

Garnet Health

Total Joint Replacement Pre-op Education Class

PRE-SURGICAL CALENDAR

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Make necessary appointments and use this calendar for a reminder of important dates

- Medical Clearance
- Pre-Surgical testing
- Dental cleaning and check up

ADDRESSES AND CONTACT INFORMATION

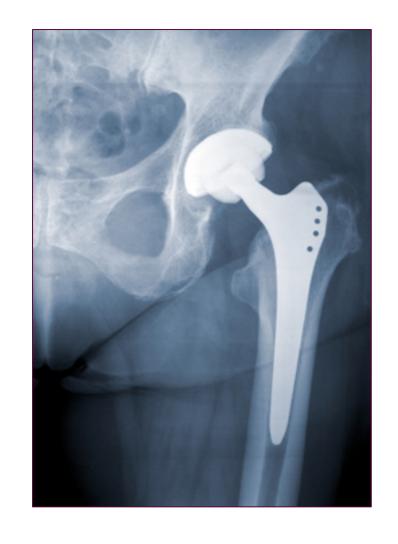
Your Orthopedic Care Team has a unique, individualized approach to care with you in the center. Your safety and successful recovery are our top priorities.





HIP REPLACEMENT

More than 300,000 hip replacements are performed in the U.S. each year.



KNEE REPLACEMENT

More than 700,000 knee replacements are performed in the U.S. each year.



PREPARING FOR SURGERY

- Complete medical clearance appointment
- Complete pre-surgical testing
- → Prevent infection
- Notify surgeon of metal allergy
- Identify a coach
- Complete Advance Directives if you wish
- www.GLWD.org

- Start exercising
- Hip replacement: Surgical Guide pages 21-23
- Knee replacement: Surgical Guide pages 26-28
- ☐ Maintain a healthy diet, drink plenty of water
- ☐ Diabetic management
- Stop smoking
- Start deep breathing exercises (Surgical Guide page 34)
- ☐ Complete dental cleaning if needed



Preparing Your Home For Your Safe Return

- ☐ Remove throw rugs and any tripping hazards
- Move furniture
- ☐ You will need a firm chair with a higher than average seat and sturdy arms
- ☐ Make sure have safe handrails along all the stairs
- ☐ Ensure your bathroom is safe for bathing
- ☐ Store frequently used items at waist level
- ☐ Prepare and freeze healthy meals
- ☐ Obtain a front wheel walker



THE DAY(S) BEFORE YOUR SURGERY

- DO NOT shave legs 3 days prior to surgery
- DO NOT get a pedicure for 2 weeks prior to surgery
- □ Remove acrylic nails
- ☐ Complete 3 consecutive showers with the CHG wash; take your last shower the morning of your surgery (Surgical Guide pages 31-32)
- Complete Bactroban if indicated (Surgical Guide page 33)
- Notify your surgeon of any change in your health condition
- ☐ Obtain necessary equipment for your safe return home

You will receive a phone call from the hospital the day before your surgery to advise you of your surgical time and what time you need to arrive at the hospital

Surgical Guide Page 10



PACKING FOR YOUR HOSPITAL STAY: What to Bring and What Not to Bring

- ☐ Use the checklist to keep track of what you need to bring
- ☐ Please remove all jewelry and leave all valuables at home
- ☐ Do not bring any medications to the hospital unless you are otherwise instructed to do so.





THE DAY OF SURGERY

- Remember to take your medications as instructed
- Remove all jewelry
- Complete your third CHG shower (Surgical Guide page 31)
- Stop eating solid foods 6 hours before your surgery time
- Stop drinking clear liquids 2 hours before your surgery time. Clear liquids are anything you can see through.
- Complete your pre-surgery clear nutrition drink at least 2 hours before your surgery time
- Arrive 10 minutes early to allow time to go through security check
- Enter through the main entrance
- Report to registration
- You will be provided a HIPAA code





PRE-OPERATIVE

Visitation:

- Up to 2 family members 18 years or older can stay with you until you are taken to the OR
- Your family members will be given a tracking number so they can track your progress while in the waiting room.

PRE-OPERATIVE

- Your nurse will perform a physical assessment, ask questions regarding medical & surgical history and any allergies will be updated and verified
- Prior to arrival medications updated and verified
- Completion of 3 CHG showers and Bactroban ointment (if indicated) verified
- You will be asked to empty your bowel and bladder and change into a hospital gown
- Lab draw for blood type and screen and pregnancy test if indicated



PRE-OPERATIVE

- IV will be initiated for fluids and medication
- Your blood glucose will be checked
- You will be given medication for pain and post-op nausea
- You will be given a prophylactic antibiotic
- Your surgeon will mark appropriate extremity and answer any questions or concerns
- Your anesthesiologist will discuss plan of care and answer any questions or concerns

OPERATING ROOM

You will be in the operating room for about 2 hours, the actual joint replacement takes about 1 hour

Final Time Out – your surgical site and procedure will be verified

before anesthesia is administered

Monitoring devices applied- cardiac/BP/oxygen levels

- Anesthesia administered
 - IV sedation
 - Spinal anesthesia
 - General anesthesia
- Skin preparation- surgical scrub and draping
- A warming blanket is applied; Bear Hugger maintains your body temperature







POST-ANESTHESIA CARE UNIT

- Continued monitoring of vital signs and sensation
- You will be offered juice and crackers
- Cold Therapy applied- ICE is NICE
- Venodynes applied- provides intermittent compression to lower legs to promote circulation
- Warming blanket remains in place until core temp is normal
- X-ray is done to confirm proper alignment of prosthetics
- Orthopedic surgeon speaks with coach/family in waiting area
- Family is allowed brief visitation
- Once recovery room criteria is met you will be moved to the Bone & Joint Center on the 4 West nursing unit
 - Awake, alert, able to follow commands
 - Vital signs stable
 - Pain is controlled
 - Regained sensation



Bone & Joint Center Visiting Hours 9:00 am - 9:00 pm

- We are a 24 room, single bed unit
- The care provided to you is individualized and specific for total joint replacement
- We have room service, flat screen TVs, phones, and Wi-Fi throughout the entire campus



Your hospital stay Your safety is our priority

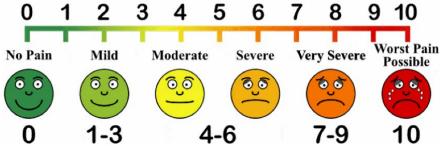
Patient identification
Advance diet as tolerated
Intravenous (IV) access will remain in place until you are discharged
Incision care
Ice is NICE!
Sequential compression stockings
Frequent monitoring blood pressure, heart rate and oxygen level
Blood thinner
Preventing constipation
Coughing and deep breathing
Resuming prior to arrival medications
Early Ambulation
Physical therapy/ Occupational therapy



Opioid sparing multimodal pain management

When you are given two or more medications together that provide pain relief, the medications more effectively block pain signals

- The key to effective pain control is treating the pain as soon as it begins
- Medicated throughout all phases of care
- You will be asked to rate your pain using a numeric scale of 1-10. Pain medication is ordered for every level of pain and you will be medicated appropriately
 - A pain score of 1-3 is considered mild pain
 - A pain score of 4-6 is considered moderate pain
 - A pain score of 7-10 is considered severe pain



- You will also be asked about your acceptable pain level
- We offer Reiki and Aromatherapy free of charge to all inpatients

Discharge Planning

You will be assigned a case manager who will work with you to coordinate your preferred therapy service:

Home physical therapy

- If insurance allows
- Case management will set up home PT for you, the agency will contact you to make your first appointment

Outpatient physical therapy

- Amount of therapy depends on your progress
- Please call and make your appointments prior to surgery

Obtain needed equipment prior to surgery

Most insurance companies will cover 1 walker and/or 1 over the toilet commode per patient every 5 years

- 5 inch front wheeled walker
- Over the toilet commode if indicated on your script

NeighborRx: On site pharmacy delivers medications to bedside



Going home

- ☐ Start Physical therapy 2-3 x's week
 - Continue exercising on your off days
- ☐ Take all medications as prescribed
- ☐ Swelling is normal
- ☐ Bruising is normal
- ☐ Your surrounding muscles and incision may feel sore for several weeks
- ☐ Difficulty sleeping
- ☐ Preventing constipation
- Deep breathing exercises
- Sexual activity
- Driving







Incision care

- ✓ You may shower, no tub baths or swimming
- ✓ Dressing is waterproof if there is no compromise in the integrity
- ✓ Remove silver dressing on day 7 post-op
- ✓ If incision is clean and dry, leave open to air
- ✓ Once dressing has been removed, let soap and water run over, do not scrub the incision, blot dry with a clean towel, no lotions or creams to the incision
- ✓ Zipline closure system will be removed by your surgeon at your first post-op visit



Call Your Surgeon's Office If You Experience Any Of The Following:

Any increased redness or drainage from the incision site

 A temperature of 101° F or greater and/or chills that last more than one day

 Any sudden increased pain, swelling, or tenderness in the thigh, calf, ankle or foot

- If you feel sick to your stomach or you are vomiting
- Any worsening or unrelieved pain
- Abnormal bleeding of any kind

**If you experience any shortness of breath or chest pain,
CALL 911**



Other Important Information

- Yes your implant will set off alarms
- It is safe to have an MRI after your joint replacement
- After surgery inform all of your physicians that you have a prosthetic implant
- Do not drink alcohol while taking narcotic pain medication
- Do not take any Non-steroidal Anti-inflammatory drugs while taking your blood thinner
- If you are a diabetic it is very important to manage your blood sugar postoperatively
- Be sure to keep all of your follow-up appointments with your surgeon,
 Primary care physician and Physical therapy



PRE-OP CHECKLIST

Use this checklist as a guide to help you prepare for surgery

