

Mercy Medical Center Merced Total Joint Replacement

Hip/Knee Replacement Surgery and Recovery



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Mercy Medical Center

Welcome

- The goal of this class is to:
 - To help you prepare for your upcoming surgery.
 - Educate on what to expect before, during, and after surgery.
 - Clarify expectation
 - What to expect and what to do to continue your successful recovery at home.
 - To reduce anxiety.



Total Joint Coordinator
(209) 564-5667



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Total Joint Coordinator

- Serves as a single point of contact for any questions or concerns
- Facilitates communication with all members of the patient's healthcare team
- Provides education
- Provides an ongoing assessment of the patients needs

Topics to be Discussed Today

- Your Joint Care Team
- Pre surgery Instructions
- Day of Surgery
- Hospital Stay
- Pain Management
- Physical Therapy program
- Occupational Therapy
- Discharge Planning
- Questions



About our Hospital



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Total Joint Replacement Awards

- **Blue Distinction Center**
 - Blue Distinction
 - Blue Distinction Plus
- **Advance Certification for Total Hip and Total Knee Replacement by the Joint Commission**



What is Your Goal?

- What is your personal goal for your replacement?
- Ex: Walking, golf, dancing?
- We want to include your goal throughout each phase of your care.
- **You will be asked this question from:**
 - Orthopedic Surgeon
 - Pre- Admit Nurse
 - 5th Floor Nurse
 - Occupational Therapy/ Physical Therapy





Total Joint Replacement Program – Center of Excellence

Preparing yourself before surgery

Prevention of Constipation

- Before surgery it is important to maintain good bowel health
- Take a stool softener 2-3 days before surgery
- Dulcolax tablets or Mirilax
- Increase water intake
- Increase fiber in diet; fruits and vegetables



Smoking

- Smoking can affect surgery outcomes which includes:
 - increasing the risk of medical complications including infection and blood clots.
 - Possible lengthening recovery time.



Alcohol Use

- Before surgery, it is important to be honest with your health care provider about your alcohol use.
- Tell your health care provider how many drinks you have per day (or per week).
 - This information helps determine if you are at risk for alcohol withdrawal or other alcohol-related problems that could occur after surgery and affect your recovery.

Diabetes Guidelines and Blood Glucose Management

- Managing your blood glucose is always important, but it is extremely important before surgery.
- Managing your blood glucose before surgery can:
 - Improve healing
 - Lower the risk of infection and other complications
- Stress before and after surgery can affect your blood glucose control which may make it more difficult to manage blood glucose levels.
- Surgery can also affect your normal diet, and may change your usual medication routine.
- When in the hospital, you may be given insulin instead of/or in addition to your regular medications. This does not mean that you will go home on insulin.

Pre - Surgery

- Decision for Surgery
 - Insurance Authorization
- Preparation
 - See orthopedic doctor for pre-op
 - Register at Mercy Medical Center
 - Pavilion 1st floor – Registration
(Free valet parking starting at 6am – 4pm)

Bring photo ID, insurance card/s, and orders from the doctor

Be prepare to do:

- Lab work
- Chest X-ray if ordered by the doctor
- EKG if ordered by the doctor



Pre - Surgery Instructions

- Prior to surgery you will meet with the Pre Admission Nurse
 - Please be prepared to discuss medications, previous surgery, and medical conditions.



Home Medications

What your doctor may allow on the day of surgery:

- Heart medications
- Blood pressure medications
- Respiratory medications
- Seizure medications
- Heart burn/reflux medications

*Bring a medication list to the hospital including

- Name of drug
- Dosage and frequency
- Purpose
- Prescribing doctor

*Do NOT bring your home medications to the hospital unless directed by your pre-admit nurse



Home Medications

What **not** to take

- Blood thinners, Aspirin
- Motrin, Ibuprofen
- *Ask your doctor specifically about Diabetes medications/insulin*
- Herbs/Supplements
- Diuretics/Water pills

*Check with your medical doctor regarding your current medications that may need to be stopped prior to surgery



The Night before Surgery:

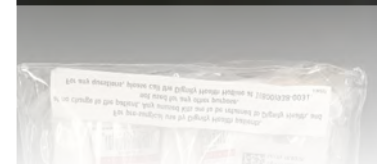
Eat a light meal.

Have nothing to eat or drink after midnight. That includes water, chewing gum, sucking on hard candies/breath mints. You may brush your teeth.

Infection Control:

No shaving of your operative leg 5 days prior to surgery.

Chlorhexidine shower: Night before surgery and morning of surgery.



Surgery Department

Day of Surgery Instructions

Report to Pavilion Registration 2 – 2.5 hours prior to surgery time.

What to Bring to the Hospital:

- Personal items such as toiletries
- STEPS Patient Guide
- Change of comfortable clothes
- CPAP if you use one

Leave at Home:

- Personal medication
- Jewelry, wallet
- Purse

- Remember:
 - no makeup, nail polish or perfume, deodorant is ok
 - remove contact lenses and jewelry
 - be prepared to remove dentures or partial plates

Welcome to the Peri-Operative Department



- You will meet your pre op nurse.
- During this time you will:
 - Get weighed
 - Change into a gown
 - Vital signs
 - Nurse will wipe down site with antibacterial wipes
 - Chart review, interview and teaching by the nurse
 - Consent for surgery
 - Opportunity to ask questions

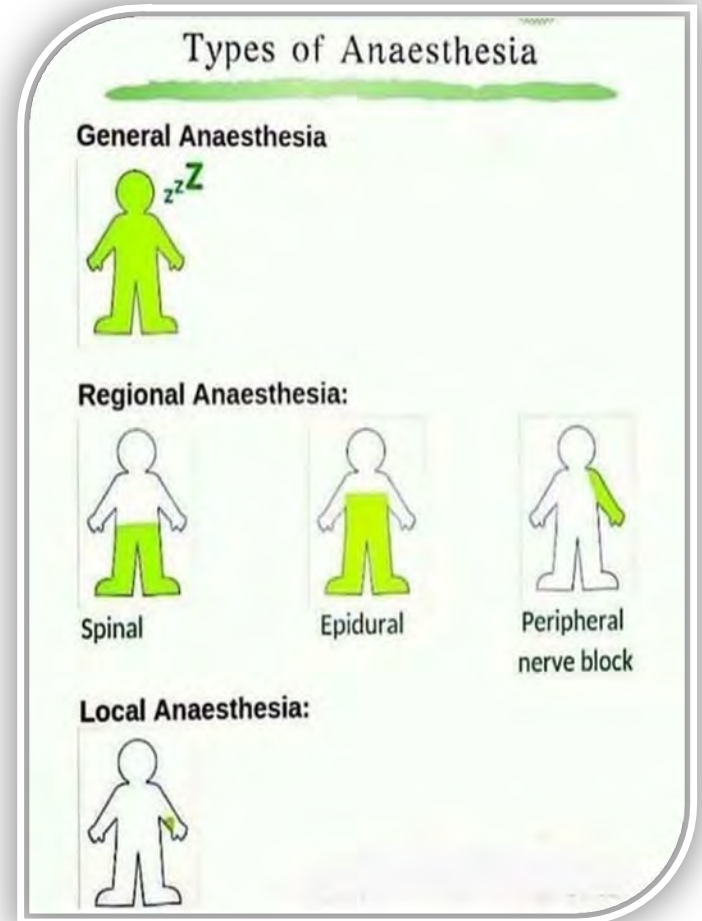
Tips for a Safer Surgery

- **To avoid wrong site surgery:**
- You will be asked to identify yourself & your date of birth & the site of surgery.
- Your team will review the procedure & side with you and ask you to verify.
- Your surgeon will mark the site of your surgery.



Anesthesia

- You will speak with an anesthesiologist about the type of anesthetic that will be best for you.
- Anesthesia:
 - Spinal
 - Nerve Blocks for knee replacements
- Varying Sedation:
 - General Anesthetic

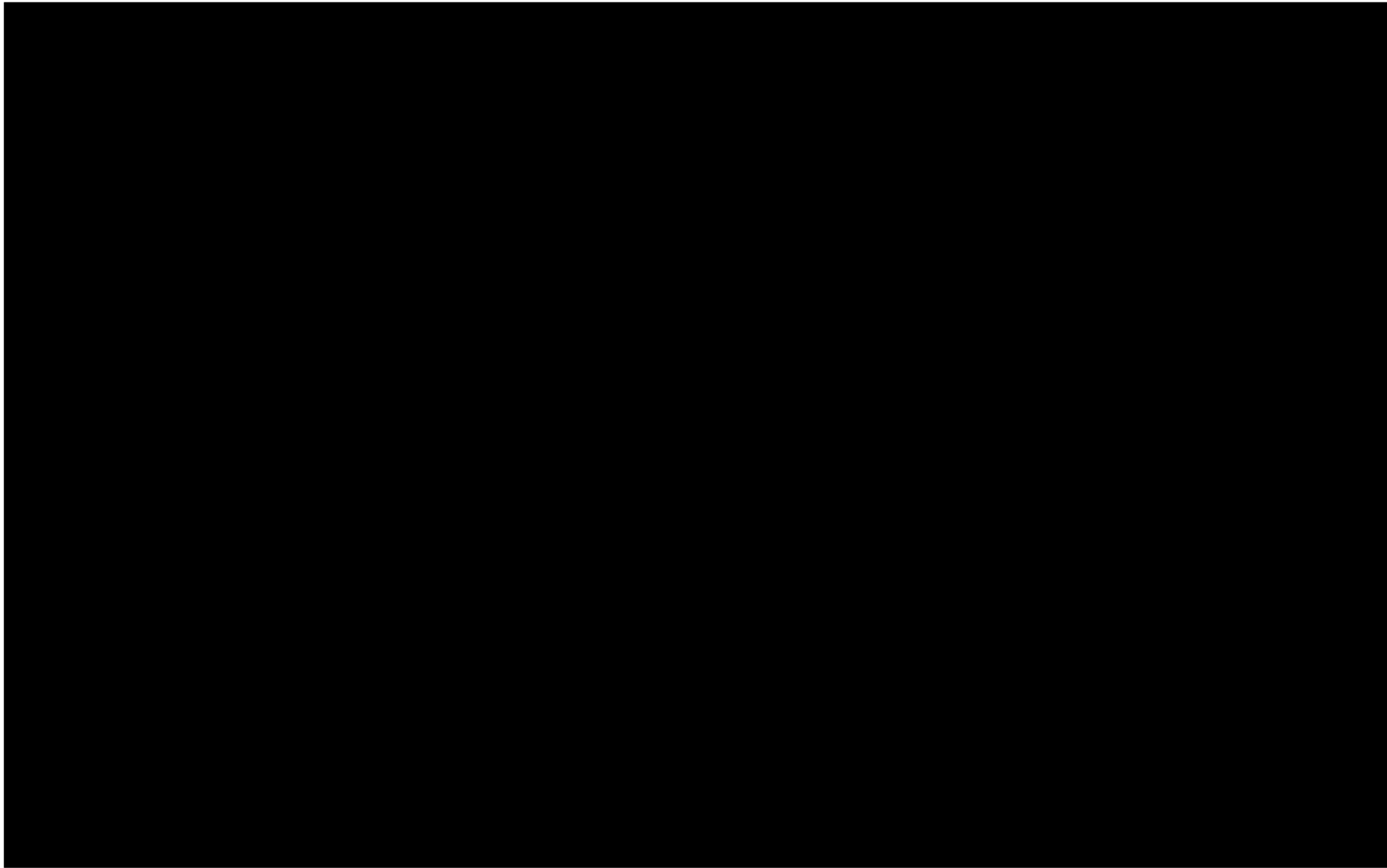


On to the Operating Room

- You will be taken into the Operating Room lying on a gurney
- Surgery may take 1-2 hours.



Arthritis and Surgery



Recovery Room (Post Anesthesia Care Unit)

- After surgery you will be moved to the recovery room (post anesthesia care unit). Your Surgeon will call to speak with your designated family member or friend.
- The recovery room nurse will be managing your care
 - Goals: Recovery from Anesthesia, Pain Control, Focus on relaxation, oxygen, vital signs, nausea management
- You can expect to be in recovery for about 1 hour.
- Once you are stable, you will be transported to the Medical Surgical Unit, located on the 5th floor.

Welcome to the 5th Floor



Patient Room

- You may receive a single or double room.
- There is a TV in each room.
- Please do not bring valuables to the hospital!
- Mercy Medical Center has a guest Wi-Fi network so you can connect to the Internet using any mobile device.
- Remember hand washing by entire team, family members & visitors.



Whiteboards in Patient rooms

The whiteboard form is organized into several sections:

- Room**, **Day**, **Date**
- MY ROUTINE** (with a grid for notes)
- WHAT'S IMPORTANT TO ME** (with a grid for notes)
- MY DOCTOR**, **MY NURSE**, **MY NURSING ASSISTANT**, **CHARGE NURSE**, **CARE TEAM**, **FOOD SERVICES - 209.564.3663** (all in black boxes)
- I NEED HELP WITH:**
 - BATHING
 - FEEDING
 - WALKING
 - TURNING
- DIET**
- PRIMARY CONTACT:**
- MY PAIN SCALE** (0 to 10 with smiley faces) and **PAIN GOAL**
- PAIN MEDICATION AVAILABLE**

Whiteboards in each patient room are kept current with important information:

- Names of caregivers – Doctors, RN's
- Patient's personal goal
- Next time pain medication can be given
- Plans for discharge

Patient Care Plan

Day of your Surgery:

- Bladder catheter, I.V., wound drain
- Call Light for assistance
- Incentive spirometer (I.S.) every 4 hours while awake
- Cold therapy may be applied to your joint, if ordered by your Surgeon
- SCDs, TEDS, Ankle pumps hourly while awake, as ordered by your Surgeon
- Physical therapy will be in to evaluate you for early mobilization (walking)



Cold Therapy



Pain Management

There are a number of different types of pain control methods available that will keep you comfortable.

- ❖ Oral medications
- ❖ Injections into the knee/hip during the surgery
- ❖ Relaxing music and visual imagery

The aim of good pain control is to decrease the pain before it becomes intolerable!

- ❖ You will be asked by your nurse to rate your pain on a scale of 0-10; 10 being the worst pain you have ever had.
- ❖ Be verbal with your nurses and let them know if the pain medication is or is not effective in controlling your discomfort.
- ❖ This isn't the time to "tough" it out! Good pain control increases your mobility and speeds up recovery.

Pain Management - Multimodal

- Multimodal pain management is the practice of using different types of treatments to manage pain
- You may be offered ice and repositioning to help with comfort
- We may offer pain medication
- Other ways to manage pain include distraction – listening to music, watching a movie, a puzzle book
- Ask your nurse for help with some of those items

Important Tips from Dietary

- Keep personal belongings like denture, glasses, wallets off your meal tray.
- Eat well... heal well...
- Because we care, you can build your own meal from our personal choice menu, or substitute meal items.
- Make use of the Nutritional Hotline at 3663.
- Feel free to ask for menu assistance or dietary education.



Hospital Stay

POD#1 (post operative day one) – Some patients will be going home today.

- Lab will be in early to draw your blood
- Dressings may be changed and expect drains and urinary catheters to be removed
- Staff will assist with your personal hygiene needs, dressing and plan to have you up to the chair for breakfast
- Deep breathing and coughing exercises every 4 hours while awake
- Rotate ankles and wiggle toes
- Physical Therapy will see you twice today
- Occupational Therapy will see you once today
- Care Coordinator Visit Discharge planning

Occupational Therapy

Therapy Sessions

Activities of Daily Living

Adaptive Equipment and Devices



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OCCUPATIONAL THERAPY

- The everyday activities that people **do** as individuals, in families and with communities to occupy time and bring meaning and purpose **to** life.
- Occupational Therapists instruct patients and their families on the use of adaptive techniques/equipment to increase independence and maintain your surgical precautions.
- Initial Evaluation will be POD #0 or POD#1, OT will train in ADLs and recommend any equipment you might need.



Adaptive Devices in OT

- Adaptive devices assist in increasing independence.
- These devices are TEMPORARY while recovering from surgery.
- Not covered by insurance.



Durable Medical Equipment for ADLs



Physical Therapy

Therapy Sessions

Coach Program

Equipment

Exercises



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Physical Therapy Sessions (POD #1)

You will :

- Have one to two sessions each day (Depends on time of Discharge)
- Be seen in your room or in a designated activity area
- Receive pain medication prior to the treatment
- Be instructed in your exercise program, which has been created to improve your functional mobility by increasing the range of motion and strength of your legs.
- Review your precautions
- Increase your walking distance and activity
- Learn stairs if needed

Durable Medical Equipment (DME)



Total Hip Replacement Precautions

- You MAY or MAY NOT have hip precautions
- You will be instructed on YOUR specific mobility guidelines by the Physical and Occupational Therapists
- You will be expected to memorize your precautions and demonstrate your ability to apply them to all of your activities.



Post Operative Knee Precautions



Do not pivot while standing.

Do not dangle weights on your leg.

Do not place pillows under your knee.

- Follow proper transferring procedures when getting in and out of your car.
- **Do not** kneel, squat, or jump.



Physical Therapy Exercises

- Exercises to be done before surgery and after surgery.



Care Coordination



Care Coordination Goals

- Coordinate with you, your physician, physical therapist and other clinical staff with recommendations of needs and resources for after discharge.
- Verify insurance coverage for services needs at discharge, order durable medical equipment as needed, make referrals needed post-operatively.
- Assist in establishing any services needed in transferring the patient from the hospital to home.
- Assure proper follow-up of the patient during the post-discharge phase, detect any problems, and treat those problems as necessary.

When it's time for Discharge:

We want our patients to return to their homes as soon as possible.

Most patients are healthy and heal much better in their own home environment.

Once you are discharged there are several options available to continue your therapy:

- Home Health Care
- Outpatient Physical Therapy
- Skilled Nursing Facility for Rehab

Requirements for Discharge

- Regular Diet
- Stable vitals
- Good management of pain and swelling
- Increase independence with activity and mobility



Discharge Medications:

- Pain Medication
- Blood Thinner
- Bowel Medication

Return to previous medications:

- Check with physician if any changes should take place

-
- Consider the vehicle you will travel home in. You will be more comfortable getting into a sedan or small SUV.
 - We will practice safe transfer techniques and stair training with your Coach or family member prior to discharge.
 - Do not drive until your surgeon approves.



Preparing for Home



Things to keep in mind as you prepare...

- You are **NOT** sick!
- **HOME** is the best place to recover as soon as you can
- **PLAN** to go home after one night in most cases
- Remember **WHY** you are here- what are your **Goals**???
- Arrange for help at home prior to surgery (**Steps Coach**)
 - Who? Family, Friends, Neighbors
 - When? Few days after discharge
- Arrange for transportation to and from surgery

STEPS Coach

Designed to allow patients increased walking, not a replacement for P.T. or nursing care.

- STEPS Coach is a loved one who will be present in the hospital before, during and after surgery.
- Steps Coach Duties:
 1. Review the education booklet
 2. Attend the Joint Replacement Class
 3. Help set up home for recovery
 4. Plan to stay with patient for at least 72 hours after surgery
 5. Be present for the Initial Physical Therapy visit
 6. Be present for subsequent treatment for your Training

The coach will not be needed to lift or carry the patient, only to help guide or remind patient what needs to be done. Patients who have a coach are more prepared for discharge and are less likely to have complications from surgery.

Preparing your Home

- Get prescriptions filled
- **Remove all throw rugs and power cords** from kitchen, bathrooms and entryways
- Place commonly used item at waist level in kitchen and bath
- Contain your pet the day of your homecoming
- **You will need a walker!!!**
- Use Your Walker until your doctor or therapist instructs you otherwise
- Make sure your home has good lighting, nightlights work well for late night trips to the bathroom
- If your bedroom is on the second floor, find a room and bathroom on the first floor or plan to minimize trips up stairs during your initial recovery
- Prepare meals in advance
- Use chairs that have arms, avoid chairs that are too low or has wheels

Home Exercise Program: Mobility is Medicine

- Following home exercises are important to perform before and after surgery. It is important to be as strong as possible before surgery to help in your recovery.
- These exercises will build strength and range of motion to aid with getting in and out of bed, standing up, and walking.
- Depending on the type of surgery and your progression, the physical therapist will let you know which exercises will be appropriate for you to perform.
- Please do not add any other exercises to the routine until instructed to do so.
- Do your home exercises 2 – 3 times a day.



Mobility is Medicine
Have You Had Your Daily Dose?

At Dignity Health, we believe **Mobility is Medicine**—that when you are up and moving, you are healing faster. Research shows that staying in bed can actually cause additional health problems such as pneumonia, weakness, and blood clots just to name a few. And these negative changes can start within just one day of bed rest!

When you are up and moving, you will:

- fight infection better
- breathe better
- be less constipated
- have less skin breakdown
- sleep better and feel less fatigued
- help your bones and muscles stay stronger, and your joints be more flexible
- improve your appetite
- avoid blood clots

Being up and moving even a little bit every day will help you on the road to recovery. You can get all of the benefits described above by doing such things as:

Sitting up:

- in a bedside chair for meals or when you have visitors.
- in a chair or wheelchair in common areas in the hospital.

Walking:

- to the bathroom to brush your teeth, shave, etc.
- around the unit, with help as needed.

Your care team will work with you to determine which activities are safe for you, and what assistance you may need with getting up and moving around.

Remember, Mobility is Medicine and will help you heal faster. Have you had your daily dose?

 **Dignity Health.**

Be Comfortable

- Take your pain medicine at least 30 minutes before physical therapy.
- Continue to **increase your activity** level, as directed by your physician and physical therapist.
- **Get up and move** around during the day every hour to keep circulation going.
- Use ice for pain control. Applying ice to your affected joint will decrease discomfort, but do not use for more than 20 minutes at a time. You can use it before and after your exercise program.

Pain Medication Safety

- Only take the amount of pain medicine that is prescribed by your doctor
- Keep track on a notepad or calendar how frequently and at what time you are taking your pain medication
- Do not mix alcohol or sedating medication such as Valium, Ativan, or Xanax with opioids
- Take the LEAST amount of opioid medication that you need in order to make the pain tolerable
 - Try other techniques such as ice, distraction, relaxation, etc.
 - Take non-opioid medications such as Tylenol* to help manage pain
 - PLEASE NOTE THAT NORCO, VICODIN AND PERCOCET HAVE TYLENOL IN THEM – NEVER TAKE MORE THAN 4000 MG PER DAY



Remember

Medication

- Pain medication can be constipating:
 - Drink plenty of water intake.
 - Increase fiber rich foods in your diet.
 - Your surgeon may instruct you to take a stool softener to prevent constipation.
 - Colace (stool softener)
 - Milk of Magnesium (laxative, if needed)
- If you have been prescribed a blood thinner for prevention of blood clots remember to continue these per your physician instructions.



Discharge Instructions

Discharge Instructions

Incision Care:

- Your incision should remain clean and dry
- If your surgeon has used a water proof dressing, you may shower
- Do not immerse in water such as a bath or hot tub until cleared to do so by your surgeon
- Do not put any creams on your incision unless ordered by your doctor
- Avoid touching your incision



Infection Prevention



Be Aware!!!!



Incision Care & Swelling Management:

- Some drainage is normal
- Swelling and bruising are common after surgery

When to call your physician:

- Fever over 101⁰ F
- Unusual redness, heat, or drainage from your incision
- Pain in your calf muscle that is not relieved by medication
- Blood in your urine
- Sudden onset of severe pain or limited motion in your joint

In any other situation Call 911 such as CHEST PAIN OR SUDDEN SHORTNESS OF BREATH !!!!!

Important Numbers and Website

- Pavilion Registration: 209-564-3100
- Pre – Admission Nurse:
 - Susan, RN – 209-564-3001
 - Sue, RN – 209-564-3002
 - Alma, RN – 209-564-3011
 - Nora, RN – 209-564-3012
- Peri-operative Department: 209-564-5148
- Total Joint Coordinator: 209-564-5667
- Mercy Medical Center Total Joint Replacement Website:
<https://www.dignityhealth.org/central-california/locations/mercymedical-merced/services/orthopedic-services>

Or Google

Mercy Medical Center Merced Orthopedics ☞ “Orthopedic Services | Mercy Medical Center | Dignity Health”

Please be sure to review the **Steps Program** page for additional handouts



Thank You for allowing
us to care for you.

We look forward to having you accomplish your
personal goals.

