

Gluteus Medius Repair / Bursectomy / ITB Lengthening *Pre-Operative Instructions*

Surgery Scheduling:

- You will be contacted by our team's clinical liaisons to schedule your surgery date. If you do not hear from our schedulers within 2 weeks, please contact our team
- Closer to the date of surgery A nurse from the hospital or surgery center will contact you. Typically, the week before and/or the day before your surgery, to let you know surgery time and check-in time

Surgery Location:

• Your surgery will be at one of the following locations:

OrthoColorado Hospital
(connected to St. Anthony's
Hospital)
11650 W. 2 nd Place
Lakewood CO 80228

SkyRidge Medical Center (Spine and Total Joint Center) 10101 Ridgegate Pkwy Lone Tree, CO 80124 **South Denver Surgery Center** 300 E. Mineral Avenue, Suite 9 Littleton, CO 80122

Preoperative testing:

- Dr. Ellman requires pre-operative testing and surgery clearance for all patients over the age of 65 or if you have any medical conditions.
- This may consist of basic bloodwork and/or seeing your medical doctor and/or cardiologist.
- This clearance must be completed within 30 days of your surgery, and faxed to the office PRIOR TO SURGERY. If the information is incomplete or not received your surgery may be cancelled.

General Activity:

- You will be **50% weightbearing** on the operative leg for approximately 6 weeks using crutches or a walker
- You will likely need help from family/friends/neighbors following the surgery. If you feel you need additional accommodations/help at home after surgery, please e-mail or call the office prior to surgery.

Time off work/Disability paperwork:

- Due to the physical restraints following surgery, most patients may require time off work
- Please submit by email or fax any necessary disability paperwork documentation from your work to our office prior to surgery. Please include the ADDRESS OR FAX NUMBER where you would like this submitted and the DATE you would like to return to work. Please allow 7-10 business days for completion.



Physical therapy:

- All patients should start physical therapy 2 weeks postoperatively
- Prior to surgery, call your PT clinic of choice and set up your PT appointments.
- Pick a physical therapy clinic near your home that you will be able to get to easily so you can be compliant with your program. Contact our team if you need a recommendation for a therapist familiar with Dr. Ellman's protocol

Equipment:

Hip Brace

- All patients are required to wear a special hip brace for the first 6 weeks after surgery while ambulating. You do NOT need to wear the brace when: sleeping, icing, showering, going to the bathroom
- Our equipment team will contact you within 2 weeks of your surgery to schedule an appointment in person at one of our clinic to be fitted for the brace.

Crutches

- You will need to use crutches/walker immediately after your surgery.
- You are responsible for obtaining your crutches/walker of your preference prior to your surgery.
- We strongly advise you make at least one appointment with your physical therapist prior to your surgery for crutch/walker training

Ice Machine

- You may buy an ice machine or use ice bags after surgery
- While we prefer the ice machine, we do realize this is an out-of-pocket expense, and we are OK with you simply using ice bags postoperatively.

Medications prior to surgery:

- **STOP:** Motrin, Advil, Ibuprofen, Aleve, Naproxen, Mobic, Aspirin, Herbal supplements and vitamins seven days prior to surgery.
- **LIMIT**: Use of narcotic pain medications (if you take them). This will make it easier to manage post op pain. (examples: norco, vicodin, percocet)
- Contact your primary doctor: If you take Coumadin, Lovenox, Ticlid or any other blood thinners. Your doctor will need to help manage starting and stopping these medicines. Please make Dr. Ellman aware if you take these medications.
- **Morning of surgery**: you may take your cardiac medications and if you are diabetic and take LONG ACTING insulin, take HALF of your AM dose.
- **DO NOT TAKE morning of surgery:** Diuretics (or any blood pressure medications with a diuretic component), oral diabetic medications, regular (short acting) insulin.



Night before surgery:

- DO NOT eat or drink anything after midnight.
- Do NOT smoke after midnight.
- Medications can be taken with a small sip of water.
- Wash with HIBICLENS soap and repeat the morning of surgery (available at Walgreens or CVS).

What to bring with you to surgery:

- Comfortable clothes to wear home (the brace will go over your clothes)
- A friend or family member to drive you home and to stay with you for the duration of the surgery day
- A list of meds and medical problems to provide to anesthesia team
- Your pharmacy number so the nursing staff can call in your medications

Hospital Stay:

- The surgery is an **outpatient** procedure, but some patients elect to stay in the hospital one night for pain control and crutch/walker training.
- The decision of to stay overnight will be made by you, your family, and the nurses assisting you after surgery.
- If you elect to stay overnight, you will be placed in our observation unit and will be required to clear physical therapy to be discharged

Insurance information:

- Dr. Ellman's office will pre-certify your surgery with your insurance company.
- Please provide us with the most up-to-date information regarding your insurance. Your benefits will be verified.
- If you are under Workman's Compensation, written authorization will be obtained before scheduling surgery.

PLEASE NOTE:

**There are several unlisted hip procedures (CPT code 29999/27299) that are deemed medically necessary per Dr. Ellman's expertise to achieve optimal outcomes following surgery. Unfortunately, these services are still considered "investigational or unproven" by insurance companies and are not reimbursed.

**Please read Dr. Ellman's non-covered service waiver form for further details. You may contact our billing department for any questions regarding this fee



Post-Operative Instructions

Prescription Medications:

- Blood thinner
 - You will take a blood thinner following surgery to help prevent blood clots
 - Patients are typically put on Aspirin 81mg twice daily for 14 days.
 - Let our team know if you are unable to take NSAIDs, have any previous history of blood clots or blood thinning disorders, and/or are currently take any blood thinners
- Oxycodone or whichever pain medication is decided at your surgery conference. This is a strong narcotic and should only be used for postoperative pain as needed. Do not drive or drink alcohol while taking these medications.
- Methocarbamol (Robaxin) 750mg every 8 hours as needed for muscle spasms

Wound Care

- Leave the bulky surgical bandage on and DO NOT shower for 48 hours.
- After 48 hours, you may remove bandages and gauze but keep steri strips in place.
 - o You may shower at this point.
 - Cover incision sites with waterproof bandage prior to getting into the shower for first 7 days.
 - Should the incisions accidentally get wet, pat them dry with a clean towel. DO NOT SCRUB.
- It is normal to see a lot of blood-tinged soaked fluid on the bandages.
 - o This may appear to be a pinkish-yellow fluid and is normal.
 - DO NOT APPLY LOTIONS OR OINTMENTS TO THE INCISION SITES
- Your stitches are absorbable and do not need to be removed.
- DO NOT soak in any pool/bath water until 4 weeks after surgery.

Physical Therapy

- You will start physical therapy **2 weeks** after surgery. This will consist of gait training, range of motion exercises, and progressive strengthening exercises to improve function.
- You will receive specific instructions for physical therapy protocol at your follow-up clinic appointments.

Weight Bearing

- You will be able to put **50%** of your weight on the operative leg and will need crutches/walker for approximately **6 weeks** after surgery, and then advance to full weight-bearing at that time.
- Do not increase your weight bearing status unless otherwise directed by Dr. Ellman or his team.



Brace

- As mentioned above, you will be fitted for a brace prior to your surgery.
- The brace will be worn for the same amount of time as crutches, ~6weeks
- This brace should be worn while ambulating but you may take it off while icing, showering, physical therapy, sleeping, or sitting
- Brace Settings:
 - 0 degrees extension 90 degrees flexion
 - Neutral rotation
 - 20 degrees Abduction

Ice Therapy

- For the first 72 hours, ice as much as you can! Ideally ice 20 minutes on, 20 minutes off.
- After 72 hours ice 4-5 times per day, then as needed after 2 weeks
- Place the ice onto the hip over a thin layer of clothing or material, but never directly onto the skin.
- Ice machines may be used instead of ice packs and are a great resource. You may purchase these online or through medical distributors. Contact our equipment team for any further inquiries

General activity and sleeping

- Alternate sitting, reclining, and lying down as much as you can tolerate
- Laying around too much can create stiffness, so we recommend moving at least once every hour
- If you need a work note to get up from your desk, please let us know and we can send a note in to your employer.
- While sleeping, it is recommended to place a pillow between your legs to keep your legs spread apart. This will prevent you from putting excess stress on your repaired tendons while you sleep.

Follow-up

- You will need to follow up in clinic with Dr. Ellman's team 10-14 days from your surgery date.
- Please call central scheduling to make an appointment (contact information below) if this was not made when your surgery was scheduled.

When You Should Contact the Office

- If you have a fever >100.4 degrees F.
 - A low grade temperature (even up to 100 degrees) is expected after surgery, but let us know if it gets this high!
- If you develop chills or sweats.
- If you have pus, significant pain, or redness surrounding the incision sites.
- If you are unable to urinate >1-2 days after surgery
- All contact information can be found below



Contact Information for Dr. Michael Ellman

Phone: 720-497-6605 Fax: 720-497-6730

Email: drellmanpc@panoramaortho.com

Department	Reasons to call	Contact Information
Care Navigation (Triage Dept) (7am-5pm M-F) *Excluding Holidays	Medical questions or concerns that require immediate attention	Call: 303-233-1223 Extension 1100
Prescription Refills (8am-3pm M-F) *Excluding Holidays	Refills for prescriptions Change in prescriptions	Call: 720-497-6605 (Requests after 3pm are handled the next business day)
Appointment Scheduling (7am-5pm M-F) *Excluding Holidays	Schedule follow up appointments and office visits Answers questions regarding patient appts	Call: 303-233-1223 Option 2, then option 1
Disability/FMLA Paperwork	Questions and concerns regarding disability, FMLA, return to work paperwork	Fax forms to: 720-497-6730 Email: drellmanpc@panoramaortho.com or drop off paperwork in person at any office **Please allow 5-7 business days for completion**
Pre-Authorizations (9am-4:30pm M-F) *Excluding Holidays	Insurance authorization questions and concerns regarding surgery, injections and imaging ordered by physician (MRI, CT, ultrasounds, EMG's)	Call: 303-233-1223 Extension 1011
Panorama Physical Therapy	Schedule physical therapy appointments Questions or concerns for your Therapist	Centralized Scheduling Office 303-274-7330



303-233-1223 • PanoramaOrtho.com

Billing and Customer Service Office	Questions on Insurance or Billing	720-497-6637
OrthoColorado Hospital	Pre-Admit Testing Questions Check-in and Surgery	720-321-5450 720-321-5170
SkyRidge Medical Center	Times General Questions Check-in and Surgery Times	720-225-6902
South Denver Surgery Center	General Questions Check-in and Surgery Times	720-360-3400 (main line)
Hip Brace Questions	Questions about use of hip brace / settings	DME staff P: 303-233-1223 x1600



303-233-1223 • PanoramaOrtho.com

Surgery Checklist

Please find below a checklist for you to fill out and keep your surgical information organized!

Surge	ry and equipment: Surgery Location (h	ighlight one):				
(connect 1165	plorado Hospital ed to St. Anthony's Hospital) 50 W. 2 nd Place wood, CO 80228	SkyRidge Medical Center (Spine and Total Joint Center) 10101 Ridgegate Pkwy Lone Tree, CO 80124	South Denver Surgery Center 300 E. Mineral Avenue, Suite 9 Littleton, CO 80122			
	Surgery Date:					
	Surgery Time (you will be notified the business day prior to surgery):					
	Time to stop eating food and drink prior to surgery:					
	Hip Brace Fitting (date, time, location):					
<u>Check</u>	once you have con	npleted:				
	Scheduled physical	therapy appointments (Start PT	2 weeks after surgery)			
	Obtained crutches					
	Health clearance co	mpleted by PCP				
Prior	to surgery disconti	nue (or notify our team if que	stions):			
	Discontinue NSAIDs surgery	s, vitamins, minerals and supple	ments one week prior to			
	Cancel any dental a	ppointments 6 weeks prior to Al	ND post surgery			
	Discontinue semagl week prior to surge	utide or tirzepatide (Ozempic/N ry.	Iounjaro/Wegovy) one			
		nd take metformin, consult with at about when to discontinue and	-			
	Notify the surgical thave previously bee	eam if you have a bleeding or clean diagnosed with a blood clot. It	otting disorder, or if you f you have a hematologist			



Gluteus Medius Repair Non-Covered Service Waiver

Patient Name	DOB:	
	Non-Covered Service Waiver	
29999/27299) that are deachieve optimal outcomes considered "investigation reimbursed. Therefore, Pa	There are several unlisted hip procedures (CPT eemed medically necessary per Dr. Ellman's expert following surgery. Unfortunately, these services and or unproven" by insurance companies and an anorama will collect a flat fee of \$500 before you nired to continue the surgical process with Dr. Ellma	tise to re still re not ur hip
insurance companies, des Ellman performs a gluteu additional \$1,000 <i>after</i> sur always attempt to charge y	re in some cases considered "investigational" by pite studies demonstrating excellent success rates. Is medius repair on your hip, you may be charg gery to cover costs associated with the procedure. We your insurance company first, but if they elect not to payment following surgery.	If Dr. ged an Ve will
-	oonsible for the standard flat fee payment of \$500 parts of \$500 parts of \$500 parts of \$500 parts of \$1,000 for a total fee of \$1,000 for a total f	
Signature of Responsible	Party Date	