THE ORTHOPAEDIC SURGERY CENTER



ROAD TO RECOVERY

SPINE SURGERY HANDBOOK

Welcome

Important Information:

SURGERY CENTER ADDRESS

N15 W28300 Golf Rd Pewaukee, WI 53072 (located inside OAW Pewaukee building)

PHONE NUMBERS

Main: 262-303-5055

PreAdmissions Nurses (ext. 5004)

Therapy Department (ext. 3001)

Clinical Nursing Triage (ext. 3003)

Durable Medical Equipment (ext. 5052)



DIRECTIONS

We are located just north of 1-94 on Golf Road; Exit #290 off of 1-94; just West of Hwy SS in Pewaukee (N15 W28300 Golf Road, Pewaukee, WI 53072)

1 Updated: August 2025

Welcome

Thank you for choosing The Orthopaedic Surgery Center for your spine surgery!

Our experienced team of Physicians, Physician Extenders, Nurses, Athletic Trainers, Physical Therapists and Certified Nursing Assistants are committed to providing coordinated care for your spine surgery. From evaluation to rehabilitation, we're here to ensure your exceptional experience and best possible results. This guide offers tips and answers to help you navigate pre- and post-operative care. We look forward to supporting you every step of the way on your Road to Recovery!

The Surgeon's Office Staff:

The Administrative Assistant will assist you in:

- Getting answers to your insurance questions.
- Assist with completing any FMLA or disability forms needed for your recovery.
- Act as your liaison throughout your course of treatment.
- Coordinate pre-operative testing and scheduling if necessary.

The Orthopaedic Surgery Center:

- You will receive preoperative education in a variety of ways: preoperative appointments, this booklet, preadmission phone call, etc.
- The preadmissions nurses will contact you to review or obtain your health history and give presurgical instructions.
- The entire team will assess and plan for your specific care needs, including needs at home and caregiver availability

My Surgery Date is:	
My Durable Medical Equipment fitting is:	
My primary care physician appointment is:	
My support/transportation person is:	

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Road to Recovery Staff

An excellent prepared team of healthcare professionals will be monitoring your care before, during, and after your surgery. The Orthopaedic Surgery Center Staff have been hand selected to provide you with the best care while you are on your journey to a better you.

Orthopaedic Surgeon:

The surgeon of your choice will be performing your surgery and managing your care. Along with his or her team, your surgeon will be working with the nurses and post-operative care team to ensure that you are healing properly.

Primary Medical Doctor:

You will need to see your primary doctor within 30 days of your surgery date to complete any lab work. This will be discussed during your pre-operative call with the preadmissions nurse.

Nursing Staff:

The Orthopaedic Surgery Center is comprised of excellent nursing staff that include Registered Nurses (RN) and Certified Nursing Assistants (CNA). Our staff will be monitoring you throughout your stay from the moment you check in to when you're comfortably discharged to home.



Road to Recovery Staff

Anesthesiologists:

An anesthesiologist will be administering your anesthesia for your surgery. They will work with you and your surgeon to come up with a personalized plan for your pain management while at The Orthopaedic Surgery Center



Dr. Patrick Koenig



Dr. Hubert Cios

Certified Registered Nurse Anesthetist (CRNA) & Certified Anesthesia Assistant (CAA):

At The Orthopaedic Surgery Center, a Certified Registered Nurse Anesthetist (CRNA) or Certified Anesthesia Assistant (CAA) coordinates with your anesthesiologist to ensure you receive expert care and a personalized pain management plan in collaboration with your surgeon.



Megan Alberti CRNA



Jenna Dobling CRNA



Eliza Bergstrom CAA

Pre-Operative Checklist

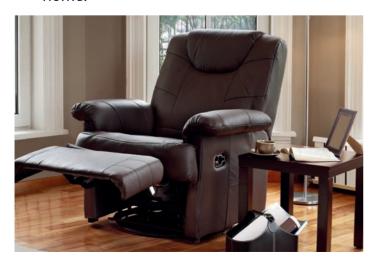
We advise our patients to plan ahead by preparing your home for after your surgery. This will make your recovery easier and less stressful. Please use these suggestions as a guide in preparing your home.

General Living:

- Remove any rugs that may be covering your floors.
- Move all electrical cords, magazines, pet toys, etc. from all walking areas.
- Arrange your furniture (please ask for assistance if unable to do so) to allow for extra walking room.
- If you are using a walker, take your walker for a tour around your home. Make sure you and your walker fit every where you need to go.
- Place a pillow or folded blanket on chairs that you may be using to make sitting and getting up easier.
- Place a comfortable chair with armrests and back support in the areas you may be sitting.
- Install night-lights in the hallways so that you have lit pathways throughout your home.
- Arrange for a family member or friend to help share the responsibilities of any pets.

Bedroom:

- If your bedroom is on the second floor of your home, consider relocating to a lower-level bedroom, if possible, or making the couch or recliner into a bed for your first few nights at home. Depending on your surgery, your surgeon may have different recommendations for you.
- Clear away unnecessary items from around your bed.
- Arrange clothes you wish to wear once you return home, making sure they are easy to put on and easily located.
- Wash your laundry and change your bed linens so they are fresh for you once you return home.





Pre-Operative Checklist

Kitchen:

- Purchase re-freezable ice packs to have on hand. Our Durable Medical Equipment (DME) Service department offers multiple cold therapy options.
- Go grocery shopping prior to your surgery. Prepare meals ahead of time.
- Consider purchasing frozen dinner or food items that are easy to prepare.
- Place any utensils, pots, pans, and dishes on an appropriate counter height that is easily reachable.

Bathroom:

- Consider a toilet riser for ease on and off the toilet.
- Consider purchasing a grab bar for the shower, check the weight limits and install correctly.
- Consider purchasing a shower seat and installing a non-skid shower mat.
- Install a night-light in the bathroom for easy visibility.

Outdoors:

- If possible, have a friend or service cut your grass, shovel snow and put out salt.
- Check your walkway to make sure you have an unobstructed pathway to get to into your home.
- Use handrails where needed.
- Plan on how you'll get into your home after surgery.

Additional Suggestions:

Ask a relative or a friend to be available to help you with your transportation needs. This might include transportation to your doctor's appointments, errands, physical therapy appointments, etc.

For surgery check-in:

- Current photo ID.
- Insurance Cards.
- Durable medical equipment (back brace and/or walker)





Nutrition

Why is improving nutrition before surgery and maintaining a healthy weight important?

Enhances Healing

• Good nutrition boosts the body's ability to heal after surgery by providing essential nutrients for tissue repair.

Reduces Complications

• Proper nutrition can lower the risk of post-surgical complications such as infections and delayed wound healing.

Supports Immune Function

• A well-balanced diet strengthens the immune system, helping the body fight off infections and recover faster.

Optimizes Recovery

 Maintaining a healthy weight and good nutrition can speed up recovery time and improve overall outcomes.

Increases Energy Levels

• Nutrient-rich foods provide the energy needed for the body to recover from surgery and participate in physical therapy.

Promotes Tissue Strength

 Adequate protein intake supports muscle strength and prevents muscle loss during the recovery process.

Minimizes Anesthesia Risks

• Being at a healthy weight reduces the risks associated with anesthesia during surgery.

Enhances Overall Health

• Eating a nutritious diet and maintaining a healthy weight not only benefits surgery outcomes but also improves long-term health and well-being.



Preparing Your Skin for Surgery and Preventing Infection

. You will receive Chlorhexidine Gluconate (CHG) soap to wash with the evening before and the morning of your surgery. This is an important step in preventing infection. CHG kills germs on your skin for a longer period of time, which helps prevent infection. Preventing infection is a team effort and you are an important part of the team.

Before Surgery

Step 1: Obtain your CHG soap

This will be given to you at no additional cost from the surgeon's office at the Orthopaedic Associates of Wisconsin clinic, or you can obtain it from The Orthopaedic Surgery Center, location and hours listed below:

Pewaukee Clinic Front Desk

Surgery Center Front Desk

Monday - Thursday: 8:00 AM - 6:00 PM

Monday - Friday: 6:00 AM - 4:30 PM

Friday: 8:00 AM - 5:00 PM Saturday. 9:00 AM - 12:00 PM

Step 2: Prepare for Shower/Bathing with the CHG soap

Follow the washing instructions that were attached with the CHG soap. Follow these steps before and after your surgery for healthy healing. If you are allergic to CHG soap you will use DIAL antibacterial soap.

What you will need for your shower/bath:

- Your normal soap and shampoo
- CHG soap
- Freshly washed washcloth
- Freshly washed towels
- Freshly washed clothing, pajamas, and bedding

Preparing Your Skin for Surgery and Preventing Infection

Step 3: Complete the 'Evening before surgery' shower/bath

- 1. Shower as you normally would, washing from head to toe with shampoo and soap. Rinse completely.
- 2. Turn off water.
- 3. Wet a freshly washed washcloth and then apply the CHG soap.
- 4. Massage the CHG soap over the body from your neck, down. Avoid head/face, genitals, rectum and open wounds.
- 5. Add more CHG soap and continuing washing until the whole bottle of soap is gone.
- 6. Wait 2 minutes to allow the CHG soap to work, then turn water on and lightly rinse your body.
- 7. Dry yourself with a freshly washed towel.
- 8. Do NOT apply any lotion, hair products, powders, or perfume/cologne. Underarm deodorant is permitted.
- 9. Sleep in freshly washed pajamas and sheets. Avoid sleeping with pets.

Disclaimer: Although rare, serious allergic reactions to CHG soap are possible. If you experience signs of an allergic reaction such as a rash, hives, swelling of the face, or difficulty breathing, stop using the soap and seek immediate medical attention (call 911 if any of these life threatening allergic reactions occur).

Step 4: Complete the 'Day of Surgery' shower/bath:

- Before coming to the surgery center, you will need to shower again.
- Repeat only steps 2-8 from above, using the second bottle of CHG soap.
- Do NOT apply any lotion, face products, skin products, colognes/perfumes, or powders. Underarm deodorant is allowed.
- Dress in clothes that have freshly been washed and are loose.
- Leave all jewelry (necklaces, rings, watches, earrings, etc.) at home.

After Surgery

- Keep your surgical site clean and dry.
- Check the skin surrounding the bandage without removing or lifting the dressing or adhesive. It should not have redness, swelling or be warm to the touch. Let your doctor know if these are present.
- Wash your hands before and after you touch your dressing and general surgical area.
- Follow your doctors' instructions for when and how to shower and clean your incision.
- Do not soak or submerge the incision in a bathtub, swimming pool, or hot tub until the site is completely healed and the doctor says it is safe to do so.
- Do not use lotions, powders, perfumes, or colognes on or near the incision.
- Do not let family, friends, or pets touch your incision.
- Wear clean, loose fitting clothing and sleep in clean sheets.

Guidelines You MUST Follow Before Surgery:

- DO NOT EAT OR DRINK AFTER MIDNIGHT.
- NO CANDY, GUM, MINTS, ETC.
- Wash body with CHG soap or antibacterial soap the night before and morning of procedure.
- Do not wear any make-up, perfumes, hairspray, lotions and powders, etc. Underarm deodorant is allowed.
- Do not swallow water when brushing and rinsing teeth.
- Remove all jewelry and piercings. Please keep valuables at home.
- No smoking or alcohol use for a minimum of 24 hours prior to surgery.
- · Wear loose fitting clothing.
- STOP ALL VITAMINS & HERBAL MEDICATIONS a minimum of 5 DAYS prior to surgery (multivitamin, other vitamins, turmeric, curcumin, fish oils, CoQ10, garlic, Ginkgo Biloba, St. John's Wart, Valerian Root, Kava Kava, Ephedrine, Ginsing, etc.)

PRESCRIPTION PAIN MEDICATION

- WILL NOT be refilled on weekends, after clinic hours, or on holidays.
- Please plan ahead and call during normal business hours to request a refill if needed; requests should be made 24-48 hours in advance.
- It is your responsibility to keep your medications safe from mishaps; your medication will not be refilled early for loss, theft, or other unforeseen circumstances.

INSURANCE ALERT

- Your surgeon's office will notify your insurance of your upcoming surgery and obtain prior authorization if necessary; however, it is your responsibility to understand your BENEFIT information. Some insurance companies may subject your claim to pre-existing conditions or other plan limitations/ exclusions.
- You may also receive more than one invoice for your upcoming surgery due to physician fee, facility fee and anesthesia fee.

DRIVING AFTER SURGERY

- It is difficult for us to determine whether you as an individual can safely drive; we request this
 determination be made by you based on the limitations the physician has given you. We also
 request that you feel safe, comfortable and confident to drive and are not taking prescription
 narcotic pain medication. Please adhere to any specific restrictions given directly by your
 physician.
- Typical guideline is 2-3 weeks; after your follow up appointment with your surgeon.

QUESTIONS? Please feel free to call The Orthopaedic Surgery Center at 262-303-5004 with any questions regarding registration, pre-op testing, or details of your surgical day.

ALL CERVICAL, THORACIC, AND LUMBAR SPINE SURGERY PATIENTS:

If you are planning any dental work before surgery, it should be done at least six weeks before your surgical date or wait at least three months after surgery for routine dental cleanings and/or procedures. Please contact our office if any urgent/emergent dental procedures are needed prior to three months following your surgery.

LUMBAR FUSION PATIENTS:

The physicians of Orthopaedic Associates of Wisconsin recommend preventative antibiotics for all dental procedures throughout a lumbar fusion patient's lifetime **only if** the patient has:

- Significant chronic disease (such as diabetes, chronic kidney disease, rheumatoid arthritis, or lupus)
- Takes immune-compromising medications
- Has a history of previous joint infection
- Has significant periodontal (gum) disease

If you would prefer pre-dental antibiotics, OAW will continue to prescribe pre-dental antibiotics. It is the recommendation of the American Academy of Orthopaedic Surgeons to treat lumbar fusion that meet these requirements with Amoxicillin 2 grams by mouth one (1) hour prior to all dental procedures for life. If the patient has an allergy to Amoxicillin/Penicillin, then Cephalexin 2 grams by mouth one (1) hour prior to all dental procedures for life can be used instead.

If you have a GI Endoscopic examination and are six months or less after your lumbar fusion, preprocedure antibiotic therapy is required. This is usually done via IV before your procedure. You will need to inform your GI provider of your recent surgery.

Call Nursing Triage at 262-303-5055 ext 3003 to discuss if antibiotics are recommended per your surgeon's protocols.

Your Surgery Day

Your stay at The Orthopaedic Surgery Center has been carefully planned to allow you to recover from your surgery and return home confidently. To help ease any anxiety you may feel going into surgery, we have outlined what will occur during your stay at The Orthopaedic Surgery Center.

Day of Surgery:

After you check in, a pre-operative nurse will come and bring you and your family back to your pre-op holding room. Here you will get changed into your surgical gown and the nurse will get you ready for surgery. Your vital signs will be documented. The nurse will review your health history and answer any questions you or your family may have. Soon after, your surgeon will stop in and review the procedure with you and your family, make sure all your questions and/or concerns are answered, and mark the surgical site with their initials. The anesthesiologist will also visit with you, review the procedure, go over a plan for pain control specific for you, check the surgical site for the physician's initials, and answer any remaining questions you or your family may have. Once you have seen the surgeon and anesthesiologist, the surgical nurse will wheel you back to the operating room. Your family will return to the waiting area.

After Surgery:

Once your procedure is complete you will be taken to our recovery room where our skilled nurses will be monitoring and caring for you until you are discharged home. During this time, our front desk will have moved your family to our consultation room where the surgeon will discuss how your procedure went. After approximately 45 minutes, your family members will be allowed to visit you in the recovery area.

After about one to two hours in the recovery area, the nursing staff will help you get out of bed and walk in the department. You will also be expected to urinate prior to discharge home.

Your prescription for oral pain medications will either be e-prescribed or you will be given a paper prescription, and you or your family will need to pick up your medications from your chosen pharmacy. Most pharmacies require the person picking up medication to show a valid driver's license.

Once our medical staff feels you are medically stable for discharge, they will review all discharge information, allow time for questions and concerns, and you will be discharged safely home.

Road to Home

Things to note as you return home from surgery:

- Your back brace is only to be worn when up and walking. You will take it off when you are resting, relaxing, or laying down.
- You will need to get up and walk about every 30 minutes to an hour while you are awake during the day.
- Your appetite may be poor for a few days. Your appetite will return. Consider taking a stool softener/laxative as directed the first few days at home. Remember pain medications can cause constipation, so it is very important that you drink 6-8 glasses of water each day, in addition to eating grains, vegetables, and fruits.
- You may have difficulty sleeping at night. Do not sleep or nap too much during the day as this
 will disrupt your sleep patterns. Many people will find sleeping in a recliner is more
 comfortable than a bed. Your energy level may be less in the first month, however this will
 improve as you decrease pain medication use, sleep improves, and your body continues to
 heal.
- Follow instructions on wound care from the nurses/physicians. If at any time you have concerns about your wound, please call.
- You may have been put on an anticoagulant (blood thinner). Follow your surgeon's directions carefully. These medications are typically aspirin or lovenox.
- Apply ice to the incision area for 15 minutes, at least 4 times a day to help lessen any discomfort. Do not put icepack directly on skin. **DO NOT use a heating pad.**
- You may shower as stated in your discharge paperwork per your surgeon's recommendation.
- Notify your team if there is any increased redness at your incision site, change in the amount of drainage on your bandages, increased pain, fever over 101 degrees, nausea, or night sweats. This could possibly signify infection and should be treated as soon as possible.

Road to Home

Managing Your Pain

A moderate amount of pain is normal. You will not be without pain. The goal is to be at a pain level that is tolerable for you. Pain control prevents suffering. It helps you heal faster and return to normal sooner! Take your pain medications as prescribed by your physician. Do NOT take additional aspirin, ibuprofen, or other pain relievers unless specifically approved by your physician or listed in your discharge paperwork.

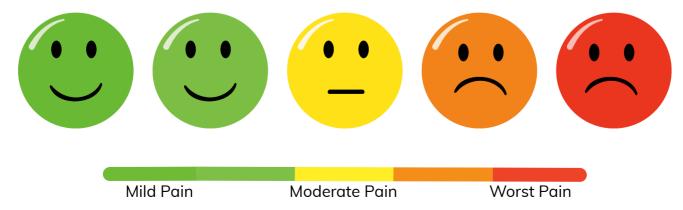
Commitment To Pain Relief

In order to treat your pain effectively, the staff will ask you to rate your pain/discomfort using a 0 - 10 scale. A rating of "0" means you are experiencing no pain, and a rating of "10" means that you are experiencing the worst pain possible. The faces and word labels may help you rate your pain. Using this scale will help the staff understand how the pain feels to you and how effective the pain medication is. Our goal is to make you as comfortable as possible.

The staff at The Orthopaedic Surgery Center would like to make this commitment to you:

- We will start the discussion of a pain plan during your admission. You will have an active role in your pain plan.
- We will ask you about the presence, quality, and strength of pain. We will use YOUR report as the main indicator of pain.
- We will work with you to initiate your pain plan after surgery.
- We will review and change the plan for you if you have pain that is not relieved.

Every person feels pain differently. It is important to report your pain to your nurses and doctors.



Road to Home

Managing Your Pain

There are different methods to manage your pain/discomfort; pharmacological and non-pharmacological. We will assist you in choosing which methods of pain control are right for you sometimes it takes a combination of these methods to have the best pain control.

These methods include:

- Understanding what will happen before and after your spine surgery. Correct knowledge can decrease anxiety which also works to decrease pain.
- Communicating with the nurses and doctors to let them know what has worked for you in the past and what has not.
- Slow rhythmic breathing. To do this, get into a comfortable position. Breathe slowly, deeply and regularly. Feel your body relax. Repeat this as often as needed.
- Finding a position that is comfortable. Change positions as needed. You may need to change positions often.
- Get up and go for a short walk.
- Visual imagery. Imagine being in a place that is relaxing and calming to you.
- Listening to music that you enjoy.
- Thinking positive thoughts.
- Placing ice on the affected area.
- Pain Medicine: This can be given to you in many different forms. The forms in which your pain medication can be given to you are ordered by your doctor and include:
 - A pill or liquid form. This type of pain medication is taken with food or juice. NOT on an empty stomach. This helps digest the medicine better.
 - Through an intravenous (IV) catheter in your vein.
 - Pain medicine can also be given directly into your spine. This is done by your surgeon during surgery.

No matter which methods are used, it is important to remember:

- Pain control is most effective when action is taken at the time your pain/discomfort begins.
- Take your pain medicine at regular intervals to better manage your pain during the first few days after surgery.
- Be sure to take your pain medication in the early morning and at bedtime, as well as when needed during the day. This will help you sleep better, and it will be easier for you to participate in your care and treatment.

Daily Living Aids & Durable Medical Equipment

For questions or to order Durable Medical Equipment, call 262-303-5055 (ext. 5049)



Mojility Cervical



Mojility Standard



Mojility Oversize



Raised Toilet Seat



Lumex Reacher



TED Stockings



Ergonomic Crutches



Pulley



Sock Assist



Crutch Replacement

Other Post-Op Aids (Not available to order through OAW)



Commode



Transfer Bench



Shoe Horn



Leg Lifter



Shower Grab Bar

FAQs: Frequently Asked Questions

Should I exercise before surgery?

• Yes, you should aim to be as active as possible up until your surgery date. The more strength you can maintain prior to surgery the easier your recovery will be.

How long will I be at The Orthopaedic Surgery Center?

- The expected time for spine patients is approximately six hours; from the time you check in to the time you are discharged home.
- Anterior cervical decompressions and fusions will need to be in the recovery unit for a minimum of 4 hours after surgery.

Do I need to contact my insurance company before surgery?

 Yes, it's important to reach out to your insurance company regarding deductibles, co-pays, second opinions, exclusions, and coverage for durable medical equipment (DME) such as walkers.

Can I take my daily medications before coming to The Orthopaedic Surgery Center?

• The preadmissions nurses will call you about 1-2 weeks prior to surgery to discuss all current medications/supplements and when to stop taking them.

When can I drive again?

- Typical guideline is 2-3 weeks, until AFTER your follow up appointment with your surgeon. You will need transportation to your first post-operative appointment with your provider.
- Discuss with your surgeon's team prior to driving. Pain medication usage and mobility factors will need to be taken into account.

• Will I need therapy after discharge?

• Yes, typically laminectomy/microdiscectomy spine patients do need physical therapy. Spinal fusions typically do not need physical therapy. Activities of daily living and walking are enough.

Will I experience pain after surgery?

 Yes, post-operative pain is common and expected. You will have prescription pain medications along with non-pharmacological methods to help relieve your pain. See Managing Your Pain section of booklet.

Will I require assistance at home after surgery?

• Yes, especially in the initial days or weeks. It's advisable to arrange for family or friends to assist you. You also will need adult person to help care for you for 24 hours after surgery. You will need assistance with household chores, grocery shopping, and driving.

When can I return to work?

• Consult with your surgeon regarding the expected time off work based on your spine surgery. Coordinate with your company's Human Resources department regarding disability coverage and medical leave.

FAQs: Frequently Asked Questions

• How soon after surgery will I see my physician?

• Typically, you will have your first postoperative visit 2-3 weeks after discharge, arranged through your physician's Administrative Assistant at Orthopaedic Associates of Wisconsin.

• How do I prepare for my procedure with general anesthesia?

 Follow the guidelines provided, including fasting after midnight, using preoperative surgical soap, arranging dependable transportation, and having a responsible adult who will stay with you for 24 hours after surgery with you post-procedure.

· How long will my recovery take?

- Laminectomy and microdiscectomy spine patients at the Surgery Center typically require about two to three hours in recovery before discharge, depending on meeting specific goals. Activity restrictions are usually in place for approximately three months following surgery.
- Anterior Cervical Decompression and Fusion patients must stay in the recovery area for a minimum of 4 hours after surgery.

Why do I need to remove clothing and jewelry for surgery?

 For safety reasons and to maintain a sterile environment in the operating room, certain clothing and all jewelry must be removed.

• When can I shower after surgery?

 Typically, you can shower between 3-5 days post-surgery, as advised by your discharge nurse and paperwork.

· Will I need a brace?

• A back brace will be provided to you prior to surgery from our Durable Medical Equipment Department. You will discuss use and proper wear during this appointment.

Advance Directives

Exercise Your Rights

You have the right to choose what health care you want to receive, but it is important for a loved one to know what your wishes would be if there ever becomes a time when you are unable to speak for yourself. Consider making your wishes known legally in a document called an "Advance Directive."

Wisconsin Law recognizes the following forms as Advance Directives:

Wisconsin Declaration to Physicians (Wisconsin "Living Will"):

A "Living Will" only takes effect when your personal physician and another physician determine that you meet the criteria that you have chosen, and designates what measures you would like taken in the event of an emergency medical situation.

Healthcare Power of Attorney

This is a legal way for you to appoint someone to speak for you and to be your health care "agent". This person can make decisions on your health care should the need arise.

When you are admitted to The Orthopaedic Surgery Center, your nurse will ask you (or a family member) if you have completed one of these documents. If you have, we will ask for a copy. They will then be scanned into your medical record for whenever you may need to use them.

Since December 1, 1991, Federal Law required that all hospitals and surgical centers provide adult patients (over the age of 18 years) with information about Advance Directives. The law also requires that we ask all adult patients whether they have Advance Directives. The law is meant to make sure that your health care wishes are honored if you are unable to make decisions for yourself. Be assured that the care you receive will not be affected by whether or not you have these Directives. However, if you refuse treatments or request those that your physician or The Orthopaedic Surgery Center feels are not in keeping our philosophy or ethics of care, your physician will discuss options with you.

THE ORTHOPAEDIC SURGERY CENTER



For questions or concerns, call 262-303-5055

OrthoWisconsin.com