

## **HEAD & NECK SURGERY OF KANSAS CITY, P.A.**

Ear, Nose and Throat Care for Children and Adults

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### **PREOPERATIVE INSTRUCTIONS**

Your doctor has recommended surgery for you. The following information will answer many questions you may have concerning your upcoming surgery. If you have further questions please be sure to have them answered either through the office staff or your doctor. Questions regarding hospital and anesthesia charges should be addressed to the hospital billing office. Hopefully this will make your experience a pleasant one.

#### **Scheduling**

All surgery will be scheduled through the office. You may schedule your surgery after your visit with the doctor, or you may call to schedule with our surgery scheduler. If changes in the surgery date are required, we ask one week notice, if at all possible. The operating time is frequently booked for days to weeks in advance and short notice cancellations result in unused operating time. **THE HOSPITAL/FACILITY WILL CALL YOU A FEW DAYS PRIOR TO SURGERY WITH YOUR CHECK-IN TIME.**

#### **Medications**

All of your routine medications, including all over the counter medications and vitamins, should be reviewed with your doctor. He will instruct you on what medications you are to take before surgery.

##### **10 DAYS PRIOR TO SURGERY STOP ALL:**

- 1. ASPIRIN. This includes Bufferin, Bayer and baby Aspirin**
- 2. ASPIRIN-LIKE products.**
- 3. ASPIRIN CONTAINING PRODUCTS, SUCH AS PEPTO-BISMOL AND ALKA-SELTZER**
- 4. ADVIL, MOTRIN, IBUPROFEN, ALEVE AND ANY NON-STEROIDAL ANTI-INFLAMMATORY DRUGS**
- 5. VITAMINS.**
- 6. HERBALS OR DIET SUPPLEMENTS SUCH AS FISH OIL, OMEGA 3, FLAXSEED OIL, HERBAL TEA, PROTEIN OR BODY ENHANCEMENT SHAKE, WEIGHTLOSS AIDS, ETC.**
- 7. If you are unsure of what is contained in an over the counter medication, ask your pharmacist.**
- 8. If you take prescription blood thinners, please ask your doctor about when and if you need to stop them.**

These medicines inhibit the blood clotting mechanism and may predispose you to bleeding during surgery and the post-operative period. Acetaminophen (Tylenol) is allowed if necessary.

#### **Labwork**

If you are needing pre-operative bloodwork done, these **MUST** be done no later than **ONE WEEK** prior to surgery. If labwork is done at lab other than listed on your requisition, you will need to inform the office and make sure the labs are sent to our office.

#### **Change in Health**

If there is change in your health (i.e.: cold, flu, ear infection, or injury) in the two weeks prior to your scheduled surgery date, please call the office during business hours. This may affect the scheduling of your surgery.

#### **Pre-operative Diet**

You may eat your usual diet up to the night prior to surgery. **For adults: No food or liquid should be taken orally after midnight prior to surgery. For children: Follow the directions of the anesthesiologist, but in general, nothing should be taken by mouth for 6 hours before surgery.** The only exceptions are the medications you normally take. These may be taken with a small sip of water.

#### **Pre-operative Planning**

During your visit your doctor will review your medical history, do a physical examination, and if necessary, order appropriate laboratory examinations. He will then review the planned procedure, indication, alternatives, potential benefits, any potential risks, and answer any questions you may

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have. This is the time for you and your family members to ask any questions you may have concerning your surgery.

You may be given a medical history questionnaire. Please take time to complete this form as accurately as possible. On the form be sure to list all of your current medications and drug allergies. Take care to complete your past medical and surgical history as accurately as possible. Try to be accurate on dates and types of past surgeries. This may affect planning for this surgery.

You may be admitted to the hospital following surgery. You may discuss your options with your doctor. In many cases, your surgery may be safely performed via same day surgery.

### **Prescriptions**

Your prescriptions may have been e-scribed at your preoperative appointment. The pharmacy that was indicated is : \_\_\_\_\_

### **Insurance Pre-Authorization**

The surgery scheduler will contact your insurance company for a pre-authorization of the surgery. Should a second opinion be required, she will contact you and suggest another ENT for a second opinion. However, we would encourage contacting your insurance company to determine the status of your deductible and the percentage of responsibility on your part. The cost of your surgery is determined by your insurance contract, most insurance companies will not give a cost estimate, cost is determined once the claim is received and processed by your insurance company.

### **Billing**

Payment of your bill is ultimately your responsibility. If your insurance plan is one in which we participate, we will bill your insurance company. If you have no insurance, the procedure is deemed elective or your plan has a high or significant deductible balance remaining, we may require an upfront deposit from you prior to surgery. Once your insurance company has notified us of your remaining financial responsibility you will be billed and your balance becomes due and payable.

*PLEASE NOTE: OUR PHYSICIAN'S SURGERY CHARGES ARE BILLED BY HEAD & NECK SURGERY OF KANSAS CITY, P.A. AND ARE SEPARATE FROM CHARGES BILLED BY THE FACILITY, ANESTHESIA, OR PATHOLOGY. ALL QUESTIONS REGARDING CHARGES OTHER THAN THOSE FROM HEAD & NECK SURGERY OF KANSAS CITY, P.A. SHOULD BE ADDRESSED TO THE BILLING CONTACT LISTED ON THE RESPECTIVE BILL*

### **Cancellation Policy**

Please be advised that the physician reserves the right to charge a surgery cancellation fee at their discretion. Surgery cancellations must be reported to our office, **not** the hospital or surgery center.

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## **Day of Surgery**

You should come to the hospital and check in with admissions as directed by the hospital or facility. **You will need to arrange for transportation to and from the hospital as it is recommended you not drive during the immediate post operative period.**

It is recommended that you shower and shampoo your hair the night before, and the morning of surgery as directed.

## **Post-operative Period**

Instructions regarding the post-operative period will be given by your doctor in the office and at the time of surgery. Pre-printed instructions are available for most common procedures and will be given to you at your pre-operative visit. Please read these carefully and be sure you understand the instructions. Many of your questions will be answered in these brochures. Do not hesitate to call the office if you have any problems.

**Please be sure to have a post-operative office visit scheduled.**

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The surgeons and staff of Head and Neck Surgery of Kansas City, P.A. hope this instruction sheet will answer the majority of your questions about the scheduling of your surgery. We hope your surgical experience and hospital stay will be a pleasant one. If you have any questions at any time, please do not hesitate to call the office.