

INTERVENTION (OPIOID-FREE)

DISCLAIMER: The medications listed below may or may not apply to your surgery. The medications listed here are ones that were used as part of an opioid-free surgery research study, and the exact medications and dosages used for each patient varied depending on the type of surgery that was conducted. This list is not intended to be an all-encompassing list of potential medications that can be used for reducing opioids in your treatment. It is nothing more than an example or guideline of potential opioid-reducing options. This list is not medical advice.



		Spine (ACDF/ACDA)	Foot&Ankle (Hallux Valgus/Rigidus)	Hip (THA)	Shoulder (TSA/RTSA)	Hand (1st CMC arthroplasty)
PreOp	Gabapentin (PO)	300mg (or double current up to 900)	300mg	300mg	300mg	300mg
	Tylenol (IV)	1000mg (may substitute to PO if IV Tylenol is not available)	1000mg (may substitute to PO if IV Tylenol is not available)	1000mg (may substitute to PO if IV Tylenol is not available)	1000mg (may substitute to PO if IV Tylenol is not available)	1000mg (may substitute to PO if IV Tylenol is not available)
	Meloxicam (PO)	15mg	15mg	15mg	15mg	15mg
	Scopolamine Patch	Yes (if age < 75)	Yes (if age < 75)	Yes (if age < 75)	Yes (if age < 75)	Yes (if age < 75)
	Single-shot Spinal			1.5-2.0cc 0.75% Bupivacaine (upright in OR)		
IntraOp	Local Injection	0.5% Marcaine plain 5cc	None	CERT	Exparel 20cc (suspended in 20cc 0.25% Marcaine) or CERT	None
	Block		Regional Ankle Block		Brachial Plexus Block	Brachial Plexus Block
	Toradol	30mg IV push x 1 dose (adjust for CrCl) - (given at end of sx or in PACU)	30mg IV push x 1 dose (adjust for CrCl) - (given at end of sx or in PACU)	30mg IV push x 1 dose (adjust for CrCl) - (given at end of sx or in PACU)	30mg IV push x 1 dose (adjust for CrCl) - (given at end of sx or in PACU)	30mg IV push x 1 dose (adjust for CrCl) - (given at end of sx or in PACU)
	Zofran (IV)	4mg	4mg	4mg	4mg	4mg
	Decadron	10mg	10mg	10mg	10mg	10mg
	Cryotherapy		Yes	Yes	Yes (q8h)	Yes
PACU	Tylenol (IV) - *up to daily maximum dose allowable per institution	1000mg q6h PRN*	1000mg q6h PRN*	1000 mg q6hr x4 doses (continues into postop) (may substitute to PO if IV Tylenol is not available)	1000mg q6h PRN*	1000mg q6h PRN*
	Tylenol (PO) - *up to daily maximum dose allowable per institution	500mg q6h PRN*	500mg q6h PRN*		500mg q6h PRN*	500mg q6h PRN*

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		Spine (ACDF/ACDA)	Foot&Ankle (Hallux Valgus)	Hip (THA)	Shoulder (TSA/RTSA)	Hand (1st CMC arthroplasty)
PostOp	Cryotherapy		optional	Yes (q8h)	Yes (q8h)	optional
	Toradol (IV)	15mg q8h x4 doses (can be redosed to a total of 30mg q8h)		15mg q8h x5 doses (can be redosed to a total of 30mg q8h) - available for rescue	15mg q8h x4 doses (can be redosed to a total of 30mg q8h)	
	Tylenol (IV) - *up to daily maximum dose allowable per institution	1000mg q6h PRN*		1000mg q6h PRN*	1000mg q6hr PRN*	
	Tylenol (PO) - *up to daily maximum dose allowable per institution	500mg q6h PRN*		500mg q6hr PRN*	500mg q6hr PRN*	
	Gabapentin	300mg PO (or double current up to 900)		300mg q8h	300mg q8h	
	Meloxicam			7.5mg q24h		
	Decadron			10mg (1 dose - postop day #1)		
Discharge	Cryotherapy		Yes		Yes	Yes
	Toradol (PO)		10mg TID x 5d			10mg TID x 5d
	Meloxicam	15mg Q24hr x 14d	(After 5 days of Toradol) 15mg q24hr x 28d	15mg q24h x 28d	15mg q24hr x 28d	(After 5 days of Toradol) 15mg q24hr x 28d
	Gabapentin	300mg PO (or double current up to 900) x14 day (initiate wean on patients with preop use)	300mg q8h x 14d	300mg q8h x 14d	300mg q8h x 14d	300mg q8h x 14d
	Tylenol	500mg q4h PRN	500mg q4h PRN	325mg q4h PRN	500mg q4h PRN	500mg q4h PRN
	ASA			81mg BID x 28d	81mg BID x 28d	