

Mark Ayzenberg, MD - Ankle Surgery Checklist

Patient Name: _____ Date: _____

Procedure: () R () L () Bilateral Time: _____ Sx Date: _____

ARTHROSCOPY

- | | |
|---|--|
| () 29897 Debridement, limited | () 29904 Arthroscopy Subtalar Joint, removal loose/FB |
| () 29898 Debridement, extensive | () 29905 Arthroscopy Subtalar Joint, synovectomy |
| () 29898 Chondroplasty | () 29906 Arthroscopy Subtalar Joint, Debridement |
| () 29895 Synovectomy, partial | |
| () 29894 Removal loose body | |
| () 29891 Excision OCD talus or tibia inc. drilling | () 27899 Unlisted – ACI implantation |
| () 29892 Repair large OCD talus/tibia or repair talus/tibia fracture with scope guidance +/- internal fixation | |
| () 20999 Unlisted – Arthroscopic OCD allograft (micronized cartilage, juvenile particulated, DeNovo, Biocartilage) | |
| () 20999 Unlisted – Bone Marrow Aspirate Harvest | () Other: _____ |

OPEN

- | | |
|---|---|
| () 27695 Ankle ligament repair, primary | () 27766 Medial Mal ORIF |
| () 27696 Brostrom Procedure | () 27792 Lateral Mal ORIF |
| () 27675 Peroneal tendon repair | () 27769 Posterior Mal ORIF |
| () 27676 Peroneal tendon repair (w/fibula osteotomy) | () 27814 Bimal ORIF |
| () 27650 Achilles tendon repair | () 27822 Trimal ORIF w/o Posterior Mal Fix |
| () 27652 Achilles tendon repair w/ graft | () 27823 Trimal ORIF w/ Posterior Mal Fix |
| () 27654 Revision Achilles tendon repair +/- graft | () 27827 Pilon Fx ORIF Tibia only |
| () 20680 Hardware/deep implant removal | () 27828 Pilon Fx ORIF Tib + Fib |
| () 27640 Excision Tibia bone, partial | () 27829 Syndesmotic Dislocation ORIF |
| () 27641 Excision Fibula bone, partial | () 27758 Tibial Shaft Fx ORIF |
| () 28446 Open Osteochondral Autograft Talus | () 27759 Tibial Shaft Fx IMN |
| () 28899 Unlisted for Open Osteochondral ALLOgraft Talus or repair osteochondral lesion/dome fx +/- fixation | |
| () 27899 Unlisted Procedure leg/ankle | () Other: _____ |

PRE-OP PREP (Please have meds given and DME fitted in advance of surgery)

Preop Meds: () Chlorhexidine wash x 3 days preop and morning of surgery () Other: _____

DME: () CAM Walker () Leg elevator Pillow () Ice Machine/Cryocuff () Other: _____

Imaging: () Ankle MRI () Ankle CT () Ankle X-rays: _____ () Other: _____

PT: () Crutch training

SURGERY

Facility: () Inspira MH () Surgical Studios () Vineland ASC () Inspira Vineland () Inspira Elmer

Anesthesia Block: () No () Yes

Intra-op Meds: () Ancef 2gm (3gm for >120kg) (Vanco if allergic to Ancef () Exparel () Vanco Powder 1gm

Equipment: () Ankle Scope Tray () Open Foot/ankle tray () Ortho major () Bone clamp set () Shukla screw removal

Implants: () Trauma Rep: _____ () Sports Rep: _____ () Biologics/Cartilage Rep: _____ Other: _____

Allografts/Biologics: _____

Position: () Supine () Lateral () Prone

Positioning Equipment: () Ferkel Thigh Holder () Gould Ankle Traction Device () IV Pole for 3L saline pump

() 5 blankets () Radiolucent Triangles () Bean bag () Flat Jackson table () Other: _____

Fluoro: () N () Y: () Large C-arm () Mini C-arm

POST-OP CARE (Please ensure patient has scripts for these before surgery)

Post-op Meds: () Aspirin 325mg daily x 30 days () Pain Medicine: _____ () Other: _____

Post-op X-ray Orders: () Supine 3 view ankle x ray () Other: _____

Post-op Follow-up Appt: () 1 week () 2 weeks () Other: _____

Post-op PT Protocol: _____