TPMC CHANGING MEDICINE

Joint Effort: Total Joint Replacement Surgery

Welcome to the UPMC Total Joint Replacement Class



Your Checklist to Prepare



Checklist

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Purpose of the Total Joint Education Class



Purpose of the Total Joint Program

- To learn about your new Total Joint what to expect before and after your hip or knee surgery.
 - You will be ready and know what to expect.
 - The more you know, the easier it will be.
- To prepare you and your family and friends for every step of your hospital stay.
 - Your family and friends are an important part of the recovery team. You will need some help.



Purpose of the Total Joint Program

- To form a partnership between you and your doctors, nurses, nurse assistants, physician assistants and therapists.
 - We are a team working to help you recover and get back to your life.
 - We want you to have the best possible experience at UPMC.



Purpose of the Total Joint Program

Note: This education program contains general patient information. Your doctor and nurse will also go over specific details with you individually during your office visits and hospital stay. Please make a list of additional questions you may have to discuss with them.



Preoperative Testing And Things to Consider Before Your Surgery



Pre-operative Testing Requirements

- Complete history and physical
- Blood work collected
- Urine sample
- Chest X-ray may be ordered
- EKG
- Dental screening may be recommended
- Additional consults may be recommended by your surgeon
- Pre-operative testing <u>must</u> be completed within 45 days of surgery (hospital requirement)



Important information to tell your doctor

Tell your doctor about the following:

- Allergies you may have; especially allergies to medicines and metals.
- Details about your medical conditions and what medicines you take (including supplements, herbal products and vitamins.)
- If you are currently taking pain medicines. This information is very important in planning your pain management after surgery.



Before the Day of Surgery

- A hospital nurse will contact you before your surgery to review your medical history and list of medicines.
- Keep paper and a pen near the phone to write down important information.
- Keep a list of your current medicines near the phone to review with the nurse. Include over-the-counter and herbal products.
- Keep a list of your allergies and the reaction caused by them.
- The nurse may instruct you to take some medicines the morning of surgery.
- The nurse will tell you what time to report to the hospital and provide you with directions.

What to Bring to the Hospital

- Pack loose fitting clothes such as shorts or sweat pants.
- Pack shoes with non-skid bottoms.
- Pack short length robes and non-skid slippers.
- Plan to wear personal clothing to therapy sessions bring 1-2 days worth.
- Pack personal toiletries.
- Pack glasses and hearing aids.
- Label canes or walkers with your name if brought from home.



What to Bring to the Hospital

- Bring any special equipment you use such as a CPAP or BiPAP device
- Telephones are available in patient rooms or you may bring your cell phone.
- Bring puzzle books, a book to read, or something else you enjoy doing to help you pass the time.
- Do not bring valuables or jewelry.



The Night Before Surgery

- Shower or bathe the night before or morning of surgery.
 Some doctors may recommend using anti-bacterial soap.
- Eat or drink as you normally do, and have a healthy snack prior to bedtime.
- Do not eat or drink after midnight.
- No mints, hard candy, or gum after midnight.
- No hair removal products prior to surgery. Do not shave the area where you are having surgery.
- Get a good night's sleep.



Preparing Your Home And Shaping Up for Surgery Exercises



Things to Consider Before Surgery

- Who will assist you the first week after returning home
- Who will transport you home after discharge
- How long you will be in the hospital
- Most patients are able to return home after surgery. In special cases, there are options such as rehab or skilled nursing facilities that you could consider. Hospital staff will assist you with your discharge plans after your Total Joint Replacement.



How to Prepare Your Home

- Important: You may want someone to stay with you or stop by to check on you for the first week after you leave the hospital.
- Place items that you may need during the day within reach to make it more convenient.
- Remove all throw rugs and floor mats.
- Clear hallways for easy passage.
- Prepare food and freeze as individual meals.
- Rearrange kitchen and bathroom so that items are at arm level (avoid high reaching or stooping).

Shaping Up for Surgery

- Ankle pumps
- Quadriceps sets
- Gluteal sets
- Deep breathing exercises
- Healthy diet
- Smoking cessation



Day of Surgery



The Morning of Surgery

- You may brush your teeth the morning of surgery.
 Be careful not to swallow water.
- If you have been instructed to take your medicines the morning of surgery, use only enough water to swallow the pills.
- Shower or bathe the night before or morning of surgery. Some doctors may recommend using anti-bacterial soap.



Anesthesia for Total Joint Replacement Surgery

- Together you, the surgeon, and the anesthesiologist will decide on the type of anesthesia based on your medical history, other medical conditions you may have and your preference.
- Some options are: General Anesthesia, Spinal or Epidural Anesthesia. Your doctor will review this with you and help you decide which treatment is best for you.



It Won't Look Bad for Long!



X-ray of an arthritic right hip joint

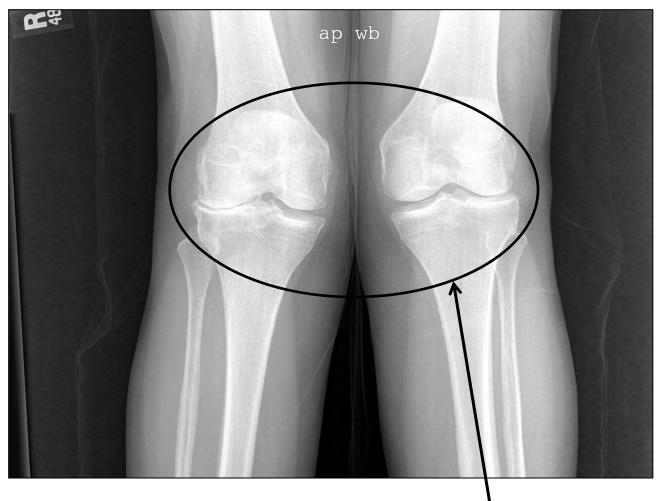


X-ray of a new hip





It Won't Look Bad for Long!



X-ray of a pair of arthritic knees



X-ray of a new knee





Antibiotic Coverage

- Antibiotics are used to help prevent infections before and after your surgery.
- Antibiotics are given one hour before surgery and for 24 hours after surgery.
- If you develop any type of infection <u>before you have your surgery</u>, notify your surgeon immediately.
- Infections must be treated and cleared before your Total Joint Replacement Surgery.
- In the future to protect your new joint, tell your dentist or doctor about your joint replacement before dental procedures, any medical procedure such as a colonoscopy or any surgery. You may need antibiotic coverage.



Care After Your Surgery



Admission to the Orthopaedic Unit

- Physical evaluation of your health status.
- Leg checks to check your circulation and nerve function in your leg.
- Routine checking of blood pressure, pulse and respirations.
- Checking your pain and comfort after the surgery.



Foley Catheter



You may have a **Foley Catheter** in place after surgery. It will remain there for 12-24 hours after surgery.

A catheter is placed to drain your bladder and monitor fluid balance.



Continuous Passive Motion Machine "CPM"



Some hospitals may use a Continuous Passive Motion Machine (CPM) after knee surgery in some cases.

The CPM does not replace "active" physical therapy and should be used during down time.



Healthy Lungs

- After surgery, you will receive oxygen through a tube under your nose.
- A monitor will often be placed on your finger to measure the amount of oxygen in your blood.
- You will be asked every few hours to take deep breaths in through your nose and out through your mouth – and cough. This helps to open your lungs and prevent pneumonia.



Incentive Spirometer



The Incentive
Spirometer is
a plastic device that
helps you to fully open
your lungs to prevent
congestion after surgery.

Your nurse or therapist will teach you how to use the Incentive Spirometer.



Post-operative Activities – What to Expect

- The staff will help you into a chair the day of your surgery if your condition allows.
- Depending on your progress and the time of your surgery, you
 may begin to walk the same day of your surgery.
- Expect to go to a physical therapy session twice daily.
- The staff will encourage and support you to move early during this time.
- Remember, the sooner you begin to use your new joint, the better it will feel.
- Being active is important for your healing.



Reporting Your Pain

- You will be asked to rate your pain on a scale of 0 to 10
 - -0 = no pain
 - -10 = worse pain possible
- It is important to tell your doctor and nurse if you have pain and ask for your pain medicines.
- It is also important to let the doctor and nurse know how well the medicine is helping your pain.
- Together, you, your nurse and your doctor will work to help make you comfortable.



Pain Management Tips

- Some level of pain is to be expected.
- Take your pain medicine before going to therapy.
- Ice the surgical area frequently and after therapy.
- Pain medicine can cause constipation.
- You may receive a stool softener to help with this. Drink plenty of fluids.
- There are many different types of pain medicines. Let your nurse and doctor know about your pain so they can help you manage it.



Preventing Blood Clots

- Medicines known as blood thinners are used after surgery to help prevent blood clots.
- Blood clots may form when you do not move for a long time.
- This medicine can be given by mouth or by injection and you will receive specific instructions on how to take it at home.
- Getting up and moving helps prevents clots.
- Exercising your leg with ankle pumps helps to get blood flowing.



Sequential Compression Device "SCD"



Gentle leg squeezers known as **Sequential Compression Devices (SCDs)** may be worn when in bed or at rest.

SCDs are used to improve circulation and to help prevent blood clots.

The SCD pumps your calf to keep blood moving.

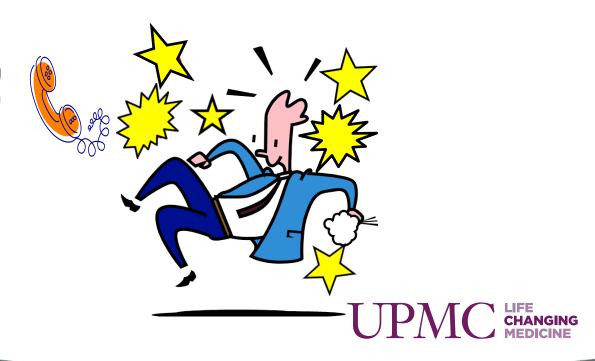


Preventing Patient Falls

Always seek assistance when getting up.

We are committed to the health and well-being of our patients. Our surgical patients sometimes fall because strength, balance and coordination may be affected after surgery.

Call, don't fall!



Preventing Falls – Please call, don't fall!







Physical Therapy after Surgery



Therapy



Being active in your therapy is an important part of healing. You will heal faster and better if you stay active!

The patient in this picture is one day post-operation.



Exercises



Your therapist will teach you your exercises.

You should continue to do your exercises after surgery until fully recovered.



Discharge Planning



Things to know

Swelling/bruising can occur for weeks after surgery

- Elevate your leg at the level of your heart several times a day.
- Apply ice while you elevate your leg and also after exercising not more than 20 minutes at a time.
- Do not sit for prolonged periods with your legs down.

Report the following to your doctor:

- Normal wounds have some redness, bruising, and swelling.
 Report an increase in redness, swelling or drainage from your incision.
- A fever of 101 degrees F.

If you experience chest pain or feel short of breath, call 911 or go to nearest emergency room.



Discharge Planning

- Plan for your discharge before your surgery to lessen the stress after surgery.
- Review discharge date daily with your nurse and doctor.
- Make sure a friend or family member knows what day you will be leaving the hospital.
- Be willing to accept help from others during your recovery.



Discharge Planning

- Arrangements may be made for a home health nurse to visit you at home. Your nurse will monitor your wound and assess your overall condition.
- Arrangements may also be made for a home physical therapist to treat you until you are able to go to an outpatient therapy facility.
- Most patients are able to return home after surgery. In special cases, rehab or a skilled nursing facility may be an option until you are able to go home.



Thank You for making "The Joint Effort"!

We are committed to providing you with a positive patient experience and look forward to seeing you soon.



