

Dr. Lance E. LeClere – VUMC Orthopaedic Surgery & Sports Medicine



**Vanderbilt Wilson County Hospital
Surgery Center
1401 W Baddour Pkwy – Lebanon, TN**



**Vanderbilt Wilson County Hospital
Main Hospital
1411 W Baddour Pkwy – Lebanon, TN**

Important Dates:

Your Surgery is scheduled on : _____

Your First Post-Op Appt with Dr LeClere is on: _____

You should begin physical therapy on: _____

Please begin to coordinate your PT appt prior to surgery.

Your COVID Test needs to be completed on: _____

**Please complete your Covid test at VWCH Outpatient Services or
Walgreens on W Main St in Lebanon (by appointment)**

Any Bloodwork should be completed by: _____

**You will hear from the Hospital on _____ regarding your
surgery time and arrival instructions.**



About Dr. LeClere

Dr. Lance E. LeClere, CDR MC USNR is an Associate Professor Orthopaedic Surgery at Vanderbilt University Medical Center, and Associate Professor Orthopaedic Surgery at the Uniformed Services University of the Health Sciences. Dr. LeClere received his undergraduate degree from the University of Notre Dame and attended medical school at Loyola University Chicago Stritch School of Medicine. He completed his orthopaedic surgery residency at Naval Medical Center San Diego, followed by a sports medicine and shoulder surgery fellowship at Massachusetts General Hospital/Harvard Combined Program. During his training and early career, Dr. LeClere served 15 years on Active Duty in the United States Navy.

During this time, he was a staff surgeon, Director of Orthopaedic Research, and Assistant Program Director for the Orthopaedic Surgery Residency at Naval Medical Center San Diego.

From 2012 to 2015 he also served as the Orthopaedic Consultant to the US Navy West Coast SEAL Teams and BUDs. From 2015 to 2021 he was stationed at the US Naval Academy and was the Head Team Physician for Naval Academy Varsity Athletics, as well as an Orthopaedic Consultant for the White House Medical Unit and Office of the Attending Physician at the US Capitol. In September of 2021 he began civilian practice at Vanderbilt University Medical Center. Dr. LeClere is on the editorial board for the American Journal of Sports Medicine as well as the Arthroscopy Journal. He is a member of the AOSSM Team Physician and Athlete Advocacy Committee and is the Immediate Past President of the Society of Military Orthopaedic Surgeons.

Dr LeClere is currently the Head Team Physician for Lebanon High School Athletics in Lebanon, TN and is a Team Physician for the Nashville Predators NHL Team. In addition to Naval Academy Sports, he previously has been a team physician with the New England Patriots (NFL), Boston Bruins (NHL) and Boston Red Sox (MLB). In addition to athletic coverage and return to sport following injuries, Dr LeClere is passionate about advancing the field of orthopaedic surgery holding many committee and leadership positions with national organizations and teaching positions. In addition to VUMC, Dr LeClere has held teaching positions with the Uniformed Services University and Harvard University/Massachusetts General Hospital.

Medical Training

- **Fellowship:** Orthopaedic Sports Medicine Massachusetts General Hospital/Harvard Combined Orthopaedics Program
Boston, MA
- **Residency:** Orthopaedic Surgery Naval Medical Center San Diego
San Diego, CA
- **Internship:** Naval Medical Center San Diego
San Diego, CA
- **Doctor of Medicine:** Loyola University Chicago Stritch School of Medicine
Chicago, IL
- **Pre-Professional Studies:** University of Notre Dame
South Bend, IN

Preparing for Surgery

FOOD AND DRINK:

You **CAN NOT** eat or drink after **MIDNIGHT** the night before your surgery. This includes chewing gum and hard candy. Your surgery will be **CANCELLED** if this policy is not followed.

Medications:

Please discontinue the use of the following medications leading up to your surgical date:

14 days before surgery: Narcotics (Vicodin, Norco, Percocet, etc.)

10 days before surgery: Plavix

Anti-inflammatories (Ibuprofen, Aleve)
Herbal supplements
Vitamins

7 days before surgery: Aspirin (including baby aspirin)

Coumadin (as directed by your primary care doctor)
Any other medications directed by your PCP.

YOU CAN CONTINUE: Tylenol

Celebrex – if previously prescribed
Ultracet – if previously prescribed
Glucosamine

Taking a medication not listed? Contact your Primary Care Physician for guidance.

COVID Testing

COVID Testing is a VUMC requirement and should be completed approximately 72 hrs prior to surgery. Orders for testing have been placed in your VUMC chart and testing can be completed at Vanderbilt Wilson County Hospital Outpatient Services or Walgreens – Vanderbilt clinic in Lebanon, TN, or other Vanderbilt Associated Health Clinics.

Discharge and Surgery After Care

Bruising after Surgery

You may have some bruising after surgery. This is normal and vary from person to person. Some people may only have a small amount of discoloration around the surgical area, while others may have bruising down the entire leg and into the foot. Both are normal and will resolve over 10-14 days.

Swelling after Surgery

Most people experience swelling following surgery. This is normal. The more active you are immediately after surgery, the more swelling you will have. Icing, elevating, and performing the instructed post-operative exercises will help decrease the amount of swelling you have.

Wound Care

Maintain your operative dressing for 72 hours following your surgery. You may loosen the bandage if swelling of the extremity occurs and the hand/foot feels cold/tingly. It is normal for the area to bleed following surgery. If blood soaks through you bandage, do not become alarmed, reinforce with additional dressing for absorbency. If bleeding soaks through your reinforced bandage and is larger than a baseball, please contact our office. You may remove the surgical dressing on the third post-operative day or wait until your first physical therapy appointment.

Brace

Your brace should be worn as directed until otherwise informed by the physician after your first post-operative visit. Your physical therapist will adjust the brace as needed throughout the rehabilitation process.

Ice Therapy

Cold therapy is a great modality to use after surgery. Use your polar care machine (if given) continuously or ice packs, (if machine not prescribed) every hour for 20 minutes until your first post-operative visit. Care should be taken with icing, to avoid frostbite to the skin keep a pillowcase or tshirt between the cold modality and your skin.

Sleeping

Do not place pillows under knees (i.e. do not maintain knee in a flexed or bent position), but rather place pillows under foot/ankle. Make sure your pain is well controlled throughout the day. Try to avoid taking too many naps, although your medications may make you tired. Try to keep a “normal” schedule. If you are truly having issues sleeping, you make talk to your primary care physician.

Following shoulder surgery you may need to sleep in a recliner or elevated position for several weeks.

Showering/Bathing

You can shower 72 hours (3 days) after your surgery. Do not scrub your incisions. Rather, let warm soapy water run over them. Pat dry with a clean towel when finished.

We ask that you refrain from soaking or sitting in any type of water until directed otherwise. This includes bathtubs, hot tub / whirlpools, pools, ocean, lake/river/streams. This is to prevent bacteria from entering the surgical incisions.

Activity Level

Every day you should start to increase your activity level, but let your pain and swelling level be your guide. Keep in mind that at some point you may “over-do it,” lots of people make this mistake. This is normal and it does happen. Speak with your physical therapist about adjusting your rehabilitation program if you are having an increase in your pain or swelling.

When can I start my normal/daily medication again?

Consult with you primary care doctor or internist on when you should start these again.

Physical Therapy

When scheduling your surgery, we will instruct you on when to begin physical therapy as it differs with each patient/procedure. Your physical therapist will have a protocol to follow based on your specific procedure. They will help guide you and answer questions throughout your recovery process. They will also stay in communication with our team regarding your progress.

Medications Following Surgery

- ***Narcotics:** (ex. Percocet or Norco) as Prescribed
 - Short term pain control only
 - Take 1-2 tablets every 4 hrs as needed for pain
 - No more than 9 tablets per 24 hrs
 - To be stopped when moderate pain subsides
 - DO NOT take additional Tylenol while taking this medication
 - Side Effects:
 - Nausea
 - Drowsiness
 - Constipation

- **Tylenol:** to be started after completing narcotic medications
 - 2 extra strength Tylenol 3 times a day to help with pain control
 - Purchased over the counter at your pharmacy

- ***Anti-emetic:** (ex. Phenergan) as needed
 - Anti-nausea medication
 - Taken when having nausea associated with narcotics or anesthesia
 - Follow instructions on prescription bottle

- ***Anti-Inflammatory:** (ex. Ibuprofen)
 - Take 800mg – 3 times daily with food
 - Helps reduce swelling and inflammation associated with surgery
 - This medication should be take in combination with narcotic is needed

- ***Aspirin (325mg):** daily beginning the day after surgery
 - 1 – 325mg Aspirin should be taken each day for 2 weeks following surgery to help prevent blood clots and promote blood flow

- **Stool Softener:** (ex. Colace) as needed after surgery
 - This is a mild laxative to help prevent constipation following your surgery

We recommend that you take all of your medications with food, to help minimize side effects. If you have issues with the medications recommended, please call our office.

Some medications may make you sleepy/drowsy, DO NOT drive while taking them.

Concerns Following Surgery

Our office can assist with most of your concerns during our normal business hours. Please contact us via MHAV for the quickest response.

Contact us for the following Concerns

- Increasing pain or swelling not relieved by medication, ice and elevation
- Redness, warmth, increased incision tenderness, drainage or smell
 - Bleeding that does not stop
 - Numbness in the leg or foot
 - Fever over 101.4F
 - Any other concern

Go to the [Emergency Department](#) if the Following are Occuring

- Prolonged Dizziness
- General Weakness
- Headache following Spinal Anesthesia
- Sensations recalled for your operation/procedure
 - Shortness of breath