

## American Hip Institute Surgical Guide

### Periacetabular Osteotomy

You are entering a mutual relationship in which we are committed to giving you your life back. This booklet was developed as a resource and teaching tool pertaining to your procedure.

An important part of your recovery is your commitment to the care and rehabilitation of your improved hip. We understand that the preparation and recovery process can be challenging, and we encourage you to read this packet and highlight questions or notes that you would like to discuss with our clinical staff during your pre-operative appointment.

Please bring this booklet to your pre-operative appointment so we can review your questions. Thank you for allowing us the opportunity to address your healthcare needs. You will have a dedicated team helping you through the surgery process. The team consists of your surgeon, a nurse practitioner, physician assistant, surgery scheduler, insurance coordinator, and administrative assistant. If you need to reach any member of your surgical team, please contact our office at (833) 872-4477.

Date of Surgery:

Location of Surgery:

**Greater Chicago Center  
for Advanced Surgery**

999 E. Touhy Ave, Suite 350  
Des Plaines, IL 60018  
(630) 970-0970

**St. Alexius Medical Center**

1555 Barrington Road  
Hoffman Estates, IL 60169  
(847) 843-2000

**North Shore Surgical Suites**

8400 Lakeview Pkwy  
Pleasant Prairie, WI 53158  
(262) 455-7548

**Good Samaritan Hospital**

3815 Highland Ave  
Downers Grove, IL 60515  
(630) 275-5900

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## Pre-Surgical Checklist

### Your Pathway to a Successful Surgery

In order for your surgical experience to proceed smoothly, each of the following items must be completed prior to the day of your procedure:

- Please have all physical therapy records, relating to the surgical hip, from the last year faxed to our office at 630-323-5625. If you do not have recent records for your surgical hip, please let us know immediately as this may delay surgery.
- Requests for Work/ School notes or FMLA paperwork should be faxed to our office at 630-323-5625: As soon as your paperwork is received there will be a 7-10 business day turn-around.
- Attend your pre-operative appointment. You will also receive your brace and crutches/walker.
  - ✓ If you would like a handicap placard application for the state of Illinois, one can be provided to you at this appointment.
- One week before surgery it is necessary to stop taking the following medicines unless otherwise directed by your medical physician:
  - ✓ All anti-inflammatory medicines: (Aleve, Advil, Motrin, Ibuprofen, Voltaren, Naprosyn, Celebrex, etc.)
  - ✓ Nutritional supplements: (Vitamin E, Ginseng, Ginko Biloba, Garlic, Ginger, etc.)
  - ✓ All GLP-1 agonists that are taken weekly (Ozempic, WeGovy, Mounjaro, etc.)
- GLP-1 agonists that are taken daily (Rybelsus, Victoza, Byetta, etc.) should be held the DAY OF surgery.
- Consult with your prescribing physician for the appropriate and safe discontinuation of any medication before surgery, particularly:
  - ✓ Aspirin, Coumadin, Warfarin, Plavix, Heparin, Lovenox and/or any other blood thinning medications: These medications need to be safely discontinued at very specific times before surgery. Some medical conditions can be life threatening if these medicines are stopped without appropriate timing and precautions.
  - ✓ Rheumatologic medicines such as Enbrel and Humira: Discuss with your Rheumatologist as some of these medications need to be discontinued one month prior to surgery.
- Discontinue use of nicotine and alcohol: It is the American Hip Institute's policy that all patients remain nicotine and alcohol free for at least 1 month prior to surgery and abstain from nicotine and alcohol for at least 3 months after surgery. Patient's may be subject to testing to ensure compliance with the above policy.
- Secure ROM tech or stationary bike for postoperative use: Please let us know if you would like the ROM tech. We will send Kinnick Medical an order and ROM TECH will contact you if it is *approved* before your scheduled surgery to discuss delivery, set up, and payment. For any

delivery questions related to ROM TECH please call 888-457-6430. For any denial information and status updates please call our office.

- Please let our office know if you would like to rent the cold compression therapy system. This is recommended to optimize comfort during recovery. Cold compression uses state-of-the-art technology to deliver therapeutic cooling without ice. It is the most convenient way to apply cold therapy and can improve comfort during recovery.
- Arrange for transportation for the day of surgery: You will not be permitted to drive yourself. Your surgery will be cancelled if this is not arranged. Some surgical centers offer transportation at no additional cost as long as you can bring someone above the age of 18 to accompany you. Please let your clinical concierge know if you would like transportation services for the day of surgery. If the surgical center you are scheduled at does not offer transportation, it is your responsibility to have transportation arranged.
- Schedule your first physical therapy session: In some cases, you will be receiving physical therapy at home for the first two weeks and then transition to outpatient physical therapy. Please schedule your appointments and arrange the necessary transportation. Your physical therapy prescription will be provided to you in your surgical folder on the day of surgery. Please note that AHI does offer physical therapy in our office, should you wish to schedule an appointment please call our office at (833) 872-4477. Please take your physical therapy prescription and protocol to your first therapy session.
- Complete your pre-surgical questionnaire online: You will receive an email with a personalized link to your questionnaire. This will help us track your personal improvement post-operatively in order to provide you with the highest quality care. (See: Clinical Outcomes Program).
- Begin protein supplementation. Our recommendation is to supplement with protein twice per day for four weeks prior to surgery and four weeks after surgery. Prioritize protein shakes that are low in sugar and carbohydrates, but high in protein.
- You will need to confirm that there is an adequate support structure for you to do well after surgery. This can be a spouse, parent, child, friend, anyone who is available to help physically and emotionally through this surgery.

## Preoperative Guidelines

### Two Days Before Surgery

- Shower with Hibiclens® antibacterial soap two nights before and the morning of your surgery. Hibiclens® can be purchased as an over-the-counter item at your local pharmacy.
  - ✓ Avoid using Hibiclens on the face, genitals or mucous membranes.
  - ✓ You may use regular shampoo and conditioner on your hair.
  - ✓ Do not use lotions, powders or deodorant after cleansing with Hibiclens.
  - ✓ If you have any allergies or sensitivities to soaps, you may use your own soap. Please discuss with your health care team at your pre-operative visit.
  - ✓ Do not shave near the area of your surgery for 3 days prior to the procedure.
  - ✓ Follow your normal oral care routine.
  - ✓ DO NOT wear make-up or nail polish the day of surgery.
  - ✓ Use clean towels and bedding before and after the procedure.

### One Day Before Surgery

- Drink 2 bottles of Ensure Pre-Surgery Clear Nutrition Drink before going to bed, 30 minutes apart, and not after midnight. Doing so helps recovery by reducing nausea and vomiting after surgery, reducing pain after surgery, and reducing your time in the surgical facility. DO NOT TAKE ENSURE IF YOU ARE DIABETIC.
- Alternatively, regular (not low -sugar) Gatorade can be consumed instead of Ensure Pre-Surgery Clear Nutrition Drink. DO NOT TAKE BOTH. Any color Gatorade is acceptable, *except for red*. Drink 24 oz of regular Gatorade before going to bed, and not after midnight. DO NOT DRINK GATORADE IF YOU ARE DIABETIC.
- Do not eat or drink anything after midnight before your surgery, except as noted below, as this can result in surgical cancellation. Gatorade or Ensure Pre-Surgery Drink are the only exceptions, as detailed above. This information will be provided to you during your pre-operative phone call from the surgery center. Your stomach needs to be empty for surgery. You will be instructed as to which of your medications can be taken on the morning of your surgery with small sips of water only. If you are diabetic, do not take any oral medication for your diabetes unless otherwise instructed by your medical team.
- A registered nurse will call you one day prior to surgery. This will take place on Friday for a Monday procedure, between 3:00 p.m. and 7:00 p.m. to inform you of your arrival time at the surgery center or hospital and to answer any additional questions.

### Day of Surgery

- Drink 1 bottle of Ensure Pre-Surgery Clear Nutrition Drink 4 hours before your surgery start time. DO NOT TAKE ENSURE IF YOU ARE DIABETIC.

- Alternatively*, drink 12 oz of regular Gatorade (not red color) 4 hours before your surgery start time. DO NOT DRINK GATORADE IF YOU ARE DIABETIC.
- Do not eat or drink anything else unless instructed otherwise.
- Please bring your hip brace and crutches with you to your surgical location.
- Dress comfortably.
- Staff will guide you to the pre-operative unit. Here you will be asked to change into a gown and be prepared for surgery:
  - ✓ The site of surgery will be shaved and prepped.
  - ✓ You will need to remove contact lenses. Please bring glasses if needed.
  - ✓ Any dentures or partials will need to be removed.
  - ✓ Alert the RN of any allergies that you may have (penicillin, latex, iodine/shellfish, etc.)
  - ✓ An IV will be inserted for access, fluids, antibiotics and medications. You will be given a cocktail of medications preoperatively to minimize pain and inflammation.
  - ✓ Family members or your designated contact person will be directed to the waiting room to remain during your surgery. Your family can expect one of our team members to come and speak with them approximately 2 hours after the start of surgery.
- The anesthesia team will review your medical history and explain the methods for anesthesia and the risks and benefits involved.
- You will be seen by your surgeon prior to transfer to the operating room to answer any last-minute questions and have the surgical site signed off.
- Staff will take you to the operating room. The surgical team will provide warming blankets, check that you are comfortable, and ensure all body parts are safely positioned and well-padded.
- After surgery is completed, you will be taken to the recovery area by the anesthesia team and the nurses. Our staff will call you to let you know the procedure has finished.
- In the recovery area, an experienced recovery room nurse will closely monitor you.
- As you wake up from the anesthesia, anyone who has accompanied you is able to come back to the recovery area, once indicated by the nursing staff.
- After some time in the recovery area, you will be transferred to the orthopedic floor. Here, nurses will take care of you, and physical therapy will also come to see you.

## Post-operative Care

### Medications

- Medications: You will receive a personalized medication calendar at your pre-operative appointment. Please carefully review the calendar and follow the medication instructions provided by our team to manage your pain levels after surgery.
  - ✓ If you have any medication allergies, or currently take any medications, please write these down and inform your provider at your preoperative appointment.
  - ✓ Please ensure that you have received and picked up your medications prior to surgery. In some cases, your pain medication may not be fillable by a pharmacy until 2–3 days before surgery.
  
- Please note that a limited amount of pain medication can be dispensed through our office due to state and insurance guidelines.
  - ✓ You will be issued a prescription for pain medication and one (1) refill.
  - ✓ If you utilize the allotted refill amount, you must schedule an appointment and obtain your medication from a Pain Management Specialist or your Primary Care Physician.

### Wound Care & Bandages

- There will be one curvilinear incision at the level of your pelvis. This will be closed internally with sutures; no sutures or staples will be present on the outside of the skin.
  
- There will be a waterproof 7-day island bandage applied to your main incision. This bandage will be re-applied after 7 days with an additional bandage provided to you either by the hospital or Home Health.
  
- Please keep your incision clean, dry and intact.
  
- You are allowed to shower starting three days after surgery.
  - ✓ In the shower, let the water run off the incisions.
  - ✓ Do not apply any soap to, or scrub, the incisions.
  
- Do not utilize swimming pools, hot tubs, or bathtubs until cleared by the medical team
  
- If the wound begins to have drainage, redness, odor, or is extremely painful, please call our office as soon as possible.
  
- Our office cannot treat wound concerns based on photos; we require that all wounds be checked at our headquarters office by our clinical staff.
  
- Please do not apply any creams, ointments, or lotions to your incisions.

## Brace & Crutches

- Please bring both your crutches and hip brace with you to your surgery
- Please wear the brace and use the crutches at all times as indicated by our medical team.
  - ✓ You may take the brace off when changing clothes, showering, and if they instruct you to do so in physical therapy.
  - ✓ The brace is recommended to be worn over clothing.

## Home Health

- Home Health is available to most patients. The case manager at the hospital will help arrange this.
- If you qualify for Home Health, you will receive both nursing visits and physical therapy visits for the first 2 weeks in the comfort of your own home.
- At the time of discharge, you should be aware of the home health company that will service you. If you have not received this information and are set to discharge, please contact the hospital case manager.

## Concerning Symptoms

- If you experience any of the following symptoms, please call our office immediately.
  - ✓ Fever greater than 101° F
  - ✓ Uncontrollable pain
  - ✓ Excessive bleeding
  - ✓ Persistent nausea and vomiting
  - ✓ Excessive dizziness
  - ✓ Persistent headache
  - ✓ Red, swollen, oozing incision sites
- If you experience any of the following symptoms, please call our office immediately. Be prepared to proceed to your local Emergency Room (preferably, St. Alexius Medical Center).
  - ✓ Chest pain
  - ✓ Shortness of breath
  - ✓ Fainting or loss of consciousness
  - ✓ Persistent fevers greater than 101° F
  - ✓ Weakness, numbness, inhibition of motor skills in the operative extremity
  - ✓ Red, swollen, or painful calf and/or increased numbness or tingling in your foot

## Physical Therapy

- The American Hip Institute requires patients to attend physical therapy 2–3 times per week, for up to 16 weeks after surgery.
  - ✓ A folder will be given to you on the day of surgery that contains the physical therapy script and protocol.
  - ✓ Our physical therapy protocol can also be found on our website ([www.americanhipinstitute.com](http://www.americanhipinstitute.com)).

## Travel

- Please let our team know if you plan to travel (e.g., via airplane or a car ride greater than 2 hours) within the first 6 weeks after surgery.
- In most cases, our office will send the injectable, Lovenox, to be administered before travel to prevent blood clots if travel is anticipated within the first 6 weeks following surgery.
- Please also always wear compression stockings when traveling and remember to take frequent breaks to stand up and walk around.



## Returning to work

1. Returning to work is different for each individual and depends on your recovery process and the type of work you perform.
2. Discuss your job tasks and responsibilities with your healthcare team so you can start talking with your employer about returning to work before surgery.
3. Make sure you provide time to go to outpatient therapy.
4. Return to Work Timelines for Low-to-Medium Physical Demands:
  - ✓ Sitting job: 1-3 weeks after surgery
  - ✓ Sitting and standing job: 1-4 weeks after surgery
  - ✓ Standing: 1-4 weeks after surgery
5. Return to Work Timeline for High Physical Demands / Heavy Labor
  - Full, unrestricted duty will be determined on an individual basis, usually between 3-6 months after surgery.
6. Family Medical Leave Act (FMLA) Paperwork
  - ✓ Many patients require completion of FMLA paperwork for their job.
  - ✓ Please allow 7-10 days for completion.
  - ✓ Please submit paperwork prior to your preoperative appointment.
    - Fax to: (630) 323-5625
  - ✓ Make sure your paperwork indicates your name and date of birth and includes a job description, which details specific tasks related to physical demands.

## Frequently Asked Questions

1. What should I expect post-operatively?
  - ✓ *Pain: There will be hip pain following both the hip arthroscopy and periacetabular osteotomy. The pain after the periacetabular osteotomy will be more severe. We will provide medications to assist with the pain, but they will not be able to entirely relieve it.*
  - ✓ *Weakness: There will be weakness following the surgery due to both pain and muscle soreness. The weakness will predominantly be in hip flexion. This weakness will improve as you continue to heal and work with physical therapy as an outpatient.*
  - ✓ *Numbness: There may be some numbness in the foot as well as on the front and outside of the thigh. This is to be expected and usually improves over the course of several days but can take longer in some cases.*
  - ✓ *The hip arthroscopy will be a same day surgery, the periacetabular osteotomy will have an expected hospital stay of 1 night in the hospital. You will require assistance and care from family/friends after discharge from the hospital for several additional days.*
  - ✓ *In the hospital we will get additional imaging including postoperative X-Rays and sometimes a CT scan.*
  - ✓ *Prior to discharge from the hospital, you will need to have to be deemed by physical therapy to be safe to go home. You will need to be able to tolerate a solid diet and be passing gas (flatus). Your pain will need to be manageable on your oral prescription (no IV pain medication).*
  - ✓ *We will see you in the office at the two-week visit for additional x-rays and to remove the sutures from the hip arthroscopy.*
  
2. What kind of movement/activity restrictions will I have after my Periacetabular osteotomy?
  - ✓ *Walking with crutches with limited weight-bearing of operative extremity (20lbs) for the first 6 weeks after surgery. Physical therapy will help you with this*
  - ✓ *You will likely progress to full weight bearing at the 6-week time point after Dr. Kuhns reviews your 6-week postoperative X-rays. This may be delayed if it looks like there is a delay in bone healing.*
  
3. Is Physical Therapy required?
  - ✓ *Yes, Physical Therapy should be started on the first postoperative day following your hip arthroscopy. After the periacetabular osteotomy, you will most likely have home health set up by Advocate Hospital. This depends on insurance approval. If home health is approved, you will have a nurse and therapist coming over for 2 weeks after surgery. At 2 weeks, you will resume outpatient physical therapy.*
  
4. What medications do I take in between hip surgeries

- ✓ We will prescribe pain medication after your hip arthroscopy. Generally, we want you to hold (do not take) anti-inflammatory medication (Meloxicam) or blood thinners (Aspirin) before the PAO surgery as this can increase intraoperative blood loss. You will start these medications after the PAO. This may change depending on the time between the hip arthroscopy and PAO, so we will make sure to clarify this during your preoperative appointment.
5. How soon can I drive after my surgery?
- ✓ If Left Side:  
Do not drive until off narcotic pain medications completely and you feel comfortable mobilizing, after that, no restrictions.
  - ✓ If Right Side:
  - ✓ As this is your driving foot, we recommend not driving for the initial 6 weeks until you are ambulating safely without crutches. You need to be confident to "slam on the brakes" if necessary.
  - ✓ Note: Driving or pressing on your brakes abruptly will not hurt your surgical result, it is a matter of your confidence level in the operative extremity that we take into consideration, as it is natural to favor the operative side during the initial recovery period.
  - ✓ When comfortable after the 6-week mark, test driving in a parking lot to determine your comfort level and progress from there.
  - ✓ Do not drive until off narcotic pain medications completely.
6. How soon can I fly/travel after my surgery?
- ✓ We recommend delaying 24-48 hrs after discharge from the hospital prior to attempting travel
  - ✓ Flying: If within the first 6 weeks of your procedure, and on aspirin for DVT prophylaxis, we will prescribe one-time dosing of Lovenox by injection the day of your flight for blood clot prevention.
  - ✓ Lovenox is not necessary if on Eliquis for DVT prevention.
  - ✓ Vehicle: We recommend frequent stops every 1-2 hrs to mobilize and perform frequent calf pumps while in the vehicle (flex/pointing the toes).
  - ✓ Note: The medication you receive for DVT prevention is determined by your individual risk profile and is recommended after your medical pre-operative clearance, either by your PCP at home, or here at The American Hip Institute.
7. When should I have my pre-operative clearance done?
- ✓ Within 30 days of your surgery.
8. Will I need to have stitches removed?
- ✓ Your stitches from the hip arthroscopy will need to be removed at your first postoperative visit. No suture removal is needed for the PAO incision. All sutures placed are underneath the skin and will dissolve in roughly 60-90 days.

- ✓ You will also have a topical skin adhesive overlying the top of your incision as well that will dissolve roughly 2 weeks after your procedure.
  - ✓ Do not submerge your incision in water for the first 6 weeks after surgery.
  - ✓ Showering and letting water run over it is not an issue, gently pat dry.
  - ✓ If you have concerns about your incision, please contact our team immediately
9. How long should I continue to take prescribed (narcotic) pain medication after my surgery?
- ✓ The prescribed medication is important for pain control in the immediate postoperative setting. After you leave the hospital, you should start taking less medication and only on an "as needed" basis. Consider taking the medication at bedtime to help with sleep as well as 30 minutes to 1 hour before increased activity or physical therapy. The goal is to be off prescribed pain medication 1-2 weeks after the procedure.
10. How long should I continue to take Tylenol after my surgery?
- ✓ For as long as you are experiencing pain and/or swelling it is safe to continue Tylenol on a scheduled basis. After the 2-4-week mark is when we expect you will be able to taper yourself off this medication.
11. How long before the post-operative swelling improves?
- ✓ Swelling can last up to six months after the surgery and is to be expected. We prescribe scheduled anti-inflammatories for some patients during the first 6 weeks if not contra-indicated.
  - ✓ Once you finish the prescription, you can transition to Ibuprofen/Aleve if desired for continued management.
  - ✓ If you were not prescribed an anti-inflammatory by our team, do not begin Ibuprofen/Aleve until you are seen by Dr. Kuhns at the 6 week post operative visit.
12. How long do I have to wear my compression stockings?
- ✓ Please wear for the first 4 weeks after surgery, or until your normal level of mobility resumes. These will also assist with mitigating post-operative swelling.
13. How long do I have to be on medication for DVT prevention?
- ✓ 6 weeks. You will be prescribed a personalized DVT protocol based on your specific risk factors. This will include either Aspirin or Xarelto (Rivaroxaban) or Eliquis. It is imperative that you take this medication as prescribed. If you cannot tolerate the medication you will need to contact our team for an alternative prescription.
14. How do I wean off crutches?
- ✓ Work on this with your therapist after x-ray review by Dr. Kuhns
  - ✓ While using the crutches start putting progressively more weight on your operative leg until you are putting full weight on your leg and using the crutches for balance. This may take 7-10 days to discontinue use of an assistive device.

- ✓ It is important to still use crutches until you have good quadriceps control and are walking with minimal discomfort and minimal limping.
  - ✓ It is normal to have a slight increase in discomfort and possibly some swelling as your operative leg adjusts to the increasing forces of your body weight.
15. My incision edges are elevated/the surrounding area feels firm/and I am noticing a little numbness, is this normal?
- ✓ This is normal and expected.
  - ✓ The type of closure we utilize allows for the best cosmetic result. To do so, the edges of the skin need to be elevated and will flatten with time.
  - ✓ Healing occurs from the inside-out, thus with time the edges will smooth down. Firmness is related to the healing process and will also resolve with time.
  - ✓ Numbness around the incision and into the distal thigh is not uncommon after surgery, due to irritation of the superficial cutaneous sensory nerves after the insult of surgery. This will also be resolved with time.
  - ✓ Pro Tip: For the best cosmetic result for your incision, please utilize sunscreen with exposure to sunlight as UV light will pigment your scar.
16. When can I start to use scar cream on my incision?
- ✓ Please refrain from any topical creams for at least the first 6 weeks.

As part of our commitment to provide you with the highest quality of care, the American Hip Institute has established a dedicated Clinical Outcomes Program.

#### **What are clinical outcomes?**

- Clinical outcomes measure the result of a treatment plan or surgical intervention.*
- In orthopedics, we track your progress by concentrating on your level of pain, how well you're moving, and your overall quality of life as a result from our care.*

#### **Why is the Clinical Outcomes Program important?**

- Our goal is to provide exceptional orthopedic care to all of our patients.*
- Tracking clinical outcomes allows us to measure the quality of care tailored to each individual.*
- It is an evidence-based process that gives us insight into which factors affect outcomes and why some patients have better long-term outcomes than others.*
- The payers of healthcare services (e.g., insurance companies) are requesting this information and we need to comply with such reporting requirements.*

#### **How does this involve me as a patient?**

- You will receive automatic reminders (with a link) asking you to complete brief questionnaires for progress updates.*
- Your doctor wants you to complete these questionnaires promptly when received. Your timely response is very important and helps your doctor to track your results and progress over the short and long term.*

#### **What do I need to do to participate?**

- It is essential that we have your correct contact information (i.e., current email address and mobile number).*
- By providing your contact information, you are consenting to receive messages regarding your healthcare information and other healthcare-related services at the email address and/or mobile number(s) provided.*
- You may revoke your consent at any time by unsubscribing via text, modifying your settings in your user account, or by notifying your doctor in writing.*
- By providing your mobile number, you may be charged for text messages by your wireless carrier.*
- In a medical emergency, you should not email or text; you should call 911 immediately.*

#### **How secure is my information?**

- We follow all federal guidelines for patient privacy. All patient information is protected in accordance with HIPAA electronic data storage on secure servers.*
- Your contact information will never be shared or used for any reason other than the purpose of maintaining our relationship with you regarding your healthcare.*
- Your contract information is not stored in a file that contains confidential identifiers, such as your Social Security number.*
- You will never receive requests for your Social Security number or other personal information related to your identity.*
- Your contract information is not linked to personal information.*

## Review Our Team

If you are happy with your treatment, please spread the word! You may review our team using any of the following services and we appreciate your taking the time to share your experience.

- Google**
  - ✓ Sign into Google (Gmail) account
  - ✓ Click on the small pencil to write a review
  - ✓ Follow instructions to create a public google + account if necessary
  - ✓ Select number or stars
  - ✓ Insert review in the box
  - ✓ Select publish
- Yelp**
  - ✓ Select Write a review
  - ✓ Select number or stars
  - ✓ Insert review in the box
  - ✓ Select sign up and Post – Either sign up or sign in to your Yelp account
- Vitals**
  - ✓ Select number of stars (overall & specific)
  - ✓ Insert Title of Review
  - ✓ Insert Review
  - ✓ Select Submit review
- Health Grades**
  - ✓ Select number of stars or sliding scale
  - ✓ Select Submit Survey
- Rate MD**
  - ✓ Select add rating
  - ✓ Select number 1-5 in categories
  - ✓ Fill in any comments
  - ✓ Check box to verify comments
  - ✓ Select Add New Ratings
- Facebook**
  - ✓ Login to account or create one
  - ✓ Select number of stars
  - ✓ Fill in any comments
  - ✓ Select Review
  - ✓ Like us and Follow us on Facebook and Instagram



## Your Questions

*Please write down questions here that you would like the American Hip Institute team to answer or discuss during your preoperative visit.*