

MARC J. MILIA, MD, CAQ

Sports Medicine Specialist

Dr. Marc J. Milia is a board certified and fellowship trained sports medicine specialist. He also holds a Sports Medicine Certificate of Added Qualification (CAQ), American Board of Orthopaedic Surgeons, which recognizes excellence in the sports medicine field.

After graduating Cum Laude from the University of Michigan Medical School, Dr. Milia spent his orthopaedic surgery residency in North Carolina. His fellowship training was completed at the University of Pittsburgh under the mentorship of Dr. Freddie Fu, where he cared for the Pittsburgh Steelers and the University of Pittsburgh student-athletes. Dr. Milia has cared for thousands of athletes ranging from high school, college, and professional ranks.

BOARD CERTIFICATIONS

- American Board of Orthopaedic Surgery
- Certificate of Added Qualification, Sports Medicine

MEDICAL AND ACADEMIC APPOINTMENTS

- Medical Director, Sports Medicine, Beaumont Health System - Dearborn
- Clinical Assistant Professor, Wayne State University

HOSPITAL AFFILIATIONS

- Beaumont Health System – Dearborn, Southshore, Taylor

www.DrMarcMilia.com

Marc Milia #67, Center

"Athletic performance from high school to the professional level is a relentless pursuit of excellence. My experience as a Big Ten student-athlete and sport medicine expert can help you recover from injury, regain top function, and rejoin the game."



Michigan
**ORTHOPEDIC
SPECIALISTS**



CHAMPION LEVEL CARE

Dr. Marc J. Milia was a talented and accomplished student-athlete for the University of Michigan Football Team, offensive line. He helped lead the team to four consecutive Big Ten Championships (1989-92) and three Rose Bowl appearances, all while maintaining the highest academic standards.

- GTE Academic All-America (1993)
- Academic All-Big Ten selection three times (1991-93)
- Dr. Arthur D. Robinson Scholarship
- Honda Scholar Athlete Award
- NCAA Postgraduate Scholarship
- Bob Ufer Scholarship



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Marc J. Milia, MD

Board Certified Orthopedic Surgeon

INFORMED CONSENT FOR KNEE PROCEDURES

In an effort to provide as much information to my patients as possible I have put together this letter to detail the certain complications that are associated with any knee in the orthopedic surgical patient population.

Although knee surgery procedures approach 90 to 95% success rates there are inherent risks to any procedure performed on the extremities. Despite advances in technology and refinement of surgical techniques, complications can still occur. These complications are specific to the knee and I will out them below for you to review.

Complications that are associated with knee surgery (ACL reconstruction, knee replacement or knee arthroscopy)

1. **Persistent laxity or recurrent laxity:** In our experience patients who suffer an ACL injury and return to their sport or return to activities requiring agility or cutting type maneuvers have up to a 10% re-tear rate. Laxity can result from implant failure. We have to rely on mechanical devices to hold the new ligament in place. There have been reported failures, however they are less than 1 to 2%. This would be the most common complication after any ACL reconstruction.
2. **Persistent pain:** Any time a surgical procedure is performed inside of a joint where there is underlying cartilage damage, early arthritis or recurrent scar tissue, pain can persist despite the arthroscopic intervention.
3. **Loss of Motion:** ACL surgery carries an inherent risk of up to a 2% loss of extension, which very rarely requires surgical intervention or casting. Loss of flexion is even less common; however, although both of them are uncommon, there is usually a surgical or non-surgical solution to prevent it from happening or to solve the problem. For knee replacement surgery, loss of motion can lead to diminished function, so it is very important to stay on top of the prescribe rehab.

4. **Infection:** Arthroscopic procedures have an infection rate of less than 1 in 200 and you will be given antibiotics prior to your procedure to try and avoid this. In the case of replacement surgery, an infection can lead to additional surgery including removal of the implant for later reimplantation. If infection is serious and difficult to eradicate, the infection can be limb threatening—an extraordinarily rare circumstance.
5. **Neurologic or Vascular Injury:** Persistent numbness around the incision is ~~actually very common and it usually resolves within a year. More serious injuries~~ to nerves that make the foot move up/down is extraordinarily rare. Any time you perform a surgical intervention on an extremity, especially the knee; there is risk for a nerve injury, however it is exceedingly low. A majority of those nerve injuries will resolve within six months and very few of these injuries would need any further intervention other than expectant care. Vascular injuries are also extremely rare. Discovered in the early postoperative period, they can be managed by a vascular surgeon.
6. **Deep Venous Thrombosis (DVT) (Blood Clot):** This is an extraordinarily rare event that can happen after lower extremity surgery. With arthroscopic procedures the rates are anywhere from 1 in 1,000 to 1 in 10,000. The diagnostic procedure of choice is an ultrasound when one is suspected. A DVT can be life threatening. We are very careful at the time of surgery to avoid using a tourniquet. The surgery is performed expeditiously and we monitor for this appropriately postoperatively. The risk factors for DVT include somebody in your family (that you are related to) with a prior DVT, smokers or women who use oral contraceptives. Please inform me if you fall in any of these risk categories.
7. **Pain Management:** After surgery, you will feel some pain. This is a natural part of the healing process. Your doctor and nurses will work to reduce your pain, which can help you recover from surgery faster. Medications are often prescribed for short-term pain relief after surgery. Many types of medicines are available to help manage pain, including opioids, anti-inflammatory drugs (NSAIDs) and local anesthetics. Your doctor may use a combination of these medications to improve pain relief, as well as minimize the need for opioids.

Be aware that although opioids help relieve pain after surgery, they are a narcotic and can be addictive. Opioid dependency and overdose has become a critical public health issue. It is important to use opioids only as directed by your doctor. As soon as your pain begins to improve, stop taking opioids. Talk to your doctor if your pain has not begun to improve within a few weeks after your surgery.

**** Please note that I am not providing this information to deter you from having surgery. I am giving you as much information as possible. If you have additional questions or concerns about your procedure we can address them prior to your surgery.**

Respectfully,

Marc J. Milia, MD
Orthopedic Surgeon
Board Certified, AAOS

☐ B-Dearborn ☐ B-Taylor ☐ B-Farmington Hills ☐ St. Mary's Surg. Ctr
☐ Dearborn Surg. Ctr ☐ Surgeon's Choice Med. Ctr.

PRE-OP INSTRUCTIONS -- Out-patient & In-patient

1. Notify your physician if you develop any indication of illness prior to your scheduled procedure. (i.e. cold, sore throat, cough, fever, etc.)
Bring to the hospital any forms given to you at the physician's office, your **insurance card(s)**, **photo I.D.**, a list of all current medications and any allergies you have.
2. Do not smoke, drink, eat or take medication from midnight, of the night before surgery. (unless otherwise instructed by Anesthesia). This includes cigarettes, water, coffee, gum, candy, mints, cough drops, etc. These instructions are important and must be followed closely. Any alteration may result in cancellation of your surgery.
☐ meds to take the morning of surgery with a sip of water: _____
☐ or as directed by pre-anesthesia
3. Wear loose, simple clothing, which can be easily changed. Do not bring extra cash or jewelry. Please take out your dentures and remove any prosthesis or contact lenses. These items should be kept by a family member. Shower or bathe on the morning of procedure.
4. Arrive at the hospital at least one/two hours prior to the scheduled time of your procedure unless advised differently by hospital personnel. **Arrival time:** TBD or as directed

Late arrival may result in the cancellation of your procedure.

5. Check in at the registration desk.
6. ☐ Beaumont-Dearborn: (Fitzgerald Pavilion) ☐ Beaumont-Taylor:
☐ Dearborn Surgery Center (across from Beaumont-Dearborn – Beaumont Medical Park: Suite 100)
☐ Beaumont-Farmington Hills ☐ Surgeon's Choice Med. Ctr.
☐ St. Mary's Surg. Ctr (36622 5 Mile-Livonia - 2nd floor Mendelson Prof. Bldg)
7. A responsible adult **must** accompany you to and from the hospital. Admission to the hospital may be necessary following your out-patient surgery.
If you have any questions, our office will be happy to assist you. **(313) 277-6700**

YOUR SURGERY DATE IS: _____
(surgery time will be assigned the day before)

FEW DAYS BEFORE SURGERY: The Pre-Anesthesia Office will call you. They will review medications and make arrangements for any blood work that may be necessary before surgery. If you **do not** receive a call, please call them at the number below. Stop any anti-inflammatory medications **one week** before surgery: (Advil, Aleve, Arthrotec, Daypro, Feldene, Ibuprofen, Lodine, Meloxicam, Mobic, Motrin, Naprosyn, Relafen, Voltaren, etc. and **Aspirin**) & any blood thinners (Coumadin, Plavix (Clopidogrel), Pradaxa, Aggrenox, Effient, Eliquis, Brilinta etc). Stop all herbal & vitamin supplements also.

Weight reduction meds are stopped **2 weeks** before surgery.

Tylenol products OK to take.

☐ additional meds to stop **one week** before surgery: _____

***** AFTER SURGERY:** Pain medication will be prescribed for you. If additional medication is needed, contact our office. 24-48 hour notice is needed for all prescriptions, and **no prescriptions are called in on weekends or after 12noon on Fridays.** ***

☐ **Beaumont-Dearborn:** (313) 593-7411 ☐ **Beaumont-Taylor:** (313) 295-5055
☐ **Dearborn Surgery Center:** (313) 253-2000 ☐ **St. Mary's Surg. Ctr:** (734) 655-8270
☐ **Beaumont-Farmington Hills:** (248) 471-8001 ☐ **Surgeon's Choice Med. Ctr:** (248) 423-5151
 (revised 10/2018)