

Surgery Packet



Walter Lowe, M.D.

WALTER R. LOWE, M.D.

EDWARD T. SMITH PROFESSOR & CHAIR
University of Texas Medical School at Houston
A Part of The University of Texas Health Science Center at Houston

CHIEF OF ORTHOPEDIC SURGERY
Memorial Hermann - Texas Medical Center
& Lyndon B. Johnson General Hospitals

MEDICAL DIRECTOR
Ironman Sports Medicine Institute
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DR. WALTER R. LOWE, M.D.

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DR. WALTER R. LOWE, M.D.



Walter Lowe, M.D.

Dr. Walter R. Lowe, M.D. specializes in Sports Medicine with an emphasis on diagnosing and treating a wide range of knee, shoulder, and elbow injuries and disorders in athletes.

Dr. Lowe is Chairman and Professor of the Department of Orthopaedic Surgery at the University of Texas Medical, Edward T. Smith Professor and Chair, and the Chief of Orthopedic Surgery at both Memorial Hermann Hospital – Texas Medical Center and the Lyndon B. Johnson General Hospital. He is also the Medical Director of the Memorial Hermann Sports Medicine Institute now located in its new location in Suite 1700 at the Memorial Hermann Medical Plaza in the Texas Medical Center.

Dr. Lowe is certified by the American Board of Orthopaedic Surgery and holds a Sub-Specialty Certification in Sports Medicine. His professional memberships include the American Academy of Orthopaedic Surgeons (Fellow), American Orthopaedic Society for Sports Medicine (Fellow), American College of Sports Medicine, NFL Team Physicians Society, the Association of Professional Team Physicians, and the ACL Study Group.

Dr. Lowe serves as the Head Team Physician for the NFL Houston Texans, the NCAA University of Houston Cougars, and the NBA Houston Rockets as well as the team physician for North Shore High School, B.F. Terry High School, and other local area high schools.

Dr. Lowe is an Adjunct Professor, Department of Orthopedic Surgery for the Baylor College of Medicine in Houston, Texas. He has served as the Chief of the Sports Medicine Section for the department until August 14, 2009. He is also the Director of the Sports Medicine Fellowship program. Dr. Lowe is a Professor for the Department of Orthopedic Surgery for the University of Texas Medical School in Houston, Texas. Dr. Lowe is on active staff with Memorial Hermann Hospital, Memorial Hermann Surgical Center, St. Luke’s Episcopal Hospital, the Kirby Surgical Center, and The Methodist Hospital.

Dr. Lowe received his B.A. from Colorado State University in Fort Collins, Colorado. He received his M.D. from the University of Texas Medical School in Houston, Texas. After completing his internship at John Peter Smith Hospital and then his residency at Tarrant County Affiliated Hospitals in Fort Worth, Texas, Dr. Lowe completed a fellowship at the renowned Kerlan-Jobe Orthopaedic Clinic in Los Angeles, California, studying under the famous sports medicine baseball surgeon Dr. Frank Jobe.

**TEXAS MEDICAL CENTER
 CLINIC LOCATION**

MEMORIAL HERMANN SPORTS MEDICINE INSTITUTE
 Memorial Hermann Medical Plaza
 6400 Fannin, Suite 1700
 Houston, TX 77030

TEL: (713) 486-6540 Option 1
 FAX: (713) 512-7235

Mellisa Rannals, Office Manager
 Denise Allen, Medical Staff Coordinator
 Physicians Assistant: Christian Peluse, PA-C
 Licensed Athletic Trainer: David Viaclovsky, LAT

**SUGAR LAND
 CLINIC LOCATION**

BAYLOR SPORTS MEDICINE
 15200 SW Freeway
 Suite 175
 Sugar Land, TX 77478

TEL: (713) 486-6540 Main #, Select Option 2
 Once connected, Press Option 9 then 3 for Cynthia
 (713) 986-5598 Direct Line
 FAX: (281) 494-0145

Cynthia Wallace, LVN

www.drwaltlowe.com
www.drloweshoulder.com

DR. WALTER R. LOWE, M.D.

STAFF PROFILE

CHRISTIAN D. PELUSE, PA-C **Physician Assistant – Certified**

Christian Peluse graduated from the State University of New York at Buffalo where he earned a Bachelor of Science degree in Occupational Therapy in 1999. He practiced as an Occupational Therapist with an emphasis on upper extremity rehabilitation before he returned to school for his Physician Assistant training. Christian graduated from the St. Vincent's Catholic Medical Centers of New York Physician Assistant program in 2002. He has worked in orthopedic surgery since his graduation both in Sports Medicine and Orthopaedic Trauma subspecialties. He has practiced autonomously throughout most of his career and has played an instrumental role in training other physician assistants. Christian evaluates all new patients, assists Dr. Lowe in surgery, and does most Supartz injections.

E-mail: Christian.Peluse@uth.tmc.edu

DAVID VIACLOVSKY, LAT **Licensed Athletic Trainer**

David graduated from the University of Houston where he earned a Bachelor of Science in Kinesiology and is a Licensed Athletic Trainer in the State of Texas. He is the liaison with the local area high schools and their athletic staff as well as referring physical therapy facilities. David sees all patients for their initial post-operative visit, performs dressing dressings, and removes sutures. He is very familiar with Dr. Lowe's rehabilitation protocols and follows the physical therapy progress of all patients.

Telephone: (713) 486-6540 Option 1

E-mail: David.Viaclovsky@uth.tmc.edu

DAWN LOWE, RN, CNOR, RNFA

Dawn is a Registered Nurse First Assistant and is qualified as Dr. Lowe's Surgical Assistant. Dawn coordinates all operating room activities. Dawn approves all medication refills and assists with any patient medical questions.

E-mail: Dawn.Lowe@uth.tmc.edu

MELLISA RANNALS, OFFICE MANAGER

Mellisa assists Dr. Lowe in coordinating his surgery schedule for all Medical Center patients as well as acquiring insurance authorization for the procedure, making post-operative appointments, and helps arrange post-operative physical therapy. Mellisa manages Dr. Lowe's personal and professional calendar.

Telephone: (713) 486-6540 Option 1

E-mail: Mellisa.Rannals@uth.tmc.edu

DENISE ALLEN, MEDICAL STAFF COORDINATOR

Denise assists Dr. Lowe in many clinical aspects. Denise primarily answers the phones and makes appointments for Dr. Lowe in the Medical Center location. This consists of screening new patients and managing Dr. Lowe's clinical schedule. Denise schedules MRIs and any other diagnostic or labs tests. She orders Supartz injections and sets clinical appointments for the injections. Denise also is responsible for completing all patient forms for Medical Center patients.

Telephone: (713) 486-6540 Option 1

E-mail: Denise.Allen@uth.tmc.edu

CYNTHIA WALLACE, LVN

Cynthia assists Dr. Lowe in coordinating his surgery schedule for all Sugar Land patients as well as acquiring insurance authorization for the procedure, making post-operative appointments, and helps arrange post-operative physical therapy. Cynthia authorizes prescription refills and calls in any new prescriptions for all Sugar Land patients. She is located in the Sugar Land office and assists Dr. Lowe in many clinical aspects including scheduling MRIs and any other diagnostic or labs tests.

Telephone: (713) 486-6540 Main #, Select Option 2 – Once connected, press option 9 then option 3 for Cynthia
(713) 986-5598 Direct Line

E-mail: Cynthia.Wallace@uth.tmc.edu

DR. WALTER R. LOWE, M.D.

GENERAL PRE-OPERATIVE INSTRUCTIONS

1. **SEVEN** days prior to surgery please stop taking any aspirin or anti-inflammatory products such as Advil, Ibuprofen, Motrin, Aleve, etc., or any other herbal supplements containing Vitamin E. This does not include Celebrex.
2. **DO NOT** eat or drink anything after midnight the night before your surgery. This includes water, coffee, tea, gum, candy, breath mints, cough drops, etc. If you are currently taking medication for high blood pressure, you may take this early on the morning of your surgery with a very small sip of water.
3. Please inform the office if you are taking any diet pills or herbal supplements regardless if it is a prescription or over-the-counter product. You must stop taking any diet pills at least 14 days prior to your surgery. If you choose not to stop taking these products, your surgery may be postponed or cancelled secondary to risk of possible cardiac problems that may arise during surgery.
4. **KNEE SURGERY PATIENTS**
Please wear shorts, sweats, or other loose fitting clothing. You will have a bulky post-op dressing and possibly a post-operative brace. Your clothing must allow for these conditions.
If you have crutches please bring them with you the day of your surgery or they will be provided for you.
5. **SHOULDER AND ELBOW SURGERY PATIENTS**
Please wear a loose fitting button up shirt to assure your comfort and ease following the surgery.
You will have a bulky post-op dressing as well as either a sling or an immobilizer after surgery.
6. If the patient is a minor (under the age of 18), he or she must be accompanied by a parent or legal guardian. The guardian must show proof on the day of surgery with legal documents confirming he or she is a legal guardian of the patient.
7. You cannot drive yourself home from the hospital or outpatient surgical center. Please make arrangements to have a parent or guardian or someone over the age of 18 take you home after surgery.
8. Please be aware that you cannot have any dental work done for at least six weeks following surgery. Having dental work done increases the risk of infection after surgery.
9. Please alert the office if you are diabetic, taking any regular medications for high blood pressure or any other cardiac condition, or are taking any type of medication that is a blood thinner, i.e., Coumadin, Plavix, etc. Special conditions exist for these medications and medical conditions that may require prior approval from your ordering physician or an internal medicine physician.
10. If you are taking Lovenox either pre-operatively and/or post-operatively, it is imperative that you do **NOT** take any anti-inflammatory medications such as Ibuprofen, Advil, Motrin IB, etc. Once you are done with your prescription of Lovenox, you may begin taking anti-inflammatory medications.
11. When taking your pain medication either pre-operatively and/or post-operatively, it is imperative that you do **NOT** take any other form of over-the-counter pain relievers, anti-inflammatory medications, or sleeping aid medications.

DR. WALTER R. LOWE, M.D.

GENERAL POST-OPERATIVE INSTRUCTIONS

POST-OPERATIVE OFFICE APPOINTMENTS

Your post-op appointments will be scheduled prior to surgery. If for any reason they have not been scheduled, please contact our office. Cynthia will make post-op appointments for all Sugar Land patients and Mellisa will make post-op appointments for all Medical Center patients.

Surgical post-op visits are scheduled on clinic days either on Mondays in the Sugar Land office or Tuesdays in the Texas Medical Center office located in the Memorial Hermann Professional Building. Typically your first post-op appointment should be on the first available clinic day following surgery. It is important to make each of your post-op visits, especially your first visit where you will have your initial dressing changed.

The first one to three post-operative visits will normally be with one of Dr. Lowe's assistants. At that time, your incisions will be checked and initial post-op dressing will be changed, your pain level, range of motion, swelling will be assessed, and any questions concerning your procedure will be answered. Our office is in constant communication with Dr. Lowe for any cases that may require any special attention or need.

MEDICATION (PAIN MEDICATION)

Typically, one of three pain medications will be prescribed after surgery: Norco (Hydrocodone), Darvocet, or Tylenol #3. You are to take 1 or 2 pills every 4 to 6 hours as needed for pain.

It is recommended that you take the pain medication with food as they may cause nausea if you take on an empty stomach. It is not uncommon to develop constipation when taking prescription pain medication. You may take an over the counter stool softener or laxative if needed.

When taking your pain medication either pre-operatively and/or post-operatively, it is imperative that you do NOT take any other form of over-the-counter pain relievers, anti-inflammatory medications, or sleeping aid medications.

Do NOT drive or operate heavy equipment when taking your prescription pain medication.

Resume all other normally prescribed medications unless otherwise instructed.

MEDICATION (LOVENOX®)

Lovenox® is an anticoagulant (blood clot preventative medication) given to patients who will be having knee surgery and have any of the following medical conditions:

- History of deep vein thrombosis (DVT or blood clots)
- Had a previous leg surgery within the past 6 months
- Females taking birth control or hormones
- Anyone considered to be obese in weight
- Over the age of 61

Lovenox® is typically given in a series of one or two subcutaneous injections per day for three consecutive days following surgery or one subcutaneous injection for 10 to 14 consecutive days following surgery depending upon your specific medical condition.

When taking Lovenox® either pre-operatively and/or post-operatively, it is *imperative* that you do NOT take any anti-inflammatory medications such as Ibuprofen, Advil, Motrin IB, etc. Please allow 24 hours to pass once you are completed with your prescription of Lovenox® before you can resume taking anti-inflammatory medications.

CRYOTHERAPY (COLD THERAPY)

Cryotherapy or Cold therapy is used to control pain and swelling.

The use of ice or other cryotherapy device such as the Game Ready or Cryo-Cuff should be constantly for the first 24 hours. Place the cryotherapy device on top of the post-op surgical dressings. Do NOT remove your post-op bandages. To help reduce the likelihood of your initial post-op dressing getting wet, you can place a barrier of saran wrap or a piece of plastic, i.e. plastic zip-loc bag, between the device and your dressing.

If a cryotherapy device such as the Game Ready or Cryo-Cuff is not applicable, a very easy and inexpensive way to ice is to use frozen peas. Go to the grocery store and buy several bags of frozen peas. Take them out of the bag they come in and place in a gallon sized zip-lock freezer bag making them about an inch thick. Try to get as much air out of the bag as possible and make a good seal. When you are done, return them to your freezer and lay flat. Now you have a light, inexpensive ice bag that can be reused numerous times. Frozen pea ice packs are also helpful to use on the lower leg to reduce swelling and can be done while in your CPM unit.

After the first day, use cryotherapy for 15 to 20 minutes every 2 to 3 hours.

Always use cryotherapy after physical therapy and home exercises to help with swelling and pain.

DR. WALTER R. LOWE, M.D.

GENERAL POST-OPERATIVE INSTRUCTIONS (CONTINUED)

PHYSICAL THERAPY

Physical therapy is a *key* component of recovery.

For knee patients with ligament reconstructions, physical therapy usually starts the day following surgery. If your surgery is on a Friday, you should begin on the next business day. For knee patients with arthroscopies, physical therapy usually starts within 1 to 5 days after surgery.

Shoulder and elbow patients generally do not begin physical therapy until after their first post-op visit.

Moving around after surgery will help diminish the risk of blood clots for knee patients. Try to be as independent as possible without compromising your safety. The key to prevent blood clots is to avoid excessive bed rest.

REPORTING EMERGENCIES AFTER SURGERY

REPORTING EMERGENCIES DURING NORMAL BUSINESS HOURS

If you have an emergency during normal business hours, please contact our office using the main telephone number (713)486-6540. Press Option 1 for the Texas Medical Center office or Option 2 for the Sugar Land office. Our main office number is forwarded during the hours of 12pm and 2pm and after 5pm until 9am the following morning. If you are calling during these hours with an emergency, please let the answering service know it is an emergency and they will connect you directly to our office.

REPORTING EMERGENCIES AFTER NORMAL BUSINESS HOURS & WEEKENDS

If you have an emergency after normal business hours or on the weekend, please contact Dr. Lowe's office at our main office number at (713) 486-6540. You will get an option for selecting either the Texas Medical Center or Sugar Land office. Your call will be connected to our UT answering service and your call will promptly be returned by the designated orthopedic fellow on-call. Both Sugar Land patients and Medical Center patients should call our main number to contact us after normal business hours.

CONTACT OUR OFFICE IF YOU NOTICE OR EXPERIENCE ANY OF THE FOLLOWING:

- Uncontrolled nausea or vomiting
- Adverse or abnormal reaction to medication such as severe itching, redness or spotting of the skin
- Inability to urinate
- Fever greater than 101.5 (A low grade fevers 1 to 2 days after surgery is normal.)
- Cough or cold symptoms after surgery
- Severe or uncontrollable pain not relieved by pain medication
- Redness or continued drainage around incisions (A small amount is normal.) This drainage should not be yellow or green in color.
- Calf pain and/or pain deep in your calf when you bring your foot up towards your knee
- Severe swelling

If you experience any chest pain or difficulty breathing, call 9-1-1 or proceed to the closest emergency room then contact Dr. Lowe's office.

DR. WALTER R. LOWE, M.D.

**GENERAL POST-OPERATIVE INSTRUCTIONS
FOR **KNEE** SURGERY PATIENTS**

Please refer to the specific Post-Operative Instructions supplemental packet for a more detailed explanation concerning the specific procedure you will be having.

The following information is general for all knee surgeries and may differ from your exact procedure.

- **WOUND CARE & HYGIENE**

- **General Knee Scopes (Requiring Only Small Portal Incisions)**

- Knee arthroscopies generally only require very small portal incisions to be made. Dr. Lowe usually allows you to remove the bulky dressing 48 hours after your surgery.

- If you choose to remove your outer surgical dressing, please follow these guidelines. Remove the outer elastic bandage along with the white gauze pads and white surgical padding. Bleeding usually occurs following surgery so these dressings may be soiled with blood. Only remove the elastic bandage and any white gauze pads or white surgical padding. Do NOT remove either the steri-strips that are directly on the skin or the yellow medicated gauze immediately on top of the steri-strips if at all possible. You are allowed to place water-proof bandages over the portal incisions to shower. Be sure to cover the entire area with water-proof bandages including the steri-strips and yellow gauze. Once you place water-proof bandages over your portals, leave these on until your first post-op appointment since removing these will remove the steri-strips and yellow gauze.

- **Ligament Reconstructions (Requiring Larger Incisions)**

- If you are having any type of ligament reconstruction or any procedure that requires a larger incision, Dr. Lowe does NOT allow you to remove your dressings after surgery. This includes you the patient, your caregivers, or the physical therapist. An exposed wound in physical therapy is UNACCEPTABLE. Removing your surgical dressings will expose you to potentially serious infections.

- Dressings will be changed on your first post-op visit and a new dressing applied. If your dressing gets EXCESSIVELY wet prior to your first post-op visit, meaning “soaked through,” please contact the office for instructions.

- If you feel that the dressing may be too tight, you may loosen the elastic bandage only. Do NOT remove any of the sterile padding or gauze as this may expose you to an infection.

- **CPM (CONTINUOUS PASSIVE MOTION) UNIT – (IF APPLICABLE)**

- Your knee is a joint. All joints are designed to move. Your CPM unit is to be used to passively move your knee through a specified range of motion. This passive motion stimulates the healing process of your knee as well as helps to limit excessive scar tissue adhesions that may hinder your recovery.

- If a CPM machine is ordered after surgery, Dr. Lowe will give specific instructions to your caregiver.

- **POST-OPERATIVE BRACE – (IF APPLICABLE)**

- A post-operative DonJoy IROM brace may be necessary depending upon the specific procedure you will be having. This post-op brace will typically be locked in full extension and is to be worn at all times unless you are using the CPM machine, doing your exercises or using cryotherapy.

- This post-op brace is necessary in order to protect your knee while your muscles are inhibited for even the simplest of tasks such as going to the restroom.

- If a post-operative brace is ordered after surgery, Dr. Lowe will give specific instructions to your caregiver.

- **CRUTCHES (IF APPLICABLE) & WEIGHT-BEARING STATUS**

- Following most knee surgeries full-weight bearing on the involved leg is allowed unless otherwise instructed by Dr. Lowe after surgery. Your weight-bearing status depends upon specific procedures done during surgery that may require modifications to your status that will allow for more appropriate healing after surgery.

- Dr. Lowe will instruct your caregivers of the specific weight bearing status after surgery depending upon the specific procedure that will be performed.

- Crutches will be necessary to assist with balance and stability. Crutches are assistive devices so it is important to walk with as normal of gait pattern as possible within the limitations specified by Dr. Lowe.

DR. WALTER R. LOWE, M.D.

**GENERAL POST-OPERATIVE INSTRUCTIONS
FOR **SHOULDER** SURGERY PATIENTS**

The following information is general for all shoulder surgeries and may differ from your exact procedure.

- **WOUND CARE & HYGIENE**

General Shoulder Scopes (Requiring Only Small Portal Incisions)

Shoulder arthroscopies generally only require very small portal incisions to be made. Dr. Lowe usually allows you to remove the bulky dressing 48 hours after your surgery.

If you choose to remove your outer surgical dressing, please follow these guidelines. Remove the outer spongy compression tape along with the white gauze pads and white surgical padding. Bleeding usually occurs following surgery so these dressings may be soiled with blood. Only remove the elastic bandage and any white gauze pads or white surgical padding. Do NOT remove either the steri-strips that are directly on the skin or the yellow medicated gauze immediately on top of the steri-strips if at all possible. You are allowed to place water-proof bandages over the portal incisions to shower. Be sure to cover the entire area with water-proof bandages including the steri-strips and yellow gauze. Once you place water-proof bandages over your portals, leave these on until your first post-op appointment since removing these will remove the steri-strips and yellow gauze.

Open Procedures (Requiring Larger Incisions)

If you are having any type of procedure that requires a larger incision, Dr. Lowe does NOT allow you to remove your dressings after surgery. This includes you the patient, your caregivers, or the physical therapist. An exposed wound in physical therapy is UNACCEPTABLE. Removing your surgical dressings will expose you to potentially serious infections.

Dressings will be changed on your first post-op visit and a new dressing applied. If your dressing gets EXCESSIVELY wet prior to your first post-op visit, meaning “soaked through,” please contact the office for instructions.

- **POST-OPERATIVE SLING OR IMMOBILIZER – (IF APPLICABLE)**

A post-operative DonJoy Ultra-Sling with or without attached padded pillow may be necessary depending upon the specific procedure you will be having. This sling allows for limited to no movement of the shoulder in order to protect from unwanted motions following surgery.

If a post-operative sling or immobilizer is ordered after surgery, Dr. Lowe will give specific instructions to your caregiver.

DR. WALTER R. LOWE, M.D.

GENERAL POST-OPERATIVE INSTRUCTIONS FOR **ELBOW SURGERY PATIENTS**

The following information is general for all elbow surgeries and may differ from your exact procedure.

- **WOUND CARE & HYGIENE**

- **General Elbow Scopes (Requiring Only Small Portal Incisions)**

- Elbow arthroscopies generally only require very small portal incisions to be made. Dr. Lowe usually allows you to remove the bulky dressing 48 hours after your surgery.

- If you choose to remove your outer surgical dressing, please follow these guidelines. Remove the outer elastic bandages along with the white gauze pads and white surgical padding. Bleeding usually occurs following surgery so these dressings may be soiled with blood. Only remove the elastic bandage and any white gauze pads or white surgical padding. Do NOT remove either the steri-strips that are directly on the skin or the yellow medicated gauze immediately on top of the steri-strips if at all possible. You are allowed to place water-proof bandages over the portal incisions to shower. Be sure to cover the entire area with water-proof bandages including the steri-strips and yellow gauze. Once you place water-proof bandages over your portals, leave these on until your first post-op appointment since removing these will remove the steri-strips and yellow gauze.

- **Open Procedures (Requiring Larger Incisions)**

- If you are having any type of procedure that requires a larger incision such as an Ulnar Collateral Ligament Reconstruction (Tommy John surgery), Dr. Lowe does NOT allow you to remove your dressings after surgery. This includes you the patient, your caregivers, or the physical therapist. An exposed wound in physical therapy is UNACCEPTABLE. Removing your surgical dressings will expose you to potentially serious infections.

- Dressings will be changed on your first post-op visit and a new dressing applied. If your dressing gets EXCESSIVELY wet prior to your first post-op visit, meaning “soaked through,” please contact the office for instructions.

- **POST-OPERATIVE SPLINT – (IF APPLICABLE)**

- A post-operative splint may be necessary depending upon the specific procedure you will be having. This splint allows for limited to no movement of the elbow in order to protect from unwanted motions following surgery.

- If a post-operative splint is ordered after surgery, Dr. Lowe will give specific instructions to your caregiver.

- **POST-OPERATIVE SLING – (IF APPLICABLE)**

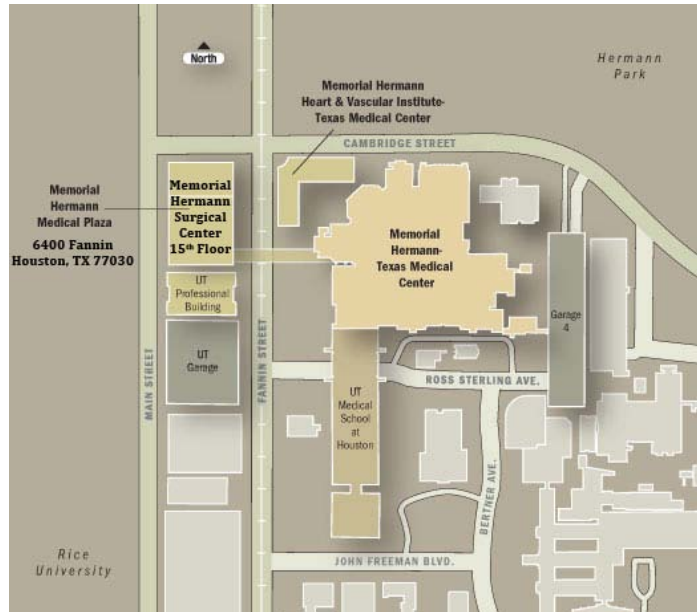
- A post-operative DonJoy Ultra-Sling with or without attached padded pillow may be necessary depending upon the specific procedure you will be having. This sling allows for limited to no movement of the elbow in order to protect from unwanted motions following surgery.

- If a post-operative sling or immobilizer is ordered after surgery, Dr. Lowe will give specific instructions to your caregiver.

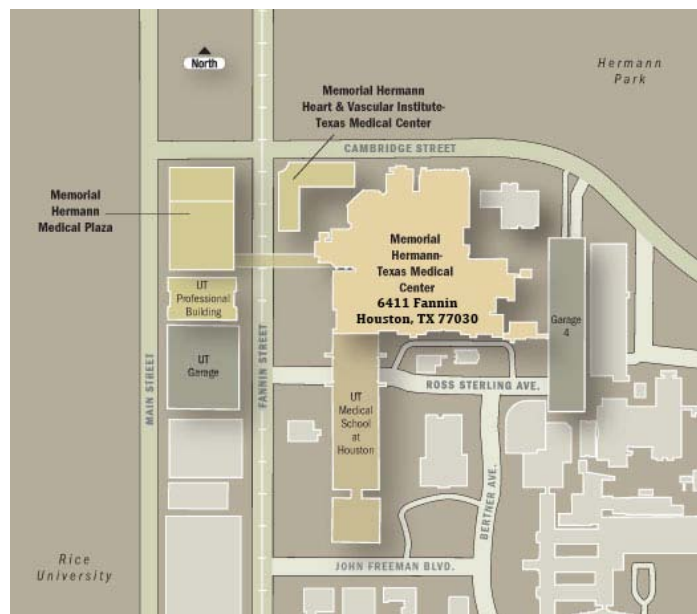
DR. WALTER R. LOWE, M.D.

OUTPATIENT SURGICAL CENTERS AND HOSPITALS

- MEMORIAL HERMANN SURGICAL CENTER**
 Memorial Hermann Medical Plaza
 6400 Fannin, 15th Floor
 Houston, TX 77030
 PRE-REGISTRATION: (713) 790-7700



- MEMORIAL HERMANN HOSPITAL (DAY SURGERY) TEXAS MEDICAL CENTER**
 Jones Pavillion
 6411 Fannin, 2nd Floor
 Houston, TX 77030
 PRE-REGISTRATION: (713) 704-4375



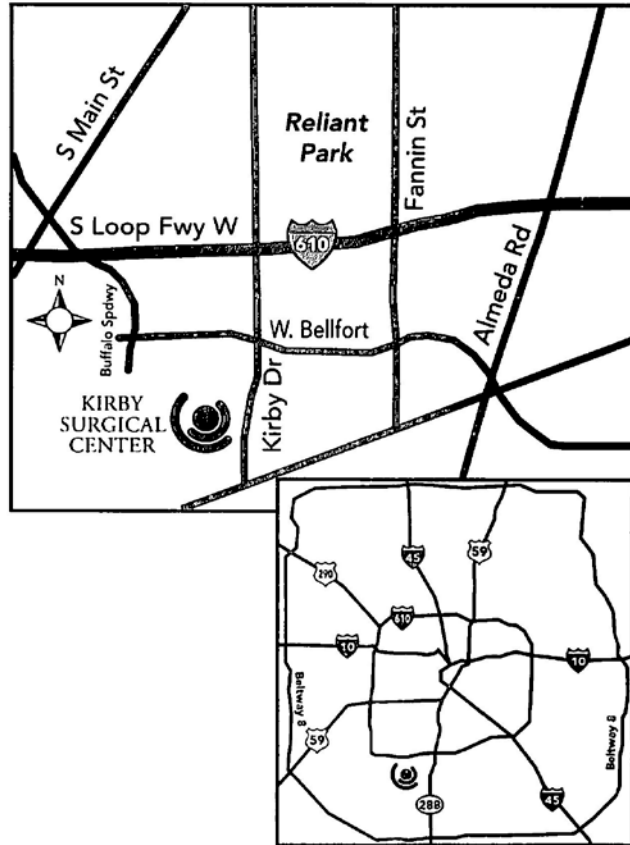
DR. WALTER R. LOWE, M.D.

OUTPATIENT SURGICAL CENTERS AND HOSPITALS (CONTINUED)

3. **KIRBY SURGICAL CENTER**

9300 Kirby Drive, Suite 100
 Houston, TX 77054

PRE-REGISTRATION: (832) 201-5157



4. **THE METHODIST OUTPATIENT CENTER**

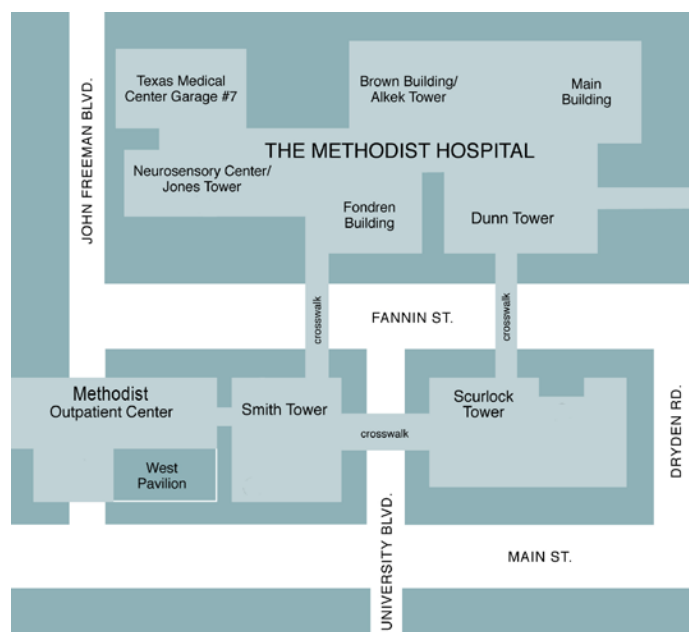
6445 Fannin
 19th Floor
 Houston, TX 77030

PRE-REGISTRATION: (713) 394-6805

PRE-ADMISSION: (713) 441-5035

(713) 441-7462

(713) 441-7463



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OUTPATIENT SURGICAL CENTERS AND HOSPITALS (CONTINUED)

5. **ST. LUKE'S MEDICAL TOWERS**

6624 Fannin, 9th Floor
Houston, TX 77030

PRE-REGISTRATION: (832) 355-0000

- Call this number first to pre-register for your outpatient surgery.

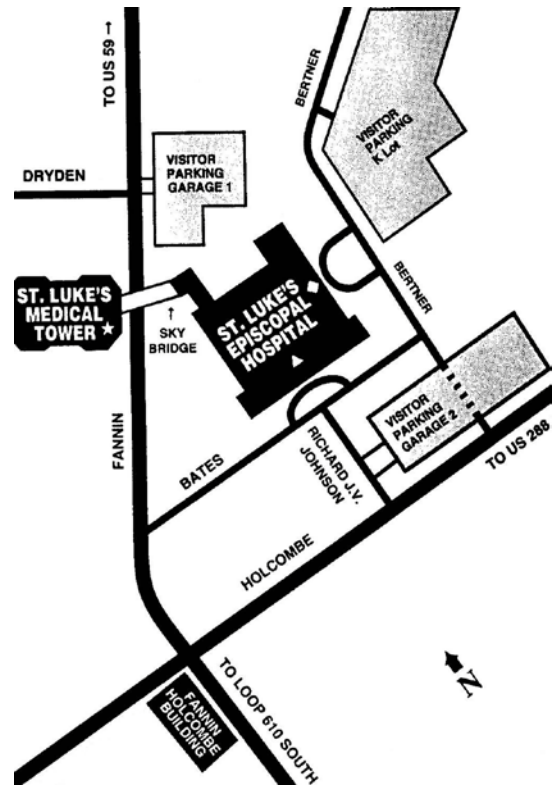
PRE-ADMISSION NURSE LINE: (832) 355-8909

- When you call the pre-registration number listed above, you may be connected to a Registered Nurse that may ask you questions concerning your medical history.

BILLING: (832) 355-8177

- Call this number if you have any questions regarding billing.

If you are scheduled to have your outpatient surgery done at St. Luke's Medical Tower, you **MUST** call the Pre-Registration telephone number listed above to pre-register before the day of your surgery.



DR. WALTER R. LOWE, M.D.

INFORMATION REGARDING ALLOGRAFTS & PLATELET RICH PLASMA THERAPY

The following information has been taken from "Choosing and Allograft from MTF" brochure from MTF: Musculoskeletal Transplant Foundation – *The Allograft Leader*SM.

The patient facing ligament reconstruction for their injury may choose to have surgery using bone and/or soft tissue transplant called an allograft. An allograft is bone or soft tissue that is transplanted from one person to another.

Transplanted bone, tendons, cartilage and skin are used extensively in orthopaedics, neurosurgery, as well as plastic, general and dental surgeries. In this country, an estimated 900,000 allografts are transplanted each year.

Dr. Lowe uses the Musculoskeletal Transplant Foundation (MTF) as his *exclusive* provider for allograft tissue for ligament reconstructions, meniscal transplants, and osteochondral transplants as well as Cascade® Platelet-Rich Plasma Therapy during surgery.

WHO IS MTF?

The Musculoskeletal Transplant Foundation is the largest provider of bone and soft tissue grafts in the United States. Founded by surgeons and medical teaching institutions, MTF is a national, non-profit organization dedicated to meeting the needs of surgeons and patients for allografts that meet the highest standards of quality and safety.

WHERE DO MTF ALLOGRAFTS COME FROM?

Donors are people who have died in accidents or from sudden illness such as heart attack or stroke. Often the gift of bone and soft tissues from a single donor can help multiple recipients. Every donor is screened extensively before donation. All donated tissue is rigorously tested using the most technologically advanced methods to ensure safety and sterility before release for distribution. All tissues that do not pass these rigorous tests are rejected.

THE SAFETY OF MTF ALLOGRAFTS

Since the inception of MTF in 1987, with over 2.5 million grafts distributed, MTF maintains an unrivaled safety record. MTF has never had a confirmed case of viral transmission for infection from any allograft.

MTF MISSION STATEMENT

MTF is a non-profit service organization dedicated to providing quality tissue through a commitment to excellence in education, research, recovery and care for recipients, donors and their families.

CASCADE® AUTOLOGOUS PLATELET SYSTEM & PLATELET RICH PLASMA THERAPY

Interest in fibrin clot techniques and the expanded application of growth factors in soft tissue and bone repair have led to the development of the CASCADE® Autologous Platelet System. Cascade employs platelets and their associated growth factors for clinical applications that require rapid healing and tissue regeneration. The Cascade® system represents *An Evolution In Platelet Therapy*, producing PRFM (Platelet-Rich Fibrin Matrix) that can be delivered arthroscopically and sutured into a repair site to stimulate a healing response. The PRFM implant represents a potentially more precise technique to deliver a more concentrated and volume stable fibrin matrix rich in platelets. Growth factors within the PRFM remain functionally viable throughout the Cascade process and are continually released over seven days.

The Cascade system is also available in separate forms for producing a Cascade Platelet-Rich Fibrin Membrane with improved biomechanical properties and the Cascade Platelet-Rich Plasma Therapy for the treatment of various tendonitis and tendinosis indications.

Only MTF has a completed offering of platelet-rich plasma therapies.

FOR MORE INFORMATION, PLEASE VISIT...

www.MTF.org ✦ www.MTFSPORTS.org ✦ www.mtfports.org/CASCADE

Patient Bill of Rights and Responsibilities

Patient Bill of Rights and Responsibilities:

Patients and families are our number one concern. It is a priority at Memorial Hermann Surgery Center Texas Medical Center that patients and families are as comfortable as possible during their stay at MHSCTMC. The following statement of patient rights and responsibilities is present as the policy for MHSCTMC, but does not presume to be a complete representation of all mutual rights and responsibilities.

Patient Rights:

1. To reasonable access to the medical resources at MHSCTMC without regard to race color, national origin, age, sex, disability or financial status.
2. To receive considerate, respectful, and compassionate care.
3. To be informed about and to participate in decisions regarding your care including the refusal of treatment.
4. To be involved in all aspects of care, and to be allowed to participate in that care.
5. To information about advance directives that would allow you to make your own healthcare decisions for the future and to have your chosen representative exercise these rights for you if you are not able to do so.
6. To be assured that our provision of care for you will not be conditioned on your advance directives.
7. To refuse treatment to the extent permitted by law and to be informed of the medical consequences of your actions.
8. To have clinical and educational information about your treatment in language and terms that you understand.
9. To voice complaints about your care, and to have those complaints reviewed and, when possible, resolved.
10. To have access to organizational leaders if an ethical, cultural or spiritual dilemma presents itself.
11. To information about any research activities that involve your treatment, including benefits and risks, procedures involved, and alternative treatments.
12. To security, privacy, and confidentiality in all patient care areas as you undergo tests or treatment.
13. To know who is responsible for providing your immediate, direct care.
14. To information about the financial aspects of services and alternative choices.
15. To be supported in accessing protective services when requested.
16. To unrestricted communication unless restrictions are a part of your treatment. Any restrictions will be explained to you and will be reviewed as your treatment changes.
17. The surgery center provides for the safety and security of patients and their property.
18. Patients who desire private telephone conversations have access to space and telephones appropriate to their needs and the care, treatment, and services provided.
19. To request an itemized statement of billed services.

Patient Responsibilities:

1. To give your doctor and the MHSCTMC staff complete and accurate information about your condition and care, including the reporting of unexpected changes in your condition to your physician and nurse.
2. To follow the orders and instructions given by your doctor and instructions given by the staff for your care, including keeping follow-up appointments after discharge.
3. To report unexpected changes in your condition to your physician and nurse.
4. To bring a current copy of your advance directives to be placed in your medical record prior to the time of your admission.
5. To accept responsibility for refusing treatment.
6. To show consideration for other patients by following all rules and regulations pertaining to smoking, visitors, noise and general conduct.
7. To accept financial obligations associated with your care.
8. To be considerate of staff members who are caring for you. A mutual spirit of respect and cooperation allows us to serve you best.
9. To advise your nurse, physician, caregiver and/or the business office staff of any dissatisfaction you may have regarding your care.

Patient Satisfaction:

- ❖ Assessment of patient/family satisfaction is most important to us. A patient satisfaction evaluation is given to some of our patients at discharge. Every attempt is made by the nurse to contact each patient within 24-48 hours after discharge.
- ❖ Please let us know how we can improve our service to you.

Physician Ownership:

- ❖ There may be one or more of the physicians providing treatment at Memorial Hermann Surgery Center Texas Medical Center that has an ownership interest in the surgery center. Patients have a right to choose the provider of their healthcare services.

Advance Directive Policy:

- ❖ Memorial Hermann Surgery Center Texas Medical Center does not honor advance directives or living wills. Patients with an advance directive or living will may bring it to the center and in the event of transfer to another facility, we will forward it with the patient's medical records and further consideration will be made at that time.

Voicing Complaints: PATIENT COMPLAINT OR GRIEVANCE

To report a complaint or grievance you can contact the facility Administrator by phone at 713-790-7700 or by mail at: Memorial Hermann Surgery Center TMC, 6400 Fannin Ste 1500, Houston TX, 77030. You may contact Joint Commission by mail at: Office of Quality Monitoring, The Joint Commission, One Renaissance Boulevard, Oakbrook Terrace, IL 60181. Complaints or grievance may also be filed through the Texas Department of State Health Services, Enforcement Unit, PO Box 149347, Austin TX 78714-3199. 1-888-973-0022. All Medicare beneficiaries may also file a complaint or grievance with the Medicare Beneficiary Ombudsman. Visit the Ombudsman's webpage on the web at: www.cms.hhs.gov/center/ombudsman.asp



STATEMENT OF PATIENT RIGHTS AND RESPONSIBILITIES

Each patient shall have a RIGHT to:

- respect, consideration and dignity.
- treatment regardless of your race, creed, national origin or source of payment for your care.
- personal and informational privacy.
- expect the facility, within its capacity, to respond to your request and need for treatment.
- make decisions regarding your health care, in collaboration with your physician.
- information that will enable you to make decisions regarding your treatment. When it is medically inadvisable to give such information to a patient, the information shall be provided to a person designated by the patient or to a legally authorized person.
- accept medical care or refuse medical treatment to the extent permitted by law and be informed of the medical consequences of such refusal.
- be informed of any research, educational, or experimental project that affects your care or treatment.
- know the identity of the physician primarily responsible for your care and to be informed as to the nature and purpose of any procedures to be performed.
- change primary or specialty physicians if other qualified physicians are available.
- include your family, in care decisions or to delegate a specific person or surrogate to make healthcare decisions on your behalf as to the degree permitted by State Law.
- have an advanced directive (such as a living will, health care proxy, or durable power of attorney for health care) concerning treatment or designating a surrogate decision maker with the expectation that facility will honor the intent of that directive to the extent permitted by law and facility policy.
- provide the necessary informed consent prior to the start of a procedure.
- receive information for continuing health care requirements following discharge.
- information regarding physician financial interest or ownership in the surgery center.
- voice a complaint or grievance if you feel your rights or care have been compromised.

Please feel free to contact the Administrator at 832-201-5157 to voice a complaint or grievance. If the venue does not provide you with an acceptable resolution, the Department of State Health Services is the responsible agency for ambulatory surgical center compliant investigations. Any complaints may be submitted to: Director, The Department of State Health Services, Health Facility Compliance Division, 1100 West 49th Street, Austin, Texas 78756, 1-888-973-0022.

Medicare Ombudsman contact: 1-800-MEDICARE; www.cms.hhs.gov/center/ombudsman.asp

Each patient shall have the RESPONSIBILITY to:

- conduct themselves in a respectful manner.
- inform the center of all past illnesses and hospitalizations.
- ask any questions that he/she has concerning treatment or tests.
- keep his/her appointment.
- follow preoperative, operative, and postoperative instructions.
- inform the Center of any changes in their health conditions prior to surgery.
- pay for services rendered.
- be honest in all communications regarding health status, health concerns and billing information.
- secure someone to stay with him/her for 24 hours following surgery.
- tell their doctors about any living will, power of attorney, or other advanced directive.
- inform the Center of any problems following surgery.

Your appointment at Kirby Surgical Center is on:

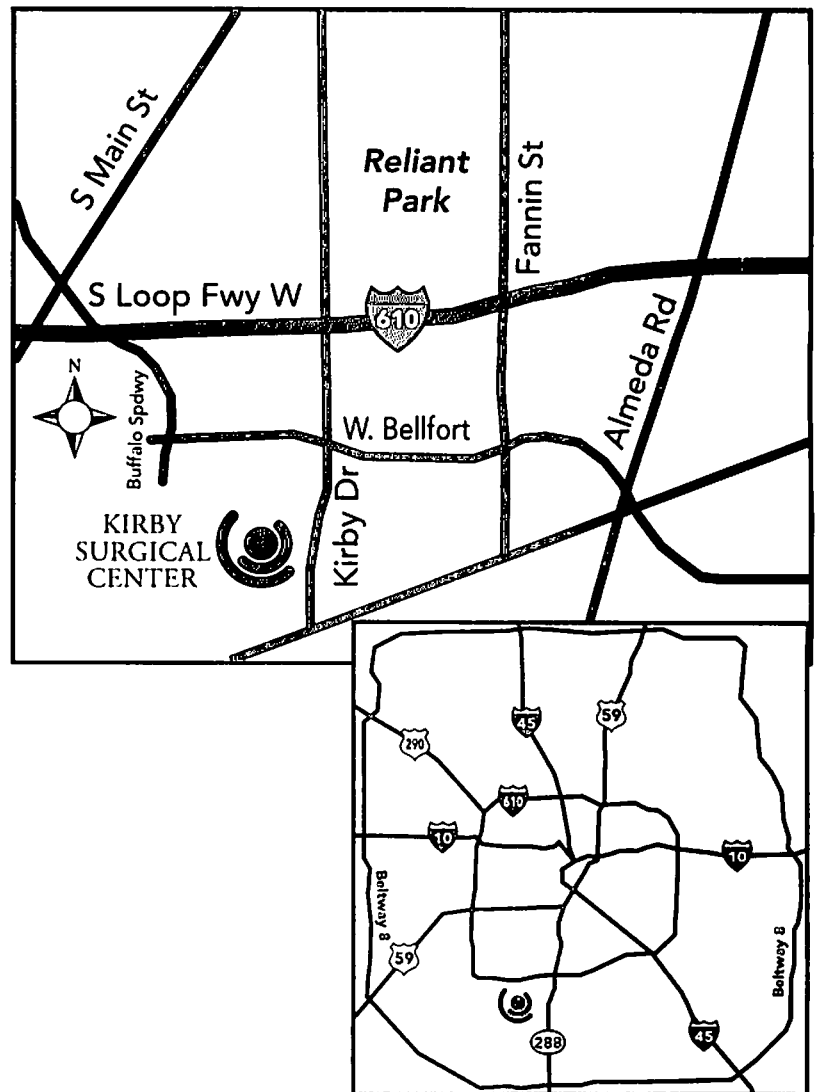
Date _____ Time _____



KIRBY SURGICAL CENTER

9300 Kirby Drive, Suite 100
Houston, Texas 77054

832-201-5157



FROM South via I-45 N:

Take I-45 North toward Houston and merge onto Loop 610W traveling toward Reliant Park. Take the Kirby Drive Exit, stay on feeder until reaching Kirby; then turn left onto Kirby Drive. Travel one half mile South on Kirby Drive and the center will be on the right.

FROM North via US-59 S:

Take US-59 South toward downtown Houston and merge onto TX-288 S toward Lake Jackson/Freeport. Merge onto Loop 610W toward Reliant Park. Take the Kirby Drive Exit, stay on feeder until reaching Kirby; then turn left onto Kirby Drive. Travel one half mile South on Kirby Drive and the center will be on the right.

FROM West via I-10 E:

Take I-10 East toward Houston and merge onto Loop 610 S toward Reliant Park. Take the Kirby Drive Exit, stay on feeder until reaching Kirby; then turn right onto Kirby Drive. Travel one half mile South on Kirby Drive and the center will be on the right.

FROM South via TX-288 N:

Take TX-288 N toward Houston and merge onto Loop 610 W toward Reliant Park. Take the Kirby Drive Exit, stay on feeder until reaching Kirby; then turn left onto Kirby Drive. Travel one half mile South on Kirby Drive and the center will be on the right.