

# DESERT WEST SURGERY

## PATIENT PRE-OPERATIVE INFORMATION HANDOUT

Please call the surgery scheduler 3 working days following your office visit to get a time frame for your surgical procedure. Surgeries are typically being scheduled 2-3 weeks from the time you were seen in the office, this allows you time to make arrangements with work and/or school. When you call, the scheduler will verify your insurance benefits and relay your financial responsibility. You will need to pay any deductibles, co pays, and coinsurance fees at least 2 full working days before your surgery.

**- PLEASE INITIAL EACH LINE AND THEN SIGN BELOW. -**

1. \_\_\_ Do not have anything to eat or drink after midnight the night before surgery. This means no water, ice, coffee, gum, candy, mints, etc. Children will go first on the day of surgery because of this fasting protocol.
2. \_\_\_ Stop taking aspirin and aspirin like products seven (7) days prior to surgery. (Aspirin, Bayer, Ibuprofen, Motrin, Nuprin, Excedrin, Aleve, Naprosyn, Indocin.)
3. \_\_\_ Stop taking Plavix ten (10) days prior to surgery (unless told otherwise by your surgeon).
4. \_\_\_ If you take Coumadin/Warfarin tell your surgeon so arrangements can be made to stop this medication. Tell your surgeon why you take Coumadin as it may require that you receive special antibiotics at the time of your surgery.
5. \_\_\_ Patients having general anesthesia will not be allowed to drive after surgery. Please make arrangements to have someone take you home if your surgery is going to be an outpatient procedure. You should not make any financial decisions for 24 hours.
6. \_\_\_ On the day of surgery do not bring any valuables to the hospital or surgery center. Wear comfortable clothes, something that buttons or zips is recommended. Wear no face makeup, nail polish, or body lotion. Shower or bathe before going to the hospital or surgery center.
7. \_\_\_ Following surgery, please direct any post-operative and/or medication questions to 383-4040 ext. 1021. The nurse will address your concerns in a timely manner. After hours leave a message with the answering service who will contact the doctor on call, or in a true emergency go to the nearest emergency room.

I certify that I have read or had read to me the contents of this form and understands and will follow all instructions as outlined above unless directly instructed differently by my surgeon. Failure to follow these instructions may result in cancellation of my surgery for safety reasons.

\_\_\_\_\_  
Patient Signature (Guardian/Parent)      \_\_\_\_\_  
Witness      \_\_\_\_\_  
Date

\* Please return before surgery date via fax (383-5966), or via mail (1111 Shadow Lane, Las Vegas, Nevada 89102)

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## INGUINAL HERNIA CONSENT

You will be having an inguinal hernia repair. This is usually an outpatient surgical procedure, performed at a hospital or outpatient surgical center with an anesthesiologist present. There are various techniques for repair of inguinal hernias. Your surgeon can discuss specific techniques that will be used for your repair. Mesh is typically used in most repairs to strengthen the repair, reduce postoperative pain, and improve healing. The risk of recurrence after an inguinal hernia repair is significantly lower if mesh is used, versus a traditional repair with no mesh.

As with any surgical procedure, there are complications and risks involved. It would be impractical and possibly misleading to describe all very rare complications in detail. The risks usually associated with all inguinal hernia repairs are bleeding, infection, neuralgia (painful nerve symptoms), and ischemic orchitis in males (pain in testicles). As with all types of hernia repairs, recurrent hernia is also possible. Most of these complications are temporary and time limiting in nature, however in the rare event that symptoms are prolonged this may require referral to a pain or nerve specialist, and possibly even re-operation. Although infection of mesh in an inguinal hernia repair is very rare, it usually does require a re-operation to correct this complication.

Temporary postoperative swelling is quite common. Urinary retention can also occur in males, especially in men who have a history of previous urinary problems, prostatic hypertrophy, or history of prostate procedures.

We hope this helps to clarify the risks involved with your inguinal hernia repair. If you have further questions or concerns regarding the risks of your surgery please be sure to discuss them with your surgeon or our nurse prior to signing this consent form.

I, \_\_\_\_\_, certify that I have read the above or had read to me the contents of this form, and give my consent to have the abovementioned surgery performed. I understand that in spite of every skill and prudent effort made to avoid complications during this procedure, there is no guarantee that a complication will not occur.

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Patient Signature (Guardian/Parent)

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Witness

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Date

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