

ROZBEH TORABI, MD = RADBEH TORABI, MD = KRISTA SINCLAIR, FNP-C, RNFA
Phoenix | 10910 N. TATUM BLVD, SUTTE B-100, PHOENIX, AZ 85028 | Tel. (480) 291-6895 | Fax: (480) 948-3750
Chandler | 1120 S. Dobson Rd. Chandler Suite 110, AZ 85286 | P. (480) 937-0180 | Fax: (480) 948-3750

General Pre-Operative Instructions

- 1. We practice Enhanced Recovery After Surgery (ERAS) method. Scientific studies have shown ERAS to be highly beneficial in lowering pain, hunger, and infection. Most of our patients do not require narcotics more than a few days if at all due to this method.
- 2. As a part of ERAS, you are allowed to drink carbohydrate rich fluids up to 2 hours before your surgery. These fluids are limited to SUGAR FREE powerade, gatorade, apple juice, grape juice, or coconut water (please do NOT drink anything that is red or purple in color). Please do not eat any solid food past midnight the night before your surgery. If you are a patient with DIABETES or gastroesophageal reflux disease (GERD), BMI > 30, GASTRIC BYPASS, GASTRIC SLEEVE, MASSIVE WEIGHT LOSS and HIATAL HERNIA please adhere to the standard instruction of nothing to eat or drink by mouth past midnight the night before your surgery.
- 3. You should arrive at the surgery center check in 2 hours prior to your surgery time. For example, if your surgery is scheduled for 9:00AM, you should be checking in at the facility by 7:00AM.
- 4. If applicable, please bring post-operative garments with you to the facility the day of your surgery.
- 5. Our office will contact you 1-2 days before your surgery to review your allergies and obtain the best pharmacy to send your prescriptions to. Please pick up your medication the day before or the same day of surgery depending on your preference.
- 6. Do not take any anti-hypertensive medications or anticoagulant medications the day of surgery.
- 7. Shower with WATER & SOAP the morning of your surgery. Do not apply any lotions, make up, body spray or deodorant after showering the morning of your surgery.
- 8. All patients anticipating surgery MUST STOP SMOKING! Chewing nicotine-containing gum or using nicotine patches should not be considered as alternatives since the nicotine causes vasoconstriction and compromises blood flow to the skin.
- 9. The following drugs or medications MUST BE DISCONTINUED four weeks prior to surgery because all of these medications affect normal blood coagulation, and if any of these are used, bleeding problems or other complications may occur. *Unless otherwise directed by Dr. Torabi Aspirin and all of the following aspirin-containing compounds must be avoided:



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Alka Seltzer	Duragesic	Percodan
Anacin	Ecotrin	Panalgesic
A.P.C.	Empirin	Robaxisal
Ascriptin	Equagesic	Sine-Aid
Aspirin Suppositories	Excedrin	Sine-Off
Bufferin	Fiorinal	Synalgos Capsules
Butalbital	Indocin	Tolectin
Cope	Midol	Triaminicin
Coricidin	Motrin	Vanquish
Darvon Compound	Naprosyn	Zomax
Dristan	Norgesic	

- 10. Non-steroidal anti-inflammatory drugs such as Advil, Motrin, etc. Vitamin E Fish Oil (such as cod liver) Estrogenic Hormones (by pill, injection, or patch) Vitamin E may be resumed one week after surgery. Estrogen may be resumed a few days after surgery. Tylenol (acetaminophen) may be taken as a therapy for headaches, menstrual cramps, or other aches and pains.
- 11. If any medications are taken routinely, or if you have any known allergies to drugs, these should be discussed with Dr. Torabi prior to surgery. He will provide you with instructions on the use of your routine medications before and after surgery. Patients who are anticoagulated must discontinue taking their medications two days prior to surgery and may begin taking the anti-coagulants again after the procedure has been performed when indicated by Dr. Torabi. Diabetic patients will be given explicit instructions regarding their diet, medications, and insulin administration.
- 12. In addition to the previous, you must stop taking all diet pills (i.e., Fen-Phen, Herbal Fen-Phen, etc.) two weeks prior to the general anesthesia, including the new dietary product "Meridian", whose pharmacological implications and potential interactions with general anesthesia are similar to, if not the same as, those reported with redux.
- 13. Also, St. John's Wort has been shown to induce Monoamine Oxidase (MAO) inhibition. Although the potency of this inhibition is felt to be low, it has not been quantified. More importantly, the safety of St. John's Wort in combination with anesthetics has not yet been confirmed. Dr. Torabi recommends that it be discontinued for two weeks prior to effective procedures.
- 14. Vitamin C taken in large doses post-operatively may contribute to excessive scar formation, and it should not be resumed until two or three months after surgery.
- 15. Contact lenses should not be worn during surgery. They may be replaced a few days afterward depending on the procedure. Dr. Torabi will provide instructions for you.
- 16. For all procedures, facial makeup should be removed, and the face and neck should be thoroughly washed with soap and water prior to coming to surgery. Creams and moisturizers should not be applied to the face or any areas of the body after washing. Hair may be colored but should not be styled prior to surgery. Female patients should shave their underarms if they are having breast surgery and should shave their legs if they are having body contour surgery.



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- 17. Watches, earrings, jewelry and all valuables should be left in a safe place at home.
- 18. Loose and comfortable clothes that do not have to be slipped over the head, and sandal type shoe should be worn to surgery. Patients recuperating overnight at the Surgical Recovery Center may bring appropriate bed clothing, slippers, robe and personal toiletries for during their stay.
- 19. Make arrangements for a family member or friend to drive you to and from the surgical facility. You are NOT allowed to drive yourself home after the surgery. You must also make arrangements to have a responsible adult stay with you for the first 24 hours after surgery.

Medications Prescribed (not all medication may apply)

Scheduled Medications:

- Antibiotic: Keflex (cephalexin) 500mg (started day of surgery, is a SCHEDULED medication, please follow prescription ordered) is an antibiotic you must take for a total of 5 days.
- (*May not apply to you) Blood thinner: Lovenox 30 mg/0.3 ml injectable solution (started day AFTER surgery) is used for prevention of blood clots after surgery. You or your caregiver will administer 1 subcutaneous injection into your thighs daily for 5 days.
- **Tylenol (Acetaminophen)** (Age GREATER than 60: 1000 mg every 8 hours) (Age LESS than 60: 1000 mg every 6 hours).

Highly Recommended: Scheduled Medication over the counter

- Docusate Sodium (Colace) AND Senna: Stool softener: start one day following your surgery EVERY DAY if you're taking narcotic pain medication.
- Magnesium hydroxide (Milk of Magnesia): Bowel Stimulant start one day following your surgery if you have not had a bowel movement since surgery. These may be taken together with Senna and Colace.

As needed:

- Anti-inflammatory: Toradol (ketorolac) (started day of surgery as needed, please follow prescription ordered) This is a different form of Ibuprofen so please stay away from other anti-inflammatory while taking this medication.
- Nerve Pain: (itching/burning/tingling): Gabapentin (Neurontin) (started day of surgery as needed, please follow prescription ordered) is used for pain relief every 12 hours. Please let us know if you are taking any prescriptions for mood-altering (depression or bipolar) medications as these can potentially interact.



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Chaptles | 1000 S. Dalesco B.4. Chaptles Scite 100 AZ 85028 | Tel. (480) 027-0180 | Fax: (480) 048-3750 Chandler | 1120 S. Dobson Rd. Chandler Suite 110, AZ 85286 | P: (480) 937-0180 | Fax: (480) 948-3750

- Muscle Relaxer: Cyclobenzaprine (Flexeril) 5mg (started day of surgery as needed, please follow prescription ordered) is a muscle spasm medication.
- Narcotic Pain Reliever: Oxycodone 5 mg (started day of surgery as needed, please follow prescription ordered) is an oral narcotic prescribed to manage your pain.