



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

Surgery time:

You will be contacted by a nurse from the hospital or surgery center the day before your surgery to let you know what time to arrive. This surgery is an outpatient procedure. Please let Dr. Ellman's team know if you have any concerns with going home on the same day as your surgery, so we can better assist with appropriate post-operative care.

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.

Pre operative testing:

Dr. Ellman requires pre-operative testing and clearance for 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.

Plan time off of work:

You will likely need time off of work. This varies based on the amount of time you spend on your feet, lifting requirements, commuting etc. For a typical repair, you will typically be on crutches/walker for 6 weeks after surgery. Please submit any necessary disability paperwork documentation from the office prior to surgery. You may fax or email the requested paperwork (please reference the contact information below). Please include the ADDRESS OR FAX NUMBER where you would like this submitted and the DATE you would like to return to work. Please plan ahead and allow 7-10 business days for completion.

Physical therapy:

Start time for physical therapy will be **2 weeks** postoperatively regardless of the severity of the tear. Call ahead to set up your PT appointment. 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. If you need a recommendation for a therapist familiar with Dr. Ellman's protocol, please contact the office.

Equipment:

You will be prescribed a special hip brace to wear for the first 6 weeks after surgery. The brace company will contact you a just a few days before your surgery and schedule a time for to get fitted. You will wear the brace when ambulating (walking) for the first 6 weeks after surgery. You do NOT need to wear the brace while sleeping or sitting down.

You will have a choice of whether to 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.

You will need to use crutches/walker immediately after your surgery. You are responsible for obtaining this equipment prior to your surgery. ***We strongly advise you make at least one appointment with your physical therapist within 1-2 weeks prior to your surgery for crutch/walker training.***

Sleeping:

It is advisable to keep a pillow between your legs (i.e. keep your legs spread apart) for the first 4-6 weeks after surgery while sleeping. This will prevent excess tension/stress on the repaired tendons.

Assistance at home:

You will likely need help from family members/friends/neighbors for several weeks after the surgery. 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. Discuss this with those individuals that will be helping you. If you feel you need additional accommodations/help at home after surgery, please e-mail or call the office prior to surgery.

Medications:

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.

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).

Morning of surgery:

If you normally take your cardiac medications in the morning, take with a small sip of water. If you are diabetic and take LONG ACTING insulin, take HALF of your AM dose.

DO NOT take the following medication the morning of surgery: Diuretics (or any blood pressure medications with a diuretic component) oral diabetic medications, regular (short acting) insulin.

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 typically an outpatient surgery, but some patients elect to stay in the hospital one night for pain control and crutch/walker training. The decision of whether or not 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 the following day prior to discharge.

Post-Operative Instructions

PRESCRIPTION MEDICATIONS

Aspirin:

- This medication is to help prevent blood clots after surgery.
- Take one 81 mg tablet twice per day with food for 3 weeks.

Oxycodone:

- This is a narcotic medication for pain.
- This medication is to be taken **AS NEEDED**.
- Plan to stay on a scheduled dose of 1-2 tablets every 4-6 hrs for the first 2-3 days.
 - After 3 days you should be able to space out or discontinue the medication and transition to Acetaminophen (Tylenol).
 - DO NOT exceed 3,000 mg of Acetaminophen in a 24 hour period.
- Do not drive or drink alcohol WHILE taking this medication.

WOUND CARE

- Leave the surgical bandage on and DO NOT shower for 48 hours.
- After 48 hours, remove bandages and gauze. You may have surgical glue or steri-strips (white tape) over your incision. DO NOT remove either, just leave in place.
 - You may shower 48 hours after surgery.
 - Cover incision site with waterproof bandage prior to getting into the shower.
 - Should the incision accidentally get wet, pat it dry with a clean towel. DO NOT SCRUB.
- It is normal to see a lot of blood-tinged soaked fluid on the bandages.
 - This may appear to be a pinkish-yellow fluid and is normal.
- In between showers, leave the incision site open to air.
 - DO NOT APPLY LOTIONS OR OINTMENTS TO THE INCISION SITE
- You will have absorbable sutures/stitches, and therefore they will not need to be removed.
- DO NOT soak in any pool/bath water until 3-4 weeks after surgery, or until the incision is completely healed and closed.

PHYSICAL THERAPY

- You will start physical therapy after your first postoperative visit, typically **2 weeks** after surgery. This will consist of gait training, range of motion exercises, and progressive strengthening exercises to improve function.
- You are responsible for making these appointments, and we recommend reaching out to your physical therapist prior to surgery to ensure you begin at the appropriate time.

- You will receive specific instructions for physical therapy 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

- You will be prescribed a special hip brace to wear for the first **6 weeks** after surgery. The brace company will contact you a **just a few days before** your surgery and schedule a time for you to get fitted. You will wear the brace when ambulating (walking) for the first 6 weeks after surgery. You do NOT need to wear the brace while sleeping or sitting down.
- Over the first few days, concentrate on icing the hip and wear the brace when you are up and about.
- Brace Settings:
 - 0 degrees extension – 90 degrees flexion
 - Neutral rotation
 - 20 degrees Abduction
- The brace should be worn until you are off the crutches, typically 6 weeks after surgery.
- You do NOT need to wear the brace while:
 - Using the ice machine
 - Showering and using the bathroom
 - Sleeping or sitting down
- The lateral (outside) post on the brace should be positioned over the lateral aspect (outside) of the leg
- The purpose of the brace is to prevent hyperflexion and adduction (bringing the leg too close to the chest or bringing the leg across the body), therefore protecting the repaired tendons.

ICE

- Ice Machine***
 - If using the ice machine, cycle it on an off every 20 minutes.
 - Use it as much as you can for the first 72 hours.
 - Try to use it 4-5 times per day after the first 72 hours for the first two weeks after surgery.
 - You do not need it after 2 weeks, although it may continue to aide with swelling and mild discomfort past this time period.
 - You may pick up an ice machine at any of our office locations.

- Do not wear the brace over the ice machine pad.
- Ice Packs
 - If using simple ice packs, ice the hip as much as you can for the first 72 hours – 20 minutes on, 20 minutes off.
 - Try to use ice packs 4-5 times per day after the first 72 hours for the first two weeks after surgery
 - Never place ice directly onto the skin, use a washcloth or thin towel.

***Ice machines are recommended for use by Dr. Ellman. Dr. Ellman's office does not assume responsibility if the equipment is not covered by your insurance. Questions about equipment use and insurance coverage should be directed to the company that provides the equipment. These companies should outline a payment plan for you in the event that your insurance does not cover the equipment.

GENERAL ACTIVITY LEVELS AND SLEEP

- Alternate sitting, reclining, and lying down as much as you can tolerate
 - We recommend you get moving once every hour to prevent stiffness.
 - 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.
- Laying around too much will make you stiff, so feel free to move around your home as you can tolerate.
- 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 in 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 SHOULD YOU 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, swelling, or redness surrounding the incision site.



Gluteus Medius Repair Non-Covered Service Waiver

Patient Name _____ DOB: _____

Non-Covered Service Waiver

[] Standard Flat Fee: 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. Therefore, Panorama will collect a flat fee of \$1,000 *before* your hip procedure. This fee is required to continue the surgical process with Dr. Ellman.

Gluteus Medius repairs are in some cases considered “investigational” by some insurance companies, despite studies demonstrating excellent success rates. If Dr. Ellman performs a gluteus medius repair on your hip, you may be charged an additional \$1,000 *after* surgery to cover costs associated with the procedure. We will always attempt to charge your insurance company first, but if they elect not to pay, you may be responsible for payment following surgery.

I understand that I am responsible for the standard flat fee payment of \$1,000 prior to my hip procedure and may be balance billed another \$1,000 for a total fee of \$2,000 for my procedure if my insurance does not cover it.

Signature of Responsible Party **Date**

Contact Information for Dr. Michael Ellman

Clinical Liaison/Surgery Scheduler: Samantha Gutierrez

Phone: 303-233-1223 Ext: 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	<ul style="list-style-type: none"> Medical questions or concerns that require immediate attention 	Call: 303-233-1223 Extension 1100
Prescription Line (8am-3pm M-F) *Excluding Holidays	<ul style="list-style-type: none"> Refills for prescriptions Change in prescriptions 	Call: 720-497-6662 (Requests after 3pm are handled the next business day)
Appointment Scheduling (7am-5pm M-F) *Excluding Holidays	<ul style="list-style-type: none"> Schedule follow up appointments and office visits Answers questions regarding patient appts 	Call: 303-233-1223 Option 2, then option 1
Disability/FMLA Paperwork	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> • Schedule physical therapy appointments • Questions or concerns for your Therapist 	Centralized Scheduling Office 303-274-7330
Billing and Customer Service Office	<ul style="list-style-type: none"> • Questions on Insurance or Billing 	720-497-6637
Ortho Colorado Hospital	<ul style="list-style-type: none"> • Pre-Admit Testing Questions • Check-in and Surgery Times 	720-321-5450 720-321-5170
SkyRidge Medical Center	<ul style="list-style-type: none"> • General Questions • Pre-Admission Testing (PAT) 	720-225-6902
South Denver Surgery Center	<ul style="list-style-type: none"> • General Questions • Check-in and Surgery Times 	720-360-3400 (main line)
Hip Brace Questions	<ul style="list-style-type: none"> • Questions about use of hip brace / settings 	DME staff 303-233-1223 ext 1600