



Jeffrey H. Berg, M.D.

Sports Medicine
Arthroscopic Surgery
Orthopaedic Surgery

Stephanie Y. Clop, M.D.

Physiatrist
Electrodiagnostic Studies
Acute & Chronic Pain
and Rehabilitation

Thomas B. Fleeter, M.D.

Orthopaedic Surgery
Sports Medicine
Arthritis & Joint Replacement

George Kartalian, M.D.

Foot & Ankle Surgery
Sports Medicine
Arthroscopic Knee Surgery

David R. Miller, M.D.

Hand/Wrist & Upper
Extremity Surgery
Orthopaedic Surgery

Dhruv B. Pateder, M.D.

Orthopaedic & Neurological
Spine Surgery

James D. Reeves, M.D.

Orthopaedic Surgery
Adult Hip & Knee Reconstruction

Raymond Thal, M.D.

Sports Medicine
Arthroscopic Surgery
Shoulder & Knee Specialist

RESTON OFFICE

1860 Town Center Drive, Ste. 300
Reston, Virginia 20190
Phone: 703-435-6604
Fax: 703-787-6575

CENTREVILLE OFFICE

6201 Centreville Road, Ste. 600
Centreville, Virginia 20121
Phone: 703-378-4860
Fax: 703-378-4868

Dear: _____

Our mutual patient is scheduled to undergo spinal surgery with Dhruv B. Pateder, MD at Town Center Orthopaedic Associates. The patient is going to see you for preoperative clearance in order to prepare for surgery. The pertinent information is listed below.

The basic labs needed for surgery are: **CBC, BMP, PT/INR, PTT and MRSA screen.** The need for an **EKG, chest X-ray** or any other testing is to be determined per the patient's medical history and your evaluation.

Please fax the preoperative clearance results at your earliest convenience to our main office as well as the appropriate hospital:

Office fax: **703-437-6094**

Fairoaks Hospital Pre-op fax: **703-391-3992**

Reston Hospital Pre-op fax: **703-689-9206**

Please do not hesitate to contact us with any questions or concerns, **703-483-4679.**

Patient Name:

Surgical Procedure:

Hospital/Expected Hospital stay:

Estimated Blood Loss:

Estimated Anesthesia Time:

Sincerely yours,

Surgical Coordinator for Dhruv B. Pateder, MD
Neurosurgical & Orthopedic Spine Surgery
Town Center Orthopaedic Associates