

\*\*\* All instructions & protocols can be found on my website \*\*\*

[WWW.HIRAHARAMD.COM/PATIENT](http://WWW.HIRAHARAMD.COM/PATIENT)

- **Medical Clearance**
  - If necessary, please see your primary care physician, cardiologist, and/or specialist
  - Have your doctor(s) send, fax, or email my office a letter declaring that you are ready and safe for surgery
  
- **EKG & Blood work**
  - If necessary, please make sure this is done **well in advance** of your surgery date and that our office has received the result
  - EKG's must be within 3–6 months of your surgery depending on the facility where your surgery is scheduled
    - Any abnormality requires clearance by a cardiologist
  - Blood work needs to be recent, within one week of your surgery date
    - If older than 30 days, it must be repeated
  
- **Medications**
  - Stop all blood thinners, aspirin, and anti-inflammatories (i.e. motrin, ibuprofen, advil, naprosyn, aleve, excedrin, etc.) at least seven days before surgery
  - Please consult your primary care physician if you are unsure of your medications
  - Celebrex, tylenol, and narcotics are generally ok prior to surgery
  - Ensure my office has a **current** list of your medications, including dosage & frequency
  
- **Food & Drink**
  - **Nothing to eat or drink after midnight prior to surgery**
  - If necessary, normal daily medications may be taken with a sip of water
  
- **Pre-Operative Appointment – REQUIRED**
  - If you do not come to a pre-operative appointment, your surgery may be cancelled
  - Pre-operative appointments are on Thursday afternoons, the week or two prior to surgery
    - On your surgical notification, you will find your appointment time/date
    - If you do not receive your appointment, it is your responsibility to call to schedule one
  - We will discuss your surgery and answer all of your questions
    - You are welcome to bring a family member with you
  - You will be given a prescription for narcotic and anti-inflammatory medications
    - This **MUST** be obtained in person prior to the surgery
    - Because of changes in the law from the DEA, this can **NOT** be mailed or called in to the pharmacy
    - Triplicate prescriptions will **NOT** be available at the time of surgery
    - The DEA has initiated a new policy whereby all prescriptions must be on a written triplicate form. This means that all prescriptions must be picked up from the office. Prescriptions for any/all narcotics can **NO** longer be called into a pharmacy. These forms are good for one-time use only. The triplicate prescription cannot authorize multiple refills per prescription.
    - Narcotics can be prescribed to patients after surgery for the duration of the aftercare (90 days) only. Following this period, any narcotics refills must be obtained from your primary care physician.
  - We will schedule your post-operative appointment for one week following surgery on a Thursday afternoon
  - We will schedule your physical therapy appointment for one week following surgery

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[www.HiraharaMD.com](http://www.HiraharaMD.com)

- **Research**

- All operative patients are signed up with Surgical Outcomes System (SOS): an online patient-tracking database
- Authorization should already be completed prior to your pre-operative appointment
- Information on SOS is available on my website:
  - [www.HiraharaMD.com/patient](http://www.HiraharaMD.com/patient) → Research Forms → Surgical Outcomes System Info

- **Physical Therapy**

- Kyle Yamashiro of Results Physical Therapy
  - Results PT has 3 locations
    - Rancho Cordova – (916) 362-7962
    - Rancho Murieta – (916) 354-0719
    - Carmichael – (916) 562-9130
  - Kyle will be seeing patients with me every Thursday afternoon
  - Kyle does NOT work for my office
  - Any questions regarding your therapy should be directed to Kyle and his staff
- If you already have a physical therapist, Kyle or his staff will be instructing you regarding the specific therapy protocol that I want you to do with your therapist
- Physical therapy protocols may be downloaded from my website at
  - [www.HiraharaMD.com/patient](http://www.HiraharaMD.com/patient)

- **Optional Items**

- Cold Therapy Units
  - We suggest using one of two different companies: GameReady or Kodiak
  - Your insurance company may or may not authorize this product
  - This product alleviates pain and swelling after surgery and is very convenient
  - My office and staff does **NOT** provide or support this item
  - You are **NOT** required to purchase this optional product
  - Any questions or problems should be addressed directly to the company for the Cold Therapy Unit
    - GameReady, Team Makena
      - Daniella Haena – (650) 784-9588
    - Kodiak, Pacific Medical Inc.
      - Chris Haas – (916) 295-3688 / Main Office – (916) 706-1520
- Sling or Braces
  - If a sling or brace is needed postoperatively, one will be provided to you in the hospital immediately following surgery
  - Any questions or problems regarding the sling must be addressed to Pacific Medical Inc.
    - Chris Haas – (916) 295-3688 / Main Office – (916) 706-1520

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- **Preparation**
  - **Nothing to eat or drink after midnight prior to surgery**
  - If necessary, normal daily medications can be taken with a sip of water
  - Bring your insurance card to your surgery
  
- **Be Available**
  - Arrive to the hospital 3 hours prior to the time of scheduled surgery
    - If you are the first case, you will arrive 1.5 – 2 hours prior
  - Scheduled surgery times are only guaranteed for the first case
    - All other cases are based on how long the earlier surgeries take and will begin immediately following the end of an earlier case
  - We often run ahead of schedule, be available by telephone if we have to call you in early
    - Ensure we have a current and working contact number for you
    - If we cannot get a hold of you, you may miss your surgery, which will then need to be rescheduled
  
- **Illness**
  - If you are feeling ill for ANY reason, you must let us know as soon as possible
    - Your surgery may need to be rescheduled
  
- **Discussion**
  - If a family member or significant other is available immediately after surgery and if you wish, I will talk to them regarding your surgery and answer any questions they might have
  - Most patients have difficulty remembering information after anesthesia so I do **NOT** discuss the surgery with you immediately after surgery
  - I will talk to you, answer questions, and show you the pictures during our first post-operative appointment, which will take place on a **Thursday afternoon one week** following surgery
  
- **Going Home**
  - Someone must be available to take you home
  - Taking a taxi alone is **NOT** allowed

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- **Post-operative Appointment**
  - If you have not already made one, call my office to schedule your first appointment on a **Thursday afternoon one week** after surgery
  
- **Pain Control**
  - Triplicate prescriptions for pain medication will be given to you at your pre-operative appointment
  - Narcotics are used as needed
  - Anti-inflammatories should be started directly after surgery, must be taken regularly, and must continue for four weeks after surgery
  - For medication refills or changes,
    - For refills or changes of narcotic medications, you must come to the office to obtain a new triplicate prescription
    - On-call physicians can **NOT** prescribe medication to patients they have not seen
    - The DEA has initiated a new policy whereby all prescriptions must be on a written triplicate form. This means that all prescriptions must be picked up from the office. Prescriptions for any/all narcotics can NO longer be called into a pharmacy. These forms are good for one-time use only. The triplicate prescription cannot authorize multiple refills per prescription.
    - Narcotics can be prescribed to patients after surgery for the duration of the aftercare (90 days) only. Following this period, any narcotics refills must be obtained from your primary care physician.
  - Ice the knee 20 minutes per hour for the first 72 hours while awake
    - Be very careful when applying cold directly to the skin in limiting how much time it is used to avoid cold burns
    - If a cold therapy unit has been supplied, it is for home use. It will not be placed on you at the time of surgery. If there are any problems or questions with the unit, please contact the provider of your unit.
    - After the first 72 hours, ice the knee at least 3 times a day and especially after physical therapy sessions
    - It will work through the dressings
  
- **Dressings**
  - Dressings can be taken off 48 hours after surgery
  - The incisions will have small pieces of tape over them called “steri-strips.”
    - Do not remove the steri-strips covering the small incisions
    - The steri-strips fall off after one week or can be removed ten days after surgery
    - You can replace the dressings with band-aids, if desired
  - There may be drainage for the first 48 – 72 hours from the incisions. This is normal
  - You may take a shower immediately but do NOT get the dressings wet
    - Once the dressings are removed, you can use soap and water on the wounds
    - Do NOT take a bath or swim as the incisions should not be soaked in water
    - Keep the incisions clean and dry
  
- **Swelling & Tingling**
  - It is normal to have some mild swelling, tingling, or numbness after surgery
  - Keep the leg elevated above the heart on several pillows when sitting or laying down
  - Sometimes the dressing might be too tight and can be re-wrapped, if necessary

## Physical Therapy

- Physical therapy usually begins one week after surgery
- If you have not already been given an appointment for physical therapy after surgery, please contact Holly at my office for a referral
  - My office will supply you with a prescription for your therapist
  - My physical therapy protocol can be downloaded from my website
  - If you see a therapist besides Results Physical Therapy, please obtain my written protocol for your therapist
- The type of surgery you have will determine what you can do after surgery
- If a brace is placed on your leg following surgery,
  - You will use crutches and **NOT** put any weight on the leg until you talk to me at your first appointment, unless otherwise directed
  - You will **NOT** take off the brace (including when you sleep)
    - Except to shower or bathe, change clothes, or do your therapy
- **What to Expect**
  - Surgery to reconstruct an ACL or remove a torn meniscus (meniscectomy) or clean out (debridement):
    - Crutches as necessary
      - Usually for 4-7 days
    - You can walk as tolerated and when you feel ready
    - Physical therapy to start by 1st week after surgery
    - First goal is motion
    - Once full range of motion is achieved, strengthening is started
    - After meniscectomy or debridement, full sports and activities by 1-3 months
      - Swimming & stationary bicycle allowed by 2 weeks
    - After ACL reconstruction, full sports and activities by 6 months
      - Stationary bicycle allowed by 4-6 weeks according to progress
  - Surgery to repair a meniscus:
    - Brace immobilization locked in extension for 6 weeks
    - Weight bearing allowed with leg in extension
    - Physical therapy to start by 1st week after surgery
      - Begin range of motion exercises to prevent stiffness but no weight bearing on bent knee
      - Range only 0 – 90 degrees allowed
    - Remove brace by 6th week
      - Range of motion as tolerated
    - AVOID squatting
      - No weight bearing on bent knee greater than 90 degrees
    - Begin full sports and activities by 6 months depending on progress
  - Surgery to reconstruct ACL & repair meniscus:
    - Brace immobilization with ROM as tolerated for 6 weeks
      - No weight bearing with crutches for 6 weeks
    - Begin physical therapy by 1st week (after surgery)
    - First goal is motion
    - Once full range of motion is achieved, strengthening is started
    - Full sports and activities by 8 months
    - Stationary bicycle allowed by 10-12 weeks according to progress