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IRCCS
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Sacro Cuore - Don Calabria
Ospedale Classificato e Presidio Ospedaliero Accreditato - Regione Veneto
Dipartimento di Ortopedia e Traumatologia
Centro di Artrosopia e Chirurgia del Ginocchio
Direttore: Dr. Claudio Zorzi

Voluntary quarantine declaration in anticipation of orthopedic surgery.

Mr./ Mrs
in anticipation of the surgery you will undergo on
date.....
From day..... declares that he will remain in voluntary
quarantine at his own
Domicile or at..... observing the following
rules:

- Regularly and thoroughly clean your hands with an alcohol-based hand rub or wash them with soap and water
- Avoid touching eyes, nose and mouth
- Make sure you, and the people around you, follow good respiratory hygiene. This means covering your mouth and nose with your bent elbow or tissue when you cough or sneeze. Then dispose of the used tissue immediately and wash your hands.
- Identify frequently touched surfaces and clean and disinfect them daily
- Stay in a separate room from other family members, but if not possible wear a medical mask and keep a distance of at least 1 meter (3 feet) from other people. Keep the room well ventilated and if possible use a dedicated bathroom.
- Monitor health for symptoms such as fever, cough and if difficult breathing appear, call health care and the ward immediately

If you have understood the information, we ask you to sign this sheet, thus confirming your awareness of the absolute need to remain in voluntary quarantine until hospitalization that will take place on

Patient_____ Doctor_____

Date_____