

Timeline and Contact FAQ

Congratulations! You have been scheduled for surgery with Dr. Chandler at **The Tully Center (32 Strawberry Hill Ct, Stamford CT, 06902)**. Here is an overview of what to expect moving forward and some helpful contact information.

1. Confirm your Surgery (info@laurelchandlermd.com with Dr. Chandler's office 203-423-3132)

– By the time you receive this, you probably already had your phone call from the office. They will confirm your surgery date is booked with the facility and can also verify the tentative time of your surgery. Your arrival time at the facility will likely be either 6:00 am or 9:30 am, depending on the final schedule. Please note that this time is still tentative, because occasionally things need to be rearranged last minute for various reasons. The facility will be calling you the day prior to your surgery to confirm your actual surgical time and needed arrival time.

2. Schedule additional appointments with Dr. Chandler – The office can schedule your one-week postop appointment (everyone should have a postop appointment at one week after surgery) as well as a preop appointment with Dr. Chandler. The preop appointment with Dr. Chandler is recommended but not required. We recommend scheduling this sometime between 2 and 4 weeks prior to your scheduled surgery. The purpose of this visit (which can be telehealth) is to answer last minute questions, go over your surgical plan and confirm you are ready for surgery day!

3. Schedule your Primary Care Doctor appointment and lab work – You should plan to see your primary care doctor 4 weeks prior to surgery and have some routine lab work drawn. We generally get a CBC and PT/PTT for everyone to check you for bleeding disorders that may be undiagnosed. You can have this lab work done at Quest or through your primary care doctor's office, whichever is easier. If you would like it to be done at Quest in New England, please let us know and we can place the order for you so you can show up there to have it done. If you would like the labs sent elsewhere, we can write you a script and send it to the lab of your choice. Email info@laurelchandlermd.com to let us know where and when your primary care doctor visit will be.

4. Financing – Depending on your insurance coverage, you may or may not have signed a payment agreement prior to scheduling your surgery date. This form relates to paying for your surgery fees only (not facility/anesthesia). Pay attention to dates on this form. We generally will not call you prior to running a payment that is scheduled on the form you signed. Facility fees and Anesthesia fees are not handled by our office, but 99% of the time these fees will be processed through your in-network benefits (this is true for all plans involving Husky, Aetna, Blue Cross Blue Shield, United Health Care, Cigna). To get an idea of these fees you can look into your insurance in-network benefits through your insurance plan, including your in-network deductible and coinsurance. We are not able to give you an exact estimate as to what you will owe the facility, but you can be certain that it **will not be higher than your "in-network out of**

pocket maximum". This number is the absolute maximum that you could be charged by the facility (to cover both facility and anesthesia fees). If you have a very high in-network out of pocket maximum, you may wish to request additional information about what exactly you are expected to owe. You can get this information by speaking to the financial department at the facility. The operator at the facility can direct you to that department.

MEDICATIONS TO AVOID

The medications listed below have undesirable side effects and/or may affect your anesthesia or surgery. These drugs should be avoided for two weeks prior to surgery, and two weeks after surgery. If you need to take something for minor aches and pains, you may take Tylenol or another acetaminophen product. NO ASPIRIN/ASPIRIN-BASED PRODUCTS OR BIRTH CONTROL PILLS/ INJECTIONS* TWO WEEKS BEFORE AND AFTER. Aspirin will cause excessive bleeding. Birth control will increase chances of blood clots. Please let Dr. Chandler know if you are currently taking any of these medications on a regular basis.

***NO HERBAL SUPPLEMENTS, VITAMIN E, FISH OIL or RED WINE FOR TWO WEEKS

PRIOR. Herbal Supplements are not regulated by the FDA,

***NO NICOTINE PRODUCTS OF ANY KIND

*** HOLD OZEMPIC OR ANY RELATED MEDICATIONS FOR ONE WEEK AND MAINTAIN A CLEAR LIQUID DIET FOR 24 HOURS
BEFORE SURGERY

Advil	Congesprin Chewables	Four Way Cold Tabs	Pepto Bismol
Aleve	Cosprin	Ginger	Percodan
Alka Seltzer	CP-2 Tabs	Ginseng	Perocan
Anacin	Damason P	Ginko	Persistin
Anaprox	Daryon Compound	Garlic	Phentermine
Anadynos	Darvon	Gaysal S Ibuprofen	Phenylbutazone
Ansaid	Darvon N, with A.S.A	Imitrex	Ponseil
A.P.C.	Dulvules	Indocin Indomethacin	Progesterone
Argesic	Di-gesic	Lanorinal	Propoxyphene
Arthropan liquid	Disalcid	Lioresal	Compound 45
Arthritis Pain Formula	Dolobid	Lortab	Rufen
Arthritis Strength	Doprn	Magan	Ru-Tuss
Bufferin	Dristan	Magsal	Sine-Aid
A.S.A.	Durasal Tablets	Measurin Micrainin	Sinutab
A.S.A. Enseals	Easprin	Midol	SK-55 Compound
Ascriptin	Ecotrin	Mobigestic Morbidin	Stendin
Asperbuf Aspergum	Efficin	Motrin	Tagamet
Aspirin	Elavil	Mysteelin	Tamoxifen
Altromid	Emagrin	Nalfon	Tetracycline
Axotal	Empirin with Codeine	Naprosyn	Tolectin
Azolid	Emprazil	Naproxen	Triaminicin
Bayer Aspirin	Encaprin	Neocylate	Trigestic
Birth Control Pills Birth	Endep	Nicobid	Uracel
Control Injection Buff A	Equagesic Tablets	Norgesic	Vanquish
Comp	Estrogen Blockers	Norgesic Forte	Verin
Buffet II	Etrafon	Nuprin	Vibramycin
Buf-Tabs / Bufferin	Excedrin	Oraflex	Vitamin E
Butazolidin	Feldene	Orudis Osteo Bi-Flex	Voltaren
Cama Arthritis Reliever	Fiorinal	Ozempic/Mounjaro/	Zomax
Cheracol Capsules	Fishoil	Wegovy	Zorpin
Chlortrimeton	Flagyl	Pamelor	
Clinoril	Flexeril		

OTHER PREOPERATIVE CONSIDERATIONS

*****NO NICOTINE PRODUCTS OF ANY KIND INCLUDING SECOND-HAND SMOKE.**

Nicotine increases risk of infection and wound healing complications by over 50% and should be AVOIDED FOR 6 WEEKS PRIOR TO SURGERY AND 4 WEEKS AFTER. It is important to also avoid Marijuana, which can interfere with anesthesia medications and increase risk of complications from anesthesia.

If pre-operative clearance is needed, it should be done within 30 days prior to surgery. Make an appointment with your primary care physician and let us know when and where your appointment is so we can send their office a request for clearance.

Patients with Diabetes: Do not take medication for Diabetes on the day of your surgery. If you take metformin, you should not take metformin for 1-2 days prior to surgery.

ON THE MORNING OF SURGERY

- **NO SOLID FOOD** for 8 hours prior to your surgery. You may have small sips of water with medications only
- If you take blood pressure medication, make sure you TAKE THIS MEDICATION on the morning of surgery.
- **REMOVE ALL METAL JEWELRY** prior to showing up at the facility. If you are not able to remove metal, you must make an appointment at a jeweler to remove metal. You may be cancelled if you show up with metal in place.
- **DO NOT URINATE JUST PRIOR TO ARRIVAL.** The nurses will need to collect some urine when you get to the preoperative area. Please do not use the restroom just before you get there.
- Do NOT put on deodorant or any creams/moisturizers or other products on your skin
- It is recommended to cleanse your skin with Hibiclens solution or to take a thorough shower with antibacterial soap and water
- Do NOT shave any hair on your chest for a day or two before surgery\
- Leave all valuables at home
- Bring a photo ID and insurance card
- You should report to the main lobby patient registration desk at the facility where your surgery is scheduled. The facility will call you 1-2 business days prior to surgery to go over details regarding where to go. Someone must drive you home from the hospital after your surgery. No taxi or Uber ride is permitted on the drive home.

*****YOU MUST ARRIVE AT LEAST 10 MINUTES BEFORE THE FACILITY**

TELLS YOU TO ARRIVE

(usually this is 5:50 am for a first start case or 9:30 am for a second start case) as

Dr. Chandler will need extra time to perform your markings. YOUR SURGERY WILL NEED TO BE RESCHEDULED IF YOU ARRIVE LATE FOR SURGERY.

TULLY CENTER SURGERY DAY FAQ

Hospital Address: 32 Strawberry Hill Ct, Stamford, CT 06902

Arrival Time: 6:00 am or 9:30 am most commonly, but to be confirmed 1-2 days prior to surgery. The office can provide you with a tentative arrival time.

When you arrive at the facility, check in at the main lobby and let them know you are there for Ambulatory Surgery. They will direct you where to go from there, and you will proceed to Registration and then will be brought to the Preoperative Area. Here you will have your own small room, and this is where you will meet the nurses and where you will see Dr. Chandler before your surgery. There will be some paperwork to do. You will likely be asked to urinate for some lab work (so don't urinate right before you get there). You will also have your markings done by Dr. Chandler. You are allowed to have two people with you in this room.

Once you are brought in for surgery, your friends/family will be asked to wait in the waiting room. There is also a cafeteria they can go to while they wait. They do not need to stay in the facility the entire time. Halfway through the surgery, the nurse in the operating room will usually give them a call to let them know that everything is going well. After surgery, Dr. Chandler will call them and let them know that surgery is finished. There is still about an hour wait while you are initially waking up before they will be allowed to come back in to see you.

When you get transferred to second stage recovery, your friends or family will be allowed to come be with you again. This is where you will receive postoperative instructions as well as drain teaching if applicable. Drain teaching will involve one-on-one education from the nurses to teach you and whoever is with you how to care for the drains.

Medications will be sent to the pharmacy at the facility and can be picked up after surgery. Generally these medications are an antibiotic pill and a pain medication (generally oxycodone). The antibiotic should be taken once on the night of your surgery before you go to bed and then twice a day thereafter. The pain medication is taken as needed. Tylenol or oxycodone can be taken together or separately. Do NOT take motrin/ibuprofen/Advil. If you received additional postoperative instructions, refer to these for your remaining instructions.