Frequently Asked Questions
What to Expect Before, During, and After Surgery

Do I need to do anything special the day or night before surgery?
Someone from the surgery center or hospital will call you to discuss pre-operative instructions. They usually include the following:

- Do not eat or drink anything, including water, after midnight the day of your surgery. You may brush your teeth, taking care not to swallow any water.
- Follow your doctor’s orders regarding the taking of any medications the night before or the day of your surgery.
- Refrain from smoking after midnight the day of your surgery.
- Notify your surgeon if there is any change in your physical condition, such as a cold, fever or flu symptom.
- If there is a chance you are pregnant, please notify your surgeon immediately.

When should I arrive at the hospital/surgery center?
Arrive promptly at the time specified by the surgery scheduler. If you are having surgery at an outpatient surgery center, you will usually be asked to arrive one hour before your scheduled surgery. Times may differ if you will be admitted to the hospital prior to surgery. Most pre-operative blood, lab or paper work is performed prior to the day of your surgery.

What should I wear the day of my surgery?
Bathe or shower the morning of surgery but do not apply any makeup. Wear low heeled, comfortable shoes and loose, comfortable clothing such as t-shirts, button-down shirts, sweat pants or baggy shorts that will fit over bandages or dressings following surgery. Do not wear contact lenses or jewelry.

How long will surgery take?
The length of surgery depends on the procedure being performed, the surgeon, and the method of surgery (e.g., minimally-invasive arthroscopy or a more invasive open incision). Arthroscopy may take anywhere from 45 minutes to a few hours.

What kind of anesthesia will I receive?
The four main types of anesthesia include general, regional, monitored, and local. The type of anesthesia you will receive is influenced by one or more of the following factors:

- The kind of surgery you are having
- Estimated length and site of the surgical procedure
- Your overall medical condition and health status
- Medications you currently take
- Your surgeon’s preference

With general anesthesia, you are completely asleep and unconscious with total loss of sensation.

In regional anesthesia, the anesthesiology provider injects you with an anesthetic to provide numbness or loss of pain or sensation to the area of the body requiring surgery. The injection is
made near a cluster of nerves and is called a nerve block. The most common types are spinal, epidural, or peripheral. You may remain awake and alert or be sedated.

If you are sedated during regional anesthesia, then you receive monitored anesthesia care, also known as MAC sedation or twilight sleep. Monitored anesthesia care involves the administration of drugs to produce sedation and analgesia (insensibility to pain without loss of consciousness). In addition, your surgeon will administer local anesthesia to the operative site.

Local anesthesia is an injection that provides numbness to a small area and is used primarily for minor surgery. It is often administered by the surgeon and does not require the presence of an anesthesiology provider.

You will meet with your anesthesiologist prior to surgery and will have an opportunity to discuss your anesthesia options. Your anesthesiologist will inform you of the advantages, side effects, and possible complications of each. Depending upon the factors above, you may be able to participate in the decision-making and choose which method you prefer.

**How long will I stay in the hospital/surgery center?**
The time you spend in the hospital or surgery center will vary depending upon the type of surgery performed, the type of anesthesia that was given, and your individual needs. If surgery is performed in an outpatient surgery center, most patients are discharged within one to three hours after surgery.

**What are the most common complications of orthopedic surgery?**
Most patients will not encounter problems after orthopaedic surgery. As with any surgery, however, there are potential risks, including: reaction to anesthesia, bleeding, infection, blood clots, nerve damage, lack of full range of motion, development of arthritis, scar formation, or re-injury of the joint or soft tissue.

**What medications should I stop taking prior to surgery?**
Your surgeon and anesthesiologist will determine what medications you should stop taking before surgery, when they should be stopped, and when you can resume taking them after surgery.

**What happens after surgery?**
You will be taken to the recovery room and monitored for a period of time. After that you will be taken to a holding room (if in an outpatient surgery center) or to a patient room if you have been or are being admitted to the hospital.

If your operation was in a surgery center, a nurse will review post-operative home care instructions with you, as well as explain any special instructions provided by your surgeon regarding diet, rest, medications, when to follow up with your doctor, and how to use any durable medical equipment such as a sling or crutches your doctor may have ordered.

When you follow up with your doctor, he or she will discuss additional post-operative instructions such as rehabilitation, when stitches may be removed, when you can drive or return to work or school, how long you should use crutches or a sling, how long you should take pain medications, and more.