNLESS WE RECEIVE THE FAX ON A FRIDAY AFTERNOON IN WHICH CASE IT WILL BE ADDRESSED ON MONDAY.

Please make sure you allow ample time in the event you are running low on a prescription. The fax number for the pharmacy refill request is (702) 737-0154. If you are in need of a written prescription, call (702) 737-3808 option 4 and leave a message with your doctor's medical assistant.

PLEASE ALLOW 72 HOURS FOR YOUR WRITTEN PRESCRIPTIONS TO BE READY.

Thank you in advance for your cooperation.

5320 S. RAINBOW BLVD, SUITE 282, LAS VEGAS, NV 89118

Phone (702) 737-3808 option 4

Fax (702) 737-0154



CARDIAC SURGERY PATIENTS ONLY

These instructions are intended for patients who are having cardiac surgery only. Cardiac surgery includes: CABG (Coronary Artery Bypass Graft), AVR (Aortic Valve Replacement), MVR (Mitral Valve Replacement), TVR (Triple Valve Replacement), Myxoma Resection, ASD (Atrial Septal Defect) repair, VSD (Ventricular Septal Defect) repair, Ascending Aortic Graft, Descending Thoracic Aorta Graft, Pericardial Window, RCA (Right Coronary Artery) Translocation, IHSS (Idiopathic Hyperthrophic Subaortic Stenosis) Resection and Subvalvular Resection.

CARDIAC PATIENTS TAKING ACE/ARB INHIBITORS MUST STOP TAKING ACE/ARB INHIBITORS 24 HOURS PRIOR TO CARDIAC SURGERY. ACE/ARB Inhibitors may include any of the following medications:

ACE Inhibitor (Angiotensin Converting Enzyme)

Generic (Brand Name)

Benazepril (Lotensin)
Captopril (Capoten)
Enalapril (Vasotec)
Fosinopril (Monopril)
Lisinopril (Prinivil, Zestril)
Moexipril (Univasc)
Perindopril (Aceon)
Quinapril (Accupril)
Ramipril (Altace)
Trandolapril (Mavik)

ACE/Diuretic

Medication (containing)

Accuretic (Quinapril and Hydrochlorothiazide)
Lotensin HCT (Benazepril and Hydrochlorothiazide)
Prinzide or Zestoretic (Lisinopril and Hydrochlorothiazide)
Uniretic (Moexipril and Hydrochlorothiazide)
Vasoretic (Enalapril and Hydrochlorothiazide)
Capozide (Captopril and Hydrochlorothiazide)
Monopril HCT (Fosinopril and Hydrochlorothiazide)

ACE/Calcium Channel Blockers

Medication (containing)

Lexxel (Enalapril and Felodipine) * Felodipine okay if taken alone
Lotrel (Amlodipine and Benazepril) * Amlodipine okay if taken alone
Tarka (Trandolapril and Verapamil) * Verapamil okay if taken alone

ARB

Generic (Brand Name)

Valsartan (Diovan)
Candesartan (Atacand)
Eprosartan (Tevetan)
Irbesartan (Avapro)
Losartan (Cozaar)
Olmesartan (Benicar)
Telmisartan (Micardis)

ACE/ARB

Generic (Brand Name)

Candesartan-Hydrochlorothiazide (Atacand HCT)
Eprosartan-Hydrochlorothiazide (Tevetan HCT)
Irbesartan-Hydrochlorothiazide (Avalide)
Losartan-Hydrochlorothiazide (Hyzaar)
Olmesartan-Hydrochlorothiazide (Benicar HCT)
Telmisartan-Hydrochlorothiazide (Micardis HCT)
Valsartan-Hydrochlorothiazide (Diovan HCT)