Aspen Medical Director Shoulder, Hip, Knee & Sports Medicine Orthopaedic Surgery

Claire Wilson

Practice Manager

Blake Scherer, PA-C

Physician Assistant

Dana Koehn, PA-C, ATC Physician Assistant

JoHannah Vossman, PA-C Physician Assistant

Davy Brown

Medical Assistant

Jan Alfaro Medical Assistant

0401 Castle Creek Rd., St. 2100
Aspen, CO 81611
970.456.2798
thesteadmanclinic.com

TOTAL JOINT TO DO LIST:

You have been scheduled for a total joint replacement with Dr. Lee. There are a few things that need to happen before we can proceed with surgery:

For Total Knee and Shoulder Replacements:
1) Obtain a CT scan at a facility of your choosing:
For Total Hip Replacements:
1) Obtain Marker Ball X-rays at The Steadman Clinic:
Total Joint Checklist:
Primary Care Clearance is needed within 90 days of surgery: Between and
Your Primary Care Provider is:
 You will get labs and an EKG 2-4 weeks prior to your surgery.
 Call Claire Wilson at (970) 456 2798 with the date of your appointment once scheduled and the name of the physician/ facility.
 We will fax over instructions to the facility. Please also bring your pre-operative packet to this appointment!
2) Schedule a pre-op appointment to see our team <i>within 30 days of surgery</i> Appointment Date:
• During this appointment you will discuss surgery, review your labs and EKG, sign the
consent, schedule your post op visit, and discuss any questions you may have.
3) Anesthesia will review your preoperative labs and medical records. If indicated, a telehealth appointment will be scheduled by the anesthesia team.
4) Set up Physical Therapy @
Therapy should begin on or about:
 We will send a prescription, but you are responsible for setting up the appointments.
• Ideally, you will attend therapy 2-3 days per week, depending on your progress.
5) Surgery Date:
• The same day surgery nurses will call you the day before surgery to discuss arrival time,

when to stop eating and drinking, your medications, etc.

Medical Assistants: Davy Brown; Jan Alfaro

Practice Manager: Claire Wilson





PREOPERATIVE PACKET

Jared Lee, MD

Orthopaedic Hip, Knee, Shoulder, Sports Medicine & Trauma Surgery

Please review the following information prior to your upcoming surgical procedure:

If you have questions, please call our office directly at (970) 718 0920

TeamLee@thesteadmanclinic.com

Visit www.jaredleemd.com for additional information

Physician Assistants: Blake Scherer, PA-C; Dana Koehn, PA-C, ATC; JoHannah Vossman, PA-C

Medical Assistants: Davy Brown; Jan Alfaro

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Patient Checklist to Complete Prior to Surgery

Ride Coordination: After surgery you must be discharged to a responsible adult. Please be sure you have arranged a ride home with someone, you may NOT drive yourself home from surgery.
Travel Plans: Surgery is an all-day event, so please plan accordingly. If you are scheduled for a morning surgery, you may want to consider a hotel room in the area for the night before surgery to avoid any stress the morning of surgery. Our concierge team is available to assist with travel accommodations and lodging. Please contact them at (970) 742-7031 or aspenconcierge@thesteadmanclinic.com .
Post-Operative Appointment: Our team will arrange your first post-operative appointment at the time your surgery is scheduled. Please contact Claire Wilson at (970) 456-2798 or TeamLee@thesteadmanclinic.com if you need to arrange, change, or modify this appointment.
Documentation (FMLA, school, or work): If you need a letter from Dr. Lee for work or school purposes, please let us know as soon as possible. If you have paperwork that must be filled out, please email the forms as soon as possible to TeamLee@thesteadmanclinic.com or send them via fax to (970) 300-2831.
Physical Therapy: Physical Therapy may be recommended following your surgery. Please coordinate your first physical therapy appointment to start 1-2 days following your surgery. Once you know the facility, please let us know as soon as possible, so we can send a prescription.
Insurance: The Steadman Clinic Insurance Department will ensure prior authorization is obtained prior to your surgery. If you would like to personally confirm authorization, we always recommend calling your insurance company directly to discuss your benefits, coverage, and potential costs.
Pre-Operative Medical Clearance: You will be notified by our team if pre-operative medical clearance is needed prior to your surgery. This appointment will most likely be with your primary care physician. This appointment must be completed within 30 days of your surgery, and the clinic notes need to be faxed to (970) 300-2831 or emailed to TeamLee@thesteadmanclinic.com .
Dental Procedures: If you are having a total joint replacement , you must suspend all dental work 6 weeks prior to your surgery, and for 12 weeks after your surgery. If you have any questions about this policy, please call Claire Wilson at (970) 456-2798.

TEAM CONTACT INFORMATION Team Fax: (970) 300 2831					
	Email: TeamLee@thesteadmanclinic.com				
Claire Wilson	Blake Scherer, PA-C	Dana Koehn, PA-C,	JoHannah Vossman,	Davy Brown	Jan Alfaro
Practice Manager	Physician Assistant	ATC	PA-C	Medical Assistant	Medical Assistant
(970) 456 2798	(970) 580 6001	Physician Assistant	Physician Assistant	(970) 618 3507	(970) 987 0038
		(970) 580 6001	(970) 989 3897		
Appointment Scheduling General Questions Surgery Scheduling & Coordination	Prescription Medications Medical Questions Medical Concerns Wound Care	Prescription Medications Medical Questions Medical Concerns Wound Care	Prescription Medications Medical Questions Medical Concerns Wound Care	Pain Management General Questions Physical Therapy	Pain Management General Questions Physical Therapy

Physician Assistants: Blake Scherer, PA-C; Dana Koehn, PA-C, ATC; JoHannah Vossman, PA-C

Medical Assistants: Davy Brown; Jan Alfaro

Practice Manager: Claire Wilson





Pre-Operative Discussion

A member of Dr. Lee's team will call you the day before your surgery

This phone call will include:

- 1. A discussion to review your medical history and discuss pre-operative instructions. These instructions include your pre-operative diet, and post-operative instructions including activity, wound care, showering, pain management, follow-up care, and to answer your questions.
- 2. A discussion regarding the type of sedation that will be used during your surgery.
- 3. If an EKG is required, you will be asked to obtain this prior to your date of surgery.
- 4. If you are having a total joint replacement (hip or knee), an appointment will be arranged for you to meet with physical therapy and anesthesia
- 5. The team will provide you with the scheduled time of your surgery and when you should arrive.

IMPORTANT CONTACT NUMBERS

The Steadman Clinic: (970) 718-0920

	•	rgery is determined by the facil If your surgery is on a Monday	•				•	our
Surgery Date:			M	Т	W	TH	F	
√ ✓	cheskin at the steadhan sargery center least 215 hours service your sonedared sargery time.						or to	
✓	Please arrange for transportation home from the facility with a responsible adult. You MUST have someon with you for discharge. You will not be allowed to leave the hospital unless there is a responsible adult present to collect you.							
Po	st-Operative Appointment							
Da	te & Time:	Day:	Loc	ation:				

Your first post-operative appointment is with the physician assistant ONLY. This appointment is to check the surgical wound, remove splints and sutures, and will possibly include x-rays. The appointment will be modified if it is going to be done virtually.

Practice Manager: Claire Wilson





Nothing-by-Mouth Instructions for Aspen Valley Hospital

Your safety is our highest priority. The nothing-by-mouth guidelines need to be followed to prepare your body for anesthesia. These guidelines, adopted from the American Society of Anesthesiologists, helps to ensure you have the best outcome after surgery.

The Guidelines are as follows:

- 1. No food after midnight of the night before your surgery.
- 2. You may have clear liquids only by mouth until 3 hours prior to your scheduled surgery time.

Clear Liquids Include:

- Water
- Apple Juice
- Other fruit juices without pulp
- Gatorade
- Ensure Pre-Surgery Beverage
- Tea or Black Coffee (without creamer/dairy/sugar/honey)
- Popsicles without fruit pieces (no smoothies)

Additional Notes:

- NO gum, candy, or lozenges allowed after midnight of the night before your surgery.
- **NO** chewing tobacco, smokeless tobacco, cigarettes, cigars, or marijuana after midnight of the night before your surgery.
- You may continue to take your scheduled, prescription medications by mouth
 with a small sip of water, unless you were specifically instructed not to take a
 certain medication by your physician. Please closely follow your pre-operative
 medication instructions.
- You may not drink alcohol the night before or day of your surgery.
- You should have a light, carbohydrate filled dinner the night before your surgery (unless otherwise specified by your physician)
- Try to get at least 8 hours of sleep the night before your surgery.

The Aspen Valley Hospital Same Day Surgery Nurses will call you the day before your surgery to review these instructions and other pre-operative requirements. If you have any questions or concerns about these instructions, please contact the pre-operative nursing team at (970) 544-1327 during regular business hours.

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PREPARING YOUR SKIN BEFORE SURGERY

2 showers. 2 days. Fewer germs.

Cleansing your skin at home before your surgery reduces the risk of infection at the surgical site. The team has provided you 4% Chlorhexidine Gluconate skin cleanser (Hibiclens is the brand name) to reduce bacteria on your skin. Do not use Hibiclens if you are allergic to it.

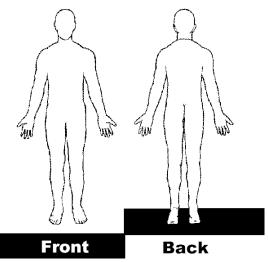
How to shower using your skin cleanser

Skin Prep is to be done the Night before surgery, and Morning of surgery:

- 1. In the shower wash and rinse your hair, face, and body using your normal shampoo and soap.
- 2. Rinse hair and body thoroughly to remove soap and shampoo residue.
- 3. Turn off the shower (this will avoid rinsing Hibiclens to soon).
- 4. Pour a quarter size amount of provided liquid Hibiclens skin cleanser onto a wet, clean washcloth, and wash the SURGICAL LIMB; do NOT use on your face, hair, or genital areas. Keep Hibiclens out of eyes, ears, and mouth.
- 5. After washing the surgical limb, proceed to wash the remaining body from the neck down using the Hibiclens filled washcloth for 5 minutes; apply more Hibiclens skin cleanser as needed. Avoid scrubbing your skin too hard.
- 6. Turn on the shower & rinse the Hibiclens off your body completely with warm water.
- 7. Do NOT use regular soap after washing with the Hibiclens.
- 8. Pat your skin dry with a freshly-laundered, clean towel after each shower cleansing.
- Dress with freshly-laundered clothes after each shower cleansing
- Place clean sheets on your bed the night before surgery.
- Do NOT apply any lotions, deodorants, powders, or perfumes to your body.
- DO NOT SHAVE THE SURGICAL AREA. Your nurse will use clippers to remove hair if
 needed at the surgical site. Using a razor to remove your hair before surgery can
 can leave small cuts on the skin, which increases the risk of infection.

SHOWER CHECKLIST:

Night before Surgery –Date:
Morning of Surgery –Date:





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Orthopaedic Surgery and Sports Medicine

The Steadman Clinic 200 Robinson St. Suite 301 Basalt, CO 81621

Team Phone: (970) 456-2798





DISCONTINUING MEDICATIONS/SUPPLEMENTS BEFORE SURGERY:

This document lists some common medications and supplements that may need to be discontinued prior to your procedure. Following these instructions may reduce side-effects and complications. We will discuss your prescription medications in detail at your preoperative surgery appointment.

14 days before planned surgery, stop taking:

- Monoamine Oxidase Inhibitors (MAOIs):
 - Isocarboxazid (Marplan), Phenelzine (Nardil), Selegiline (Emsam), Tranylcypramine (Parnate)
- GLP-1 Agonists:
 - Semaglutide, Dulaglutide, Liraglutide, Lixisenatide, Exenatide, Tirzepatide, Ozemptic, Wegovy, Mounjaro
- St. John's Wart
- Recreational Drugs:

Cocaine, Heroin, Marijuana, Ayahuasca, Benzos, Ketamine, Anabolic Steroids, Tobacco/Nicotine and Vaping, Hallucinogens, Methamphetamine, LSD, MDMA, Alcohol, etc.

7 days before planned surgery, stop taking:

Non-steroidal Anti-Inflammatory Drugs (NSAIDs):

Advil, Aleve, Anaprox, Ansaid, Arthrotec, Bextra, Celebrex, Daypro, Diclofenac, Ibuprofen, Indocin, KetoProfen, Lodine, Mobic, Naprosyn, Naproxen, Toradol, Relafen, Vicoprofen, Vioxx, Voltaren (oral)

• Medications Containing Aspirin:

(**ONLY IF TAKEN FOR PREVENTION. i.e., no coronary, cerebrovascular, or peripheral vascular disease**) Alka-Seltzers, Anacin, Aspirin, Bayer, Arthritis, Bufferin, Darvon Compound, Ecotrin, Excedrin, Fiorinal, Pepto-Bismol, Percodan

Estrogen Products & Vasodilators:

Hormone replacement therapies, Viagra, Cialis

Anticoagulants & Antithrombotics:

(**NEED TO CONSULT YOUR PHYSICIAN TO MAKE SURE THESE ARE SAFE TO STOP**)

Aspirin, Plavix, Eliquis, Xarelto, Pradaxa, Coumadin (Warfarin), Aggrenox, Ecotrin, Fragmin, Halfprin, Heparin, Lovenox, Orgaran, Persantine, Ticlid

Weight-loss Products & Nutritional/Herbal Supplements:

Any and all vitamins and supplements including but not limited to: Alpha-lipoic acid, Acetyl-1-carnitine, Calcium, Cinnamon, Chamomile, Creatine, Echinacea, Ephedra, Fish Oil, Garlic, Ginger, Gingko biloba, Ginseng, Glucosamine-Chondroitin, Glutamine, Goldenseal, L-carnosine, Licorice, Kava kava, Magnesium, Milk thistle, Multivitamins, Omega-3, Resveratrol, Skullcap, Turmeric, Vitamin E, Vitamin D, Zinc

The following medications may be taken until the day of your surgery:

Acetaminophen (Tylenol), Dilaudid, Oxycodone, Norco, Vicodin, Percocet, MS Contin, ADD/ADHD Medications, Flomax, Rapafio, Myrbetriq, Bentyl, Irritable Bowel Medications, Asthma Medications, Beta Blockers, Calcium Channel blockers, Statins, Antiarrhythmics, Aldosterone Blockers, GERD Medications, Thyroid Medications, Parkinson's Medications, Oral Contraceptives

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Orthopaedic Surgery and Sports Medicine

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Team Phone: (970) 456-2798



THINGS TO PICK-UP FROM THE PHARAMCY:

1. Prescription Medications: You will discuss your prescription medications with the physician assistant prior to your surgery. We will typically send these to the pharmacy 1-3 days prior to your scheduled surgery.

If you are under pain management, have a history of substance use disorder, or issues tolerating prescription pain medications, YOU MUST DISCLOSE THIS INFORMATION TO US PRIOR TO YOUR SURGERY so we can adjust your medication management plan accordingly

When you go the Pharmacy to pick up your prescriptions, please also pick up these over-the-counter items:

- 1. A bottle of extra strength 500mg Acetaminophen (Tylenol)
- 2. A bottle of 200mg Ibuprofen (Advil)
- 3. A pack of Dulcolax 100 mg Stool Softener (Take 1 tablet every 12 hours)
- **4.** A pack of Senna 8.6mg Laxative (Take 1 pill up to twice a day every day that you take narcotics)
- 5. A bottle of Hibiclens (Antiseptic Skin Cleanser) if you were not given this by the team ------>
- 6. If you are having a lower extremity surgery, please also pick up a bottle of 81mg Aspirin



MEDICATION INFORMATION:

Long-Acting Pain Medications (8+ Hours): Oxycontin

Short-Acting Pain Medications (4-6 Hours): Oxycodone, Percocet, Vicodin, Norco

- Try to anticipate the need for this medication (i.e., take a tablet 30 minutes prior to physical therapy, prolonged ambulation, or sleep)
- Percocet, Vicodin, and Norco: have Acetaminophen in them DO NOT TAKE ACETOMINOPHEN
 (TYLENOL) IF YOU ARE TAKING ONE OF THESE MEDICATIONS.

Anti-Nausea Medication: Ondansetron (Zofran)

Over-the-counter Anti-Inflammatories (NSAIDS): Ibuprofen (Advil), Naproxen (Aleve)

Over-the-counter Pain Medications: Acetaminophen (Tylenol)

Blood Thinners: Eliquis, Xarelto, Warfarin, Aspirin

Stool Softeners/Laxatives: Docusate Sodium (Dulcolax), Magnesium Citrate, MiraLAX, Senna, Bisacodyl, Enema

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Postoperative Bowel Regimen

One of the major side effects of narcotic pain medication is constipation.

Narcotics slow down gut motility and can make it very difficult to have normal bowel movements after surgery.

This sheet will help you to keep from getting constipated from taking narcotic pain medications.

The medications listed here are over-the-counter. You do not need a prescription to get these medications.

 $We suggest \ taking \ this \ sheet to \ the \ pharmacy \ and \ having \ the \ pharmacist \ help \ you \ get \ the \ medications \ you \ will \ need.$

Start with Step 1 on the day of surgery. Take a stool softener every day that you take narcotic pain medications.

Step 1 (if no results in 24 hours, move to step 2)

- A. <u>Dulcolax</u> 100 mg by mouth twice to three times a day and
- B. **Senna** 1 tab by mouth daily up to twice daily
- C. Do not take if having loose stools

Step 2 (If no results in 24 hours, move to step 3)

- A. **Dulcolax** 100 mg by mouth twice a day and
- B. **Senna** 2 tabs by mouth twice a day and
- C. Magnesium Citrate Laxative Solution

Step 3 (If no results in 24 hours, move to step 4)

- A. <u>Dulcolax</u> 100 mg by mouth twice a day and
- B. **Senna** 3 tabs by mouth twice a day and
- C. <u>Bisacodyl</u> rectal suppository 3-4 after breakfast

Step 4 (If no results in 24 hours, move to step 5)

- A. **<u>Dulcolax</u>** 100 mg by mouth twice a day and
- B. **Senna** 4 tabs by mouth twice a day and
- C. Miralax 1 capful daily in 8 oz crystal light or similar (or <u>Lactulose</u> or <u>Sorbitol</u> 15 ml by mouth twice a day)
- D. <u>Bisacodyl</u> rectal suppository 3-4 after breakfast

Step 5 (Indicated for no Bowel Movement in 4 days)

- A. **Sodium phosphate enema** or
- B. Oil retention enema or
- C. High-colonic tap water enema
- D. Continue until adequate results

Step 6 (If no results in 24 hours, move to step 7)

- A. **Dulcolax** 100 mg by mouth twice a day and
- B. <u>Senna</u> 4 tabs by mouth twice a day and
- C. Miralax 1 capful 1-2 times daily in 8 oz crystal light or similar (or <u>Lactulose</u> or <u>Sorbitol</u> 30 ml by mouth twice a day)
- D. **Bisacodyl** rectal suppository 3-4 after breakfast

Step 7

- A. **Dulcolax** 100 mg by mouth twice a day and
- B. **Senna** 4 tabs by mouth twice a day and
- C. Miralax 1 capful 2-3 times daily in 8 oz crystal light or similar (or Lactulose or Sorbitol 30 ml by mouth four times daily)
- D. <u>Bisacodyl</u> rectal suppository 3-4 after breakfast

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0401 Castle Creek Rd., St. 2100
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thesteadmanclinic.com
Dr. Lee's Office 970.718.0920

Dr. Lee's Fax 970.300.2831

Main 970.476.1100

Total Joint Dental Work Protocol

Prior to your surgery:

You may not have any dental work done in the final 6 weeks prior to your surgery.

Following your surgery:

You may not have any dental work done in the 12 weeks following your surgery.

This protocol is in place because in some situations, bacteria may travel from the mouth, teeth, or gums through the bloodstream and settle into the artificial joint. Because you have an artificial total joint, your risk of contracting a blood borne infection is higher than normal.

What is considered a dental procedure:

- 1. Regular teeth cleanings
- 2. Implants
- 3. Periodontal (Gum Disease) Procedures
- 4. Dental implant placement and re-implantation of teeth that were knocked out
- 5. Endodontic (Root canal) instrumentation or surgery
- 6. Crown placement or replacements
- 7. Initial placement of orthodontic bands (not brackets)
- 8. Injection of local anesthetic into the gums near the jaw

3 months after surgery:

We ask that you use preventative antibiotics prior to dental procedures for the **rest** of your life.

The antibiotic dose is 2000mg of Amoxicillin or 600mg of Clindamycin to be taken 1 hour prior to any dental procedure. These antibiotics should be prescribed by your dental provider. Please let your dental provider know in advance of your appointment that you will require antibiotics.

Please contact our office if you or your dental provider have questions about this protocol. We can be contacted at 970-718-0920 or via email at TeamLee@thesteadmanclinic.com.

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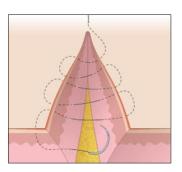
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Post-Operative Dressing Instructions – Aquacel

1. Unless otherwise specified, your incision will be closed with a Stratafix suture. This is a dissolvable Monocryl suture. You will not have any sutures that need to be removed post-operatively.





2. The incision will be covered with a layer of Steri-strips, followed by a waterproof Aquacel bandage.





- 3. Do not remove your Aquacel dressing until your first post-operative appointment.
- **4.** You may shower as normal with the Aquacel dressing on. However, you may not submerge your incision underwater until at least 21 days after your surgery. This includes pools, baths, hot tubs, lakes, rivers, etc.
- 5. PLEASE CALL OUR TEAM IMMEDIATELY IF YOUR AQUACEL DRESSING BECOMES OVERLY SATURATED, IS LIFTING OFF TO REVEAL YOUR INCISION, OR IS LEAKING. WE WILL NEED TO BRING YOU IN TO CHANGE THE DRESSING OR HAVE YOUR PHYISCAL THERAPY CHANGE IT.



Medequip Inc.
40928 Hwy 6, Suite D
Avon, CO 81620
970-476-7701 or emaiil:
Aspendme@medequiportho.com

NICE1

Cold/Compression Therapy Iceless System

Week 1 - \$250 Additional \$125/week



KEY FEATURES

- Iceless NICE patients do not need to place ice into the unit
- No need to add water! Patients do not have to worry about adding water to the unit once technician sets up the unit
- Allows for consistent temperature control ranging from 42F to 58F
- Easy to use "touch control" display screen that allows for easy and immediate control of cold and compression levels
- Allows for timed programmability and overnight utilization
- Form-fitting wraps designed specifically for each joint

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Jan Alfaro Medical Assistant **Medical Optimization Request**

Patient:

Date of Birth:

Surgeon: Jared Lee, MD

Procedure:

Date of Procedure:

Dear Primary Care Team,

The above-mentioned patient will be undergoing a total joint replacement at our facility in the near future. Please assist the anesthesia and surgical teams by providing "pre-operative medication optimization" for this patient within 90 days of their surgery.

Preoperative bloodwork and labs must be completed 2-4 weeks prior to surgery.

The following information is requested:

- 1. A complete list of the patient's current medications, as well as specific peri-operative instructions for important medications (e.g., continue Aspirin through the day of surgery; stop Xarelto on this date; resume Xarelto on this date; etc.)
- 2. A complete list of peri-operative testing and labs that you are recommending. We ask you to please also order the following required tests:
 - a. CBC
 - b. CMP
 - c. PT with INR
 - d. PTT
 - e. UA
 - f. EKG
 - g. MRSA Swab
 - h. A1C (MUST be 7 or less to proceed with surgery)
- 3. Pre-operative note or H&P clearly stating the patient is optimized for surgery, and also including relevant medical history, pre-operative testing, medications, and lab results.

Please fax the above information to our office at (970) 300 2831 or email the information to TeamLee@thesteadmanclinic.com. Please call us directly at (970) 456 2798 with questions.

Sincerely,

Dr. Jared Lee, The Steadman Clinic Team, and Aspen Valley Hospital Anesthesia Department

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