

A/Prof Larry Kalish

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PREPARING FOR SURGERY

Thank you for giving me the opportunity to help improve your current condition. Surgery often represents one of the most effective ways we can intervene and assist in managing your problem. Unfortunately it is also the most invasive and often requires a significant recuperation time. It is always important to remember why you are having the surgery and what are the long-term benefits.

If there are any concerns or questions please do not hesitate to contact us through the rooms 02 9362 5991 or via email larry@sinuscentre.com and we will address them as soon as possible. Ask anything you want, there are no unnecessary concerns and your peace of mind is the most important factor in a successful surgical outcome.

DO'S prior to surgery	
☐ Maintain a healthy diet and keep well hydrated	
Be positive and ask us about anything that concerns you	
Confirm if you have any PRE-operative medications to take such as antibiotics or steroids	
☐ Take all of your regular medications UNLESS it is in the list below. If you are uncertain ask us.	
Contact your General Practitioner and advise them of your surgery –	
They can help clear you medically for surgery and advise the surgical and anaesthetic teams of any issues, medications or past problems.	
Confirm you have discussed the surgical consent AND the financial quote with us, we are happy to	
make additional appointments to discuss these matters prior to surgery. There will be NO cost for	
any additional pre operative appointments for patients who have an upcoming operation booked.	
Contact your health fund or the hospital directly (ONLY if you are uninsured) to find out if there is an "excess" or out of pocket cost	
Contact the anaesthetist to discuss pre-operative tests, review and costs	
Your anaesthetist is and he / she can be contacted on	
DO NOT's prior to surgery	
☐ Take any medication (including herbal) which can increase the risk of bleeding UNLESS discussed with Dr Kalish prior to booking the surgery (see list below)	
☐ Smoke - If you smoke, it is important to try and stop smoking for at least 3 weeks prior to surgery, and	
at least four weeks after surgery. Smoking contributes to scarring, poor healing and failure of the	
operation. Your General Practitioner can direct you to resources for smoking cessation.	
☐ Forget your X-Rays – some operations cannot be performed without the X-Rays, if you do not have	
them please check they are not at our rooms.	
The DAY BEFORE surgery	
☐ Call the hospital to confirm the operation time and recommended fasting time	
Contact the rooms regarding payment and last minute concerns	
Contact the rooms regarding payment and last minute concerns	
The DAY OF surgery	
☐ Make arrangements for an adult family member or friend to pick you up from the hospital	
☐ Bring your films (X-Rays / CT scans / MRIs) with you to hospital.	
Provide us with the number/s for anyone you would like us to inform at the end of the operation	
☐ Be confident in the outcome	

Most of the time patients go home on the day of surgery, however you may require an overnight stay if you are one of the last cases of the day, if you live a long distance away, if you have problems with nausea and vomiting after the anaesthetic and cannot tolerate a normal diet, if you have problems urinating, or in the event of an unforeseeable medical problem needing overnight observation. Patients with labile asthma, diabetes, abnormal bleeding or other illnesses may need to stay for
additional monitoring.
I will discuss the details of the operation, re-discuss post operative care and follow up arrangements once you are fully awake. Your family / friends / support persons can be present <i>if you want</i> . I recommend that someone else is always present as you will be drowsy and may forget many of the things discussed. You can contact us after discharge if you need any clarification.

Most of the information resources are available on our website www.sinuscentre.com Copies can also be obtained from the rooms 02 9362 5991

Medications, which can increase your risk of bleeding

NSAIDS Alternate Medications Vitamins / Herbal non-steroidal anti-inflammatories Aclin (sulindac) Fish oil Advil (ibuprofen) Bromelain Aleve (naproxen) Ephedra Anaprox (naproxen) Danshen or Dong Quai Arthrexin (indomethcin) Vitamin E Arthrotec (diclofenac) Ginger Brufen (ibuprofen) Gingko Biloba Bugesic (ibuprofen) Garlic (tablets) Butalgin (ibuprofen) Ginseng Crysanal (naproxen) St John's Wort Diclofenac (diclofenac) Diclohexal (diclofenac) **Blood Thinners** Dinac (diclofenac) **Anticoagulants** Eazydayz (naproxen) Feldene (piroxicam) Fenac (diclofenac) ımadin (warfarin) Indocid (indomethcin) Dindevan (phenindione Inza (naproxen) Iprofen (louprofen) Mobilis (piroxicam) Elmiron (pentosan) Fragmin (dalteparin) Heparin Naprogesic (naproxen) Marevan (warfarin) Orgaran (danaparoid) Pradaxa (dabigastran) Xarelto (rivaroxaban) Naprosyn (naproxen) Nurofen (ibuprofen) Nurolast (naproxen) Orudis (ketoprofen) Aggrastat Oruvail (ketoprofen) Asasantin Panafen (ibuprofen) Astrix (aspirin) Ponstan (mefenamic acid) Cardiprin (aspirin) ProVen (ibuprofen) Cartia (aspirin) Dispirin (aspirin) Proxen SR (naproxen) Rafen (ibuprofen) Iscover (clopidogrel) Surgam (tiaprofenic acid) Persantin (dipyridamole) Toradol (ketorolac) Plavix (clopidogrel) Tri-Profen (ibuprofen) ReoPro (abciximab) Viclofen (diclofenac) Effient (prasugrel) Voltaren (diclofenac) Eliquis (Aprixaban) Voltfast (diclofenac) Tilodene (Ticlopidine)