



Total Joint
Replacement
Education Class



Evarts Joint Center at Highland Hospital

Orthopaedics & Physical Performance

Today's Agenda

Your Surgery Preparation

- Preparing Yourself
- Presurgical Screening Appointment
- Day Before Surgery

Your Hospital Stay

- Day of Surgery
- Physical Therapy and Occupational Therapy
- Social Work and Discharge Plan

Your Home Care Services and Selection



Your Surgery Preparation



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Your Surgery Preparation

Get Your Home Ready

- Remove clutter and throw rugs (or tape down corners); put nightlights in hallways and bathrooms
- Determine if your mattress, toilet, chair height is appropriate
- Make & freeze meals, catch up on laundry and housekeeping
- If you have 2 or more steps in a row, be sure there is a sturdy railing
- A walker on each level of your home is convenient and helpful for hip/knee patients; make sure there is room for it between furniture
- Most shoulder/elbow patients find it comfortable to sleep in a reclined position. Having access to a recliner or a wedge to use in bed is helpful.



Your Surgery Preparation

Pack Appropriately

- ✔ Loose-fitting clothing (shirt, underwear, pants with elastic waist)
- ✔ Fresh, clean clothes for when you go home
- ✔ Flat, sturdy shoes with a closed back (sneakers, loafers, sandals with strap)

Physical Therapy/Occupational Therapy Helpful Hints

- ✔ Minimize stair use for first 2 weeks after surgery
- ✔ Icing regularly will help control swelling. Follow directions from surgeon or therapist regarding the use of ice
- ✔ Shoulder/Elbow patients CANNOT use a walker for 12 weeks
- ✔ Place items frequently used close to you



Your Surgery Preparation

Familiarize Yourself with Physical Therapy Exercises in Your Guidebook

- Your doctor might assign select exercises located in your Guidebook
- If you are in too much pain, simply familiarize yourself with the exercises

Identify a Support System at Home

- Someone who can take you home and stay with you for a few days after surgery, take you to your first post operative appointment, help you manage your medications, and take care of your pets

Attend Pre-Surgical Instructional Physical Therapy Session

- Shoulder/Elbow Patients Only

Make Arrangements for Your Pets



Your Surgery Preparation



Adopt Healthy Habits

- Avoid contact with sick people
- Wash hands frequently
- Eat healthy, well-balanced meals
- Eat more fiber to avoid constipation
- Eat smaller, more frequent meals
- Drink plenty of clear fluids to stay hydrated



Your Surgery Preparation

Presurgical Screening Appointment

- 3–4 weeks before surgery
 - We will call you to schedule
 - Located at: 158 Sawgrass Drive
Rochester, N.Y. 14620
- What to expect
 - Plan for about 3 hours
 - Medical/surgical history
 - EKG, blood work (non-fasting, but drink plenty of fluids), and X-rays if requested by surgeon
 - MyChart sign up



Your Surgery Preparation

Presurgical Screening Appointment

- What to bring: Photo ID, insurance card, list of medications and vitamins/herbal supplements
- Your medication instructions
 - What **NOT TO** take prior to surgery
 - What **TO** take morning of surgery
- Review your instructions after your Presurgical Screening Appointment and all the way up until your surgery
- Do not bring any medications to the hospital unless you have been instructed to do so

Call with any questions!
Leave a message, and
we'll call you back.
(585) 262-9150



Your Surgery Preparation | Personal Care

DO



Shower for 3 days prior to surgery with an antibacterial soap (such as Dial™) and wash your whole body, head to toes, rinsing thoroughly.



Use one of the three (3) 4% Chlorhexidine Cleanser sponges you received at your pre-op appointment to wash your body from the neck down. Let cleanser sit on your skin for 2 minutes. Rinse thoroughly. Stop using if you have a reaction.



Put clean sheets on your bed after first shower (only first shower) and sleep in clean clothes each night.

DO NOT



Do Not use Chlorhexidine Cleanser on head, face, or eyes



Do Not apply body lotions on the day of your surgery



Do Not shave below the waist for seven days before your surgery (hip and knee patients)



Your Surgery Preparation

Day Before Surgery

- You will be called between 1:30 and 4 p.m. the day before surgery to verify your arrival time.



Your Hospital Stay

HIGHLAND HOSPITAL

Main Entrance



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Your Hospital Stay

Day of Surgery

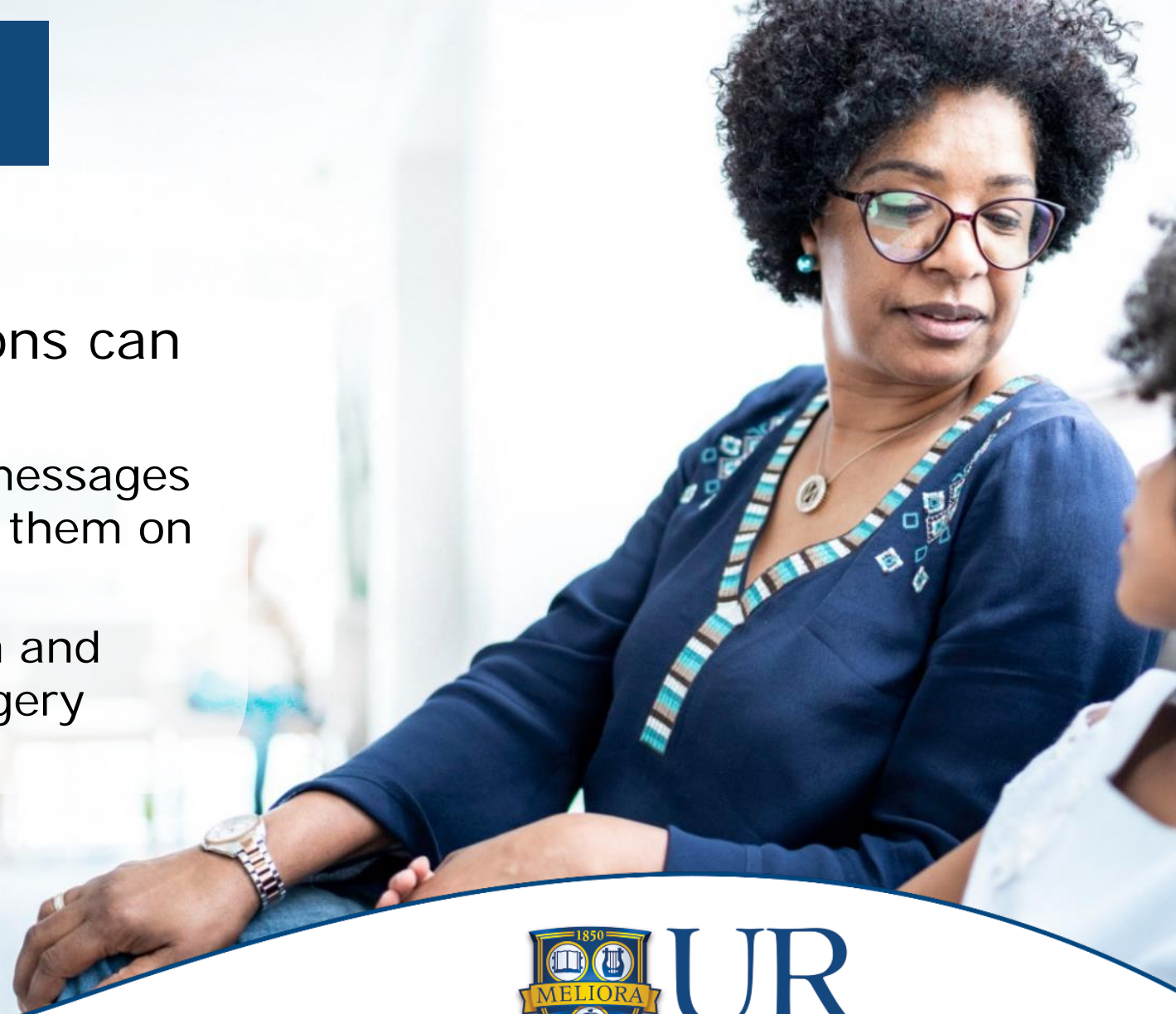
- When you arrive
 - Stop at the information desk in the hospital lobby for directions to Surgical Center Registration
 - The surgical team will prepare you for surgery
 - Your surgeon will visit you to have consent signed, and mark surgical site
 - Your anesthesiologist will visit to administer block
 - One of our staff gets you settled, your companion may join you and stay with you until your surgery



Your Hospital Stay

Day of Surgery

- During surgery your companions can wait in the Main Lobby
 - Your companion will receive text messages throughout your surgery updating them on your status
 - They will be advised via text when and where they can visit you after surgery



Your Hospital Stay

Day of Surgery

- After Surgery
 - You will recover from anesthesia in the Post Anesthesia Care Unit (PACU); expect to be there for a few hours
 - Care may include:
 - X-rays may be done if necessary
 - Oxygen
 - IV
 - Compression stockings
 - Sequential compression device
 - Ice to surgical site



Your Hospital Stay

Day of Surgery

- Once in hospital room
 - Nursing staff will visit you regularly
 - You'll start with ice chips and advance to a regular diet
 - Your nursing team or physical therapist will get you up and moving
 - Do not get up without a staff member
 - Visitors are welcome (check hospital internet for guidelines) <https://www.urmc.rochester.edu/highland/patients-visitors/visiting-information.aspx>

**Wi-Fi, TV, local calls
Complimentary;
Newspaper Upon
Request**



Your Hospital Stay

First Day After Surgery

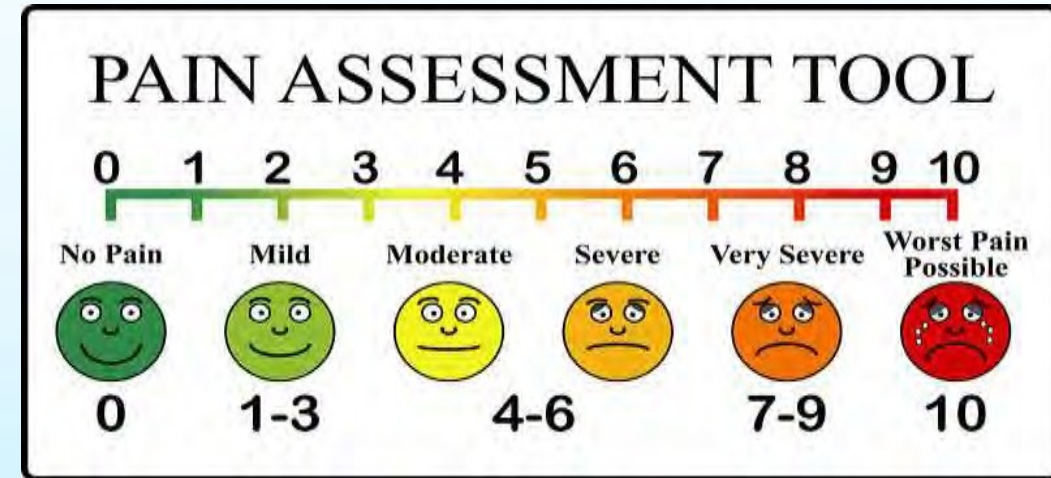
- **Regular Monitoring**
 - Vital signs
 - Medications
 - Blood Work

- **With Progress**
 - Discontinue IV fluids
 - Occupational Therapy
 - Physical Therapy



Your Hospital Stay | Managing Pain

- You will experience pain. Partner with your nurse to manage your pain!
- Use the scale to rate pain 1-10 as if you were to get up and walk
- Your surgeon will order pain medication
 - Lower pain score = smaller dose of medication
 - Higher pain score = larger dose of medication
- Your nurse will reassess your pain after you have taken medication to ensure your pain is being controlled. This may include pain meds delivered orally and by IV.



You do not want your pain to get higher than a 7 or it will take too long to get relief



Physical Therapy



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Your Hospital Stay | Physical Therapy



Your Physical Therapist will:

- Assist and teach you to move and promote independence
- Help minimize your pain and restore range of motion, strength, and stability
- Provide instructions specified by your surgeon
- Encourage you to continually increase the distance you can walk, while listening to you to understand how much weight you can tolerate on your new joint



Your Hospital Stay | Physical Therapy

Hip/Knee Physical Therapy

- 1 or 2 sessions per day
 - 30 minute sessions focused on getting into and out of bed/chair, walking, navigating stairs, and doing exercises
- Walking after surgery
 - Begin with a walker; weight bearing as determined by your surgeon
 - Continually increase distance
 - Minimize pain
 - Promote stability

Complying with your exercise plan as laid out by your surgeon is critical to your recovery



Your Hospital Stay | Physical Therapy

Shoulder/Elbow Physical Therapy

- We will review your post-surgical exercise program, explain your sling/immobilizer/splint
- Begin independently performing your physical therapy exercises in the Guidebook 3-5 times per day

Shoulder/Elbow patients CANNOT use a walker for 12 weeks.



Your Hospital Stay | Physical Therapy

Arranging Shoulder/Elbow Outpatient Physical Therapy

- We will help facilitate your post-discharge (outpatient) therapy sessions, if necessary
 - Within 3-5 days after your surgery, begin attending outpatient physical therapy sessions 1-2 times per week
 - The total course of outpatient therapy after the surgery will typically last 3 – 6 months



Occupational Therapy



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Your Hospital Stay | Occupational Therapy



- Focus on functional tasks, such as dressing, bathing, and toileting after surgery, which will help you achieve independence
- Your Occupational Therapist will prepare you to take care of yourself and return to your normal home routine



Your Hospital Stay | Occupational Therapy

Adaptive Equipment

- Available in Highland's Pharmacy:
 - Long-handled sponge or brush
 - Long-handled shoe horn
 - Elastic shoelaces
 - Sock aid
 - Reacher
- Available through home care agency or medical supply store:
 - Commode





Discharge Plan



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Discharge Plan

Discharge Criteria

- ✓ Clearance by Physical and Occupational Therapy
- ✓ How well you are tolerating diet
- ✓ Pain management
- ✓ Urine output



Discharge Plan

- Most patients will be discharged 1-2 days after surgery
- Most patients will go directly home with home care physical therapy
 - Social Work will meet with you to discuss and complete necessary paperwork for referral
- Discharges generally happen before noon



Discharge Plan

- Your nurse will review your discharge instructions
- Your discharge papers are important! Please keep nearby and refer to the last 4 pages for answers to many questions you may have after surgery
- A nursing home that provides rehab services will be recommended only for a small number of patients
- Prescriptions can be filled at the Highland Pharmacy; they can be delivered to your room or picked up on the way out of the hospital

Pharmacy Phone:
(585) 341-0699

Pharmacy Hours:
Monday – Friday: 9am – 5:30pm
Saturday – Sunday: 10am – 2pm





Your Home Care Services and Selection



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Home Care Services and Selection

Home Care Goal

- Gain functional independence in own home
- Bed mobility/transfers
- Walking/stairs
- Exercises/activity guidelines
- Pain/swelling management

Home Care Services

- Physical Therapy
- Occupational Therapy (if deemed necessary by your physical therapist)
- Lab work (if needed)
- Equipment
- Copay

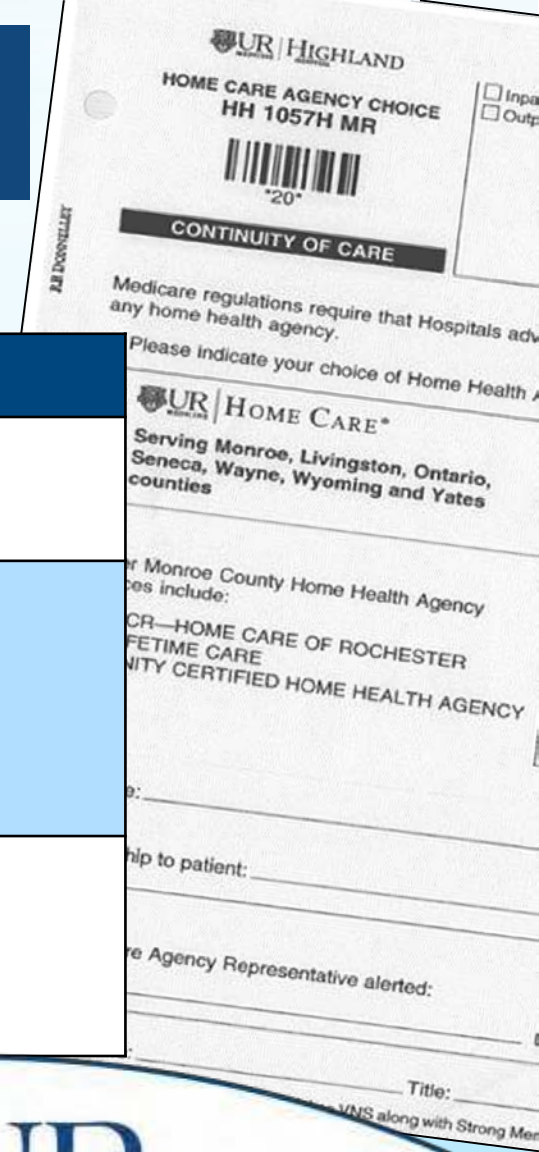
Plan for someone to be available at your home for a few days



Home Care Services and Selection

Monroe County

Primary Insurance	Home Care Agency
BlueChoice (VYU, VYC, VYM, ZFM)	<ul style="list-style-type: none"> • UR Medicine Home Care • Home Care of Rochester (HCR)
Aetna (URL) BlueChoice (URL) VA Worker's Compensation	<ul style="list-style-type: none"> • UR Medicine Home Care
All others	<ul style="list-style-type: none"> • UR Medicine Home Care • Home Care of Rochester (HCR) • Rochester Regional Health



Home Care Services and Selection

Other Counties

	UR Medicine Home Care	Visiting Nurse Association (VNA)	Home Care of Rochester (HCR)
Allegany		X	
Genesee		X	X
Livingston	X	X	X
Ontario	X		X
Orleans		X	X
Seneca	X		
Steuben		X	
Wayne	X		X
Wyoming	X	X	
Yates	X		

Tips for Success

- ✔ Wash hands frequently
- ✔ Eat well-balanced meals and stay hydrated; drink 64oz of water/day (unless restricted by surgeon)
- ✔ Manage stress levels and get plenty of rest and relaxation
- ✔ Follow your surgeon's instructions and call your surgeon with any questions or concerns as early in the day as possible



Frequently Asked Questions

Why Am I in So Much Pain?

Pain is one of the most common symptoms experienced by patients after joint replacement surgery. Many patients experience pain differently (aching, cramping, sharp, dull, throbbing) and each surgery may result in different types of pain. You will not have the achy arthritic pain you had before surgery; you will have deep tissue pain and pain from wound healing, swelling and inflammation. You should experience less pain the further you are into your recovery. You may notice a spike in pain levels as you increase your activity levels and decrease your dose of pain medication. When taking your prescribed narcotics, make sure that you know exactly what you are taking and when you should be taking them. You may need to take them as ordered for the first 1-2 weeks after surgery. You should gradually wean off narcotic pain medications as your pain improves, first by decreasing the dose, and then by increasing the amount of time between doses. Never take more than the prescribed dose. Please call your surgeon's office Monday - Friday before 4:30 pm for prescription refill requests.

Non-Pharmacological measures for pain relief

- Apply ice for 30 minutes at a time every 1-2 hours
- Elevate your leg above the level of your heart 3 times a day to help reduce swelling and pain.
- Keep your leg elevated while sitting.
- Do not stay in one position for more than 45-60 minutes at a time while awake.
- Imagery Guide your thoughts through imaginary mental images of sights, sounds, tastes, smells, and feelings; this can help shift attention away from the pain.
- Watching TV or listening to music is helpful to distract your mind from pain.
- Relaxation exercises such as deep breathing and stretching can often reduce discomfort.

Frequently Asked Questions

Should I be Concerned About the Bruising to My Leg That Was Operated On?

Bruising after total joint replacement surgery is normal. It is common and normal to develop bruises in your thigh, calf, and ankle and foot because that is where blood pools in the leg.

Do not worry, bruising is part of the healing process and is rarely permanent. Bruises can be painful to touch as they resolve. Ice may help. The bruising will eventually clear up, but may take several weeks to disappear.

Frequently Asked Questions

Is It Normal For The Swelling To Increase Since I Have Been Home From The Hospital?

It is common to have some swelling in your leg for several weeks to months after surgery. You may also experience a stiffness in the morning and swelling in the evening.

Tips to help reduce the swelling:

- Elevating and icing your leg over the course of the first month. This will help to decrease the stiffness and improve your joint motion.
- The best position to elevate your leg is to have the toes at the level of your nose or higher. You can place a pillow under your leg from the calf to under your thigh for comfort.
- Ice the joint after physical therapy AND 4-5 times a day. Keep the ice on your joint for 30 minutes at a time.

Frequently Asked Questions

What Should I Do If I Have Not Had A Bowel Movement Since Surgery?

1. Take steps to prevent and/or alleviate constipation
 - Walk as much as you can tolerate
 - Drink plenty of fluids (at least 64oz - 96 oz of water per day)
2. Use prescribed over-the-counter medications as prescribed (unless you develop diarrhea or loose stool)
 - Stool softener: Colace[®] (docusate sodium)
 - Laxative: Senokot[®] (Senna)
3. If you have not had a bowel movement by your 3rd day after surgery, please consider adding MiraLAX[®] – 1 capful with some juice in the morning and again at dinner time until successful, OR a few tablespoons of Milk of Magnesia[®] to help facilitate a bowel movement. If you still have not had a bowel movement after a few days of adding MiraLAX you should call your primary care doctor for a recommendation.
4. Contact your pharmacist or your Primary Care Physician's office if you have any concerns about the addition of these medications to your current home regimen.

You should gradually wean off narcotic pain medications as your pain improves, first by decreasing the dose, and then by increasing the amount of time in between doses.

Thank You!

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