

# PATIENT HANDBOOK AND JOURNAL

## MEDICATIONS

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# PATIENTS WITH DIABETES



## INSTRUCTIONS FOR PATIENTS WITH DIABETES

### To maintain a normal blood glucose level:

- » Follow your prescribed diet
- » Test your blood sugars at least twice daily or as directed by your Diabetes Care Provider

### Contact your Diabetes Care Provider if:

- » Blood sugars are consistently elevated (greater than 180)
- » You have not had a A1C blood test in the last 3 months

## ADJUSTING YOUR DIABETIC MEDICATIONS FOR SURGERY

(Unless your Diabetes Care Provider directed you differently)

Medications	Night-Time Dose (Night Before Surgery)	Morning Dose (Day of Surgery)
Oral Diabetes Medications (pills)	Yes	No
*Lantus Insulin	Yes	½ Dose*
Regular Insulin Humalog or Novalog	Yes	No
70/30 Insulin *NPH Insulin	Yes	No
Byetta	Yes	½ Dose*
Symlin	Yes	No
Insulin Pump	» Continue your usual basal rates or adjust them according to your Diabetes Care Provider's instructions » Inform the hospital staff that you are wearing an insulin pump when you arrive	

\* Type 2 Diabetic Patients:

If your blood sugar is less than 80 on the morning of surgery, do not take your insulin.

Journal entries and questions regarding your diabetes:

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**MEDICATIONS**

You are to continue to take your medications as they have been prescribed.

It is important that you are honest and identify all drugs that you are taking. List all medications that you are taking, including but not limited to, diet pills, over the counter medications such as baby aspirin, multi-dose vitamins, Pepticid, herbal supplements, and minerals. This is important so that any interaction with other drugs during your surgery can be avoided.

Name of Medications	Dose	Taken how often?

# MEDICATIONS PRIOR TO SURGERY



TAKE	DO NOT TAKE (Discontinue 7 Days Prior to Surgery)
<ul style="list-style-type: none"> <li>» Cardiac medications (for the heart)</li> <li>» Anti-reflux medications (Prilosec, Nexium, Protonix)</li> <li>» Seizure medications (anti-convulsants)</li> <li>» Bronchodilators (inhalers and medication for the lungs)</li> <li>» Steroids (prednisone)</li> <li>» Immunosuppressants</li> <li>» Thyroid replacement (Synthroid)</li> <li>» Anti-Parkinson medications</li> <li>» COX-2 antagonists (Celebrex)</li> <li>» Opiates (without aspirin; Tylenol #3, Norco, fentanyl, etc.)</li> </ul>	<ul style="list-style-type: none"> <li>» Chewable antacids (TUMS, Rolaids, etc.)</li> <li>» Diuretics (water pills, furosemide, hydrochlorothiazide)</li> <li>» Oral hypoglycemics (Glucophage, Avandia, Actos, DiaBeta, Mecronase, Glucotrol, Amaryl)</li> <li>» Birth Control Pills &amp; and male or female hormones (including creams or patches)**, such as Emcyt, Estraderm, Estratest, Estrace, Estradiol, Estrogens, Ogen, Premarin, Prempro, Testosterone</li> <li>» Aspirin (and aspirin-containing compounds) such as: Alka-Seltzer, BC Powder, Bufferin, Disalsid (Salsalate), Dolobid (Diflunisal), Ecotrin or Uncoated Aspirin* (81mg-325mg), Excedrin, Fasprin (81mg), Goody Powder, Norgesic, Pepto Bismol, Percodan</li> <li>» Antniplatelets such as: Aggrenox (aspirin + dipyridamole), Plavix* (dopidogrel), Pletal (cilostazol), Trental (pentoxil)</li> <li>» Antithrombotics such as: Ticlid</li> <li>» Anticoagulants, such as: Coumadin (discuss the use of Lovenox with your surgeon—you will receive special instructions and a prescription if you are placed on this medication)</li> <li>» Non-steroidal Anti-inflammatory Drugs (Ibuprofen, Motrin, Advil, Mobic, Orudis, etc.)</li> <li>» Weight reduction agents</li> <li>» Vitamins such as: A, C, E, K, Multivitamins, Fish Oil, / Omega 3,6,9, Juice Plus, CoQ10</li> <li>» Herbs such as: Echinacea, Ephedra, Garlic, Ginkgo, Ginseng, Kava, St. John's Wort, Valerian, Saw Palmetto</li> <li>» Supplements such as: Glucosamine Chondroitin, MSM</li> <li>» Stop all non-steroidal anti-inflammatory (NSAID) medications, such as: Advil (ibuprophen), Aleve (naproxen), Anaprox (naproxen), Ansaïd (flurbiprofen), Arthrotec (voltaren + cytotec), Cataflam (diclofenac potassium), Clinoril (sulindac), Daypro (oxaprozin), Diclofenac (voltaren), Feldene (piroxicam), Ibuprofen (motrin), Indocin (indomethacin), Lodine (etolodac), Meclomen (meclofenamate), Mediprin (ibuprofen), Mobic (meloxicam), Naprelan (naproxen), Naproxyn (naproxen), Nuprin (ibuprofen), Orudus (ketoprofen), Oruvail (ketoprofen), Relaten (nabumetone), Tolectin (tolmetin)</li> </ul>

\*If you have Heart Stents and take Plavix and Aspirin: DO NOT STOP ASPIRIN; DO NOT STOP PLAVIX UNTIL SEEN BY A CARDIOLOGIST PRIOR TO SURGERY

\*\* You may wish to use another form of birth control at this time.

CONTACT YOUR MEDICAL DOCTOR FOR INSTRUCTIONS if you take any of the following medications:  
Adderall, Cytosan, Enbrel, Imuran, Librax, Librium, Methotrexate, Remicade

Remember: Stop only the types of medications mentioned above—DO NOT STOP taking other prescription medications.

<b>STOP</b> 7 days before Surgery	Ok to take 7 days Before Surgery	<b>STOP</b> 3 days before surgery	Ok to take 3 days Before Surgery
Date:		Date:	

Journal entries and questions regarding medications:

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Dr. \_\_\_\_\_ would like you to take Acetaminophen (Tylenol) before surgery because it allows your body to tolerate pain better. Taking it for 24 hours before surgery will help you to feel less pain after the surgery and decrease the need for IV pain medication after surgery.

You will take two regular strength Acetaminophen (Tylenol) to equal 650 mg, by mouth every 6 hours, starting the day before your surgery.

**ATTENTION: DO NOT TAKE TYLENOL IF:**

- » You are taking any medicine that already contains Acetaminophen (Tylenol). Please check with your doctor or pharmacy if you are not sure.
- » Please let your surgeon know if you have ever been advised not to take Acetaminophen in the past
- » You have liver disease.

Date of Surgery: \_\_\_\_\_

Date to Start Acetaminophen (Tylenol): \_\_\_\_\_

Check off Time Taken	Time of day
	11:00 am
	5:00 pm
	11:00 pm
	5am day of surgery

\*If your surgery is at 7am, take your 5am dose with a small sip of water

# MEDICATION RECORD SHEETS



Please keep this record until after your 1st Post-Op Visit, unless directed otherwise:

## MEDICATIONS:

First, list the medications that you are taking, and when you take them:

Name of medication:	Dose:	Frequency:
Example: Aspirin	2 – 80 mg tablets	Every 6 hours

Week 1: Record the following information when you have taken your medication:

Medication	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time
Ex: Aspirin	2/9 8am 2 tabs						

Week 2: Record the following information when you have taken your medication:

Medication	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time
Ex: Aspirin	2/9 8am 2 tabs						

**TRACK THE FOLLOWING ITEMS WELL:**

Week 1: Record the following information:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time
Fluid Intake	2/9 10am 8 oz water 2/9 2pm 1 can ginger ale, etc						
Urine/Bowel Movements	2/9 6 am Urine light yellow 2/9 12 pm b.m.						
Temperature 1x/day	2/9 12 pm 99.9						
Walking with walker/ distance	2/9 12 pm 50 ft						



Week 2: Record the following information:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time
Fluid Intake							
Urine/Bowel Movements							
Temperature 1x/day							
Walking with walker/distance							



**EXTRA RECORD SHEETS:**

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time

## EXTRA RECORD SHEETS:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time	Date/Time