



WELCOME

Thank you for choosing **Michael Duran, MD** as your orthopedic surgeon. We are honored to have you as a patient and look forward to providing the best care for your upcoming surgery and recovery.

SURGERY INFORMATION

PATIENT NAME:

SURGERY DATE:

Note: You will be informed of your check-in time the evening prior to your surgery.

APPOINTMENT LOG

PRE-OP APPOINTMENT DATE: _____

POST-OP APPOINTMENT DATE: _____

- **Post-Op X-rays:** Pacific Mobile Imaging will contact you 1–5 days prior to your first post-op appointment to schedule your X-ray in the comfort of your home.
- If you prefer to schedule at a different location, please notify your clinical team.

YOU ARE SCHEDULED FOR:

Please indicate the side and procedure type:

SIDE	PROCEDURE
LEFT / RIGHT	<input type="checkbox"/> TOTAL HIP REPLACEMENT
LEFT / RIGHT	<input type="checkbox"/> TOTAL KNEE REPLACEMENT (<input type="checkbox"/> CORI <input type="checkbox"/> VISIONAIRE <input type="checkbox"/> MAKO)
LEFT / RIGHT	<input type="checkbox"/> PARTIAL KNEE REPLACEMENT (<input type="checkbox"/> CORI <input type="checkbox"/> NAVIO <input type="checkbox"/> MAKO)
LEFT / RIGHT	<input type="checkbox"/> HIP/KNEE REVISION

SIDE	PROCEDURE
LEFT / RIGHT	<input type="checkbox"/> OTHER: _____

Contact & Communication

Please read these instructions carefully. For all non-emergency questions, please contact us during business hours via our HIPAA-compliant messaging platform:

- **Klara Messaging:** www.patient.klara.com
- **Website:** www.duranorthopedics.com
- **Main Office:** 480-490-6561
- **Surgery Scheduling:** Contact Melissa directly at 480-487-3759

The Surgical Team

- **Michael Duran, MD** – Orthopedic Surgeon
- **Carlos Torres**
- **Kathy Ramsey, RSMA**
- **Melissa Trowbridge**
- **Heather Marciniak**
- **Laura Day**
- **Chris Bero, PA-C**
- **Tina Horton, PA-C**
- **Haitham Hanna, PA-C**

CRITICAL PRE-OPERATIVE GUIDELINES

Dental Work

- **Before Surgery:** Complete all dental work at least **3 months prior** to your procedure, or surgery may be postponed.
- **After Surgery:** Wait **3 months** after surgery for any dental work, including routine cleanings.
- **Antibiotics:** We recommend antibiotic protection for dental procedures for at least **18 months** post-surgery, and lifetime protection for colonoscopies or endoscopies. Contact us 3 days before any dental appointment for a prescription.

Smoking & Infection Risk

Smoking vastly increases the risk of surgical infection.

- Cutting down is not enough; even half a cigarette a day carries a carbon monoxide risk.
 - Stop all smoking and avoid second-hand smoke for **1 month before** and **2 months after** surgery.
 - Acceptable alternatives: Nicotine gum, patches, or vaping.
-

BILLING TRANSPARENCY

We believe in clear communication regarding the costs of your care. Please review our updated policies:

- **Medicare & Government Insurance:** We proudly accept Medicare, Tricare, and other government-funded insurance plans.
 - **Private Insurance:** For patients with private insurance, please be aware that Dr. Duran is **out-of-network**.
 - **Facility Fees:** Fees for the hospital or ambulatory surgery center are separate from the surgeon's fees. These are determined by your specific insurance plan.
 - **Cold/Compression Units:** These units are not automatically provided. If you are interested in using a cold-compression unit for your recovery, please ask our clinical team for more information or a request form.
-

PRE-OP COUNTDOWN

1 Week Before Surgery

- **Medications:** Stop all anti-inflammatory medications (NSAIDs) such as Advil, Motrin, Aleve, or Naproxen. Tylenol is permitted.
- **Blood Thinners:** If you take Coumadin, Plavix, Eliquis, or Xarelto, you **must** contact the prescribing physician for specific instructions on when to stop and resume.
- **Supplements:** Discontinue all vitamins, minerals, and herbal supplements.

3 Days Before Surgery

- **Hygiene:** Shower daily from head to toe. Pay extra attention to toes, underarms, knees, and the groin area. Use Hibiclens soap if provided.

The Night Before Surgery

- **Fasting:** Do **NOT** eat, drink, or smoke after midnight. This includes gum, mints, and candy.
 - **Hydration:** Drink one large glass of water immediately before bed. Drink another large glass if you wake up during the night (must be before 4:00 AM).
 - Note: Skip the middle-of-the-night water if your arrival time is 5:30 AM.
-

DAY OF SURGERY CHECKLIST

Leave at Home: All jewelry, body piercings, and valuables.

Bring with You:

- Photo ID and all insurance cards.
- A current list of all medications and supplements.
- Glasses and/or hearing aids.
- Cell phone and charger.
- **Transportation Plan:** You must have a friend or relative drive you home. For your safety, you **cannot** use a taxi, Uber, or Lyft.