

# Total Joint Replacement

## Patient Checklist

Medical Clearance/Pre-Operative Preparation	Days Before Surgery	Done
Begin Gait training or pre-rehabilitation training	6 Weeks	<input type="checkbox"/>
Electrocardiogram (EKG) completed	30 Days (at least)	<input type="checkbox"/>
Blood work completed	30 Days (at least)	<input type="checkbox"/>
Visit Primary Care Provider and get medical clearance	30 Days (at least)	<input type="checkbox"/>
Visit specialist(s)--if necessary ( discuss with PCP or surgeon)	30 Days (at least)	<input type="checkbox"/>
Address any dental issues with your dentist	30 Days (at least)	<input type="checkbox"/>
Make appt to attend Joint Care Pre-op class(inquire with surgeon about locations) Held at PAMF offices (650-853-2018) or Sequoia Hospital (650-367-5218)	6weeks -30 Days	<input type="checkbox"/>
Confirm family or friend to drive you to your surgery and assist you when your go home	30 Days	<input type="checkbox"/>
Make Pre-Admit appt with Sequoia Hospital RN #650-367-5545 (you will have a final blood draw, review pre-op preparation needs, MRSA nasal culture will be taken)(appt. is scheduled 1 week prior to surgery)	30 Days	<input type="checkbox"/>
Have labs, EKG, Chest X-ray, etc completed and available for PCP to fax to surgeons office	14 days	<input type="checkbox"/>
Prepare home for your return from the hospital: help at home, clean linens, prepared meals available, evaluate home for fall hazards (removed loose carpets, throw rugs), shop for groceries, purchase equipment such as bedside commode, reacher, dressing supplies, hip kit,etc.	14 days	<input type="checkbox"/>
Stop shaving legs	5 Days	<input type="checkbox"/>
Wash body thoroughly with chlorhexidine soap (avoid scalp)	Night Before Surgery	<input type="checkbox"/>
Put on clean pajamas	Night Before Surgery	<input type="checkbox"/>
Put clean sheets on your bed	Night Before Surgery	<input type="checkbox"/>
No pets on bed (until cleared by MD)	Night Before Surgery	<input type="checkbox"/>
No food,gum or mints after midnight (ask hospital if clear liquids are OK the morning of the surgery)	Night Before Surgery	<input type="checkbox"/>

**Pre-Operative Medications****Days Before Surgery**

Stop taking taking blood thinners: non-steroidal anti-inflammatory, vitamins, herbal medications, supplements containing Vitamin E or Fish Oil, please consult with MD and/or Cardiologist	7 Days Before	
Start taking laxative, please consult with MD surgeon	5 Days Before	

# Total Joint Replacement Patient Checklist

## What to Pack For The Hospital

DONE

List of medications and which pharmacy you would like to use to refill prescriptions

Toiletries including toothbrush, hearing aids & case, dental implants, eye glasses & case , durable medical equipment such as a CPAP

Bring to hospital yellow arm band (given from Lab) and Inspirometer (given from Pre-op RN)

Comfortable clothing (that allows for mobility), slip -on shoes

Snacks

Entertainment such as books, magazines, iPad and charger, head phone, cell phone and charger

Advanced Healthcare Directive, copy or access to insurance card and credit card information may be needed

## What Not to Pack For the Hospital

Medications

Any valuables such as jewelry, money, etc.

## Post-Operative Follow Up Visits

10-14 days

6 weeks

3 months

6 months

12 months

*\*Discuss with your surgeon*

If any questions or concerns please feel free to contact

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