

Total Joint Replacement Tip Sheet

Congratulations! You've been scheduled for joint replacement surgery with our excellent team at Carson Valley Health!

To help you better prepare for your upcoming surgery, we have created this tip sheet to refer to, before and after your procedure. If you have any questions, please contact the CVH surgery admitting office at 775.782.1595.

Please consider attending our Total Joint preparation class at Carson Valley Health's Rehab and Outpatient Therapy Center, visit our SURGICAL SERVICES and EVENTS & CLASSES page on www.carsonvalleyhealth.org for schedule and additional information.

Pre-operative Education and Preparation

- Please contact your primary care provider (PCP) and schedule an appointment for surgical clearance to be seen as soon as possible. *This is for your safety.* If you see a cardiologist or other specialists such as a pulmonologist, nephrologist, or oncologist you may also need to be cleared by them.
- 1-2 weeks prior to your surgery date you will be contacted by one of our Pre-admit nurses to review your medical/surgical history, medications, etc. Additional testing or clearance may be requested:
 - o Possible EKG or labs that might be required before or day of surgery
- A CHG (Chlorhexidine Gluconate) shower kit will be supplied to you, either from your surgeon's office, CVH Surgery admitting office or available at the Joint class.
 - o Shower using the kit 2-3 times before surgery.
 - o Avoid using this cleanser on your head, face and genital region
 - o Use clean towel after each shower
 - o Dress in freshly washed clothes
 - o Antibacterial soap such as Dial can be used if you are unable to acquire a CHG shower kit
- Durable Medical Equipment (DME) you may need after surgery:
 - o Front wheeled walker (avoid four wheeled walker), crutches, toilet seat riser, shower chair
 - o **OTC equipment**- waterproof cast covers, long handled shoe horn, grabber, plenty of ice packs, cane
 - o If your Surgeon has recommended a CPM machine (continuous passive motion machine), sequential compression device or cryo cuff (ice machine) please **follow-up with your surgeon's office** before day of surgery on delivery and usage of equipment

- Additional medications you may need after surgery
 - Any over the counter stool softener and laxatives to prevent constipation from pain medications (ex, colace, dulcolax, senokot, miralax, etc)
 - Aspirin tablets for blood clot prevention
- Prepare living space by removing all area rugs, add hand rails in bathroom and at stairs, proper lighting, personal belongings/ everyday items within reach for after surgery to avoid bending/ reaching, plan for care and management of pets
- Be mindful of surgical site skin integrity, notify your surgeon ASAP if any rashes, scratches, opens wounds are present at the surgical site prior to surgery
- Discuss in advance with your Surgeon about outpatient physical therapy expectations, make appropriate appointments
- Please arrange to have help for at least 24 hours after anesthesia and possibly for some time after surgery.
- **Pain management patients-** Discuss pending surgery with your pain management specialist, confirm plan of care for management of postoperative pain
- If you use **home oxygen**, please make sure to have supply available to continue use after your surgery.
- Loose comfortable clothing that is easy to pull over bulky surgical dressing
 - Avoid wearing jeans or tight fitting clothing
 - appropriate shoes
- If discharge criteria is met and PT/OT evaluation is successful, discharge home is likely. Remember, every patient and joint is different.
- Please, have realistic expectations: full recovery can take months to a full year

Day of Surgery

If you are experiencing any signs or symptoms of a cold, please call Surgery admitting desk ASAP, 775.782.1595.

- Follow NPO guidelines as directed by pre-admit nurse
- Make bed up with clean sheets
 - To help prevent infection, please keep pets off/out of bed until surgical site is healed
- Shower using CHG wash kit or Dial soap morning of surgery
 - Use clean towel
 - Wear freshly washed loose fitting clothing and appropriate shoes
 - Do not wear lotion or perfume
- Leave all jewelry including piercings and other valuables at home
- If labs and EKG are to be done on day of surgery, please arrive early
- Bring C-PAP/BI-PAP if applicable
- If you are on home oxygen bring portable tank with you to surgery for transportation
- Local pharmacy preference- Electronic prescriptions are typically sent to your pharmacy of choice after surgery. If possible, we ask that you consider avoiding Walmart pharmacies as they tend to deny many narcotic prescriptions.

Recovery

- Expect some pain after surgery, we will manage pain to a tolerable level
- You may receive regional anesthesia (nerve block) with your surgery. Effects may last up to 20 hours +/- and work differently on each individual. You may experience pain, numbness, tingling, and/or weakness on the affected extremity.
 - Begin pain medication before nerve block wears off
- Physical therapy/ occupational therapy may meet and evaluate you in the recovery room, if nursing criteria is met (vital signs stable, pain tolerable). Physical therapy will help with mobility while occupational therapy assists with self-care techniques
 - Expect to be up and walking with walker within a few hours after surgery, along with practicing toilet/ car transfers and stairs if applicable
 - Discharge home pending PT/OT evaluation
- **Please have arrangements for care at home for 24 hours after anesthesia and possibly longer**

- **Discharge home**

- o Discharge education and instructions vary with each surgeon. They will be reviewed with you and your caregiver. Printed instructions will be supplied upon discharge.
 - Expect a follow-up phone call from the CVH surgery department the next day during business hours, 7 am- 6 pm
 - For urgent matters and questions regarding your prescriptions please contact your surgeon directly
- o To help prevent postoperative pneumonia, please use your Incentive spirometer frequently while awake for the 24-36 hours
- o When to resume or start new medications will be reviewed
 - Over the counter stool softeners or laxatives to prevent constipation from narcotic pain medications (ex, Colace, Miralax, Senokot)
 - Aspirin or other blood thinner for blood clot prevention
- o Diet
 - If tolerated, start light and slow. Advance as tolerated. Avoid greasy and spicy foods to start
 - Increase fiber and fluids to avoid constipation

- **Possible admission to hospital, if**

- o pain is not relieved or at tolerable level
- o vital signs are unstable
- o did not meet PT/OT criteria for discharge
- If you are admitted, discharge is often not immediate the next morning, you could potentially stay until PT/OT is able to evaluate in afternoon

Following day(s) postop

- When to seek medical attention
 - Temperature >101.0f
 - Excessive bleeding from surgical sight
 - Excessive pain or nausea not relieved by medication
 - SOB or chest pain call 911
- Your first postop appointment with the surgeon is usually 7-10 days after surgery
- Outpatient physical therapy appointments are typically scheduled to begin the first week after surgery
 - Continue range of motion/ strengthening exercises at home
- Wound care
 - Dressing changes, if applicable
 - Bathing- no submerging in bath tubs, swimming or hot tubs until cleared by your surgeon.
 - Use fresh clean towel after each shower until wound is healed
- How/when to discontinue use of narcotic pain medication and transition to non-narcotic pain control
 - Do not drive while taking narcotic pain medication
 - Once pain is tolerable or use of narcotics is becoming infrequent transition to alternative non-narcotic pain medication (NSAIDs, Tylenol)
 - Be aware that many prescribed pain medications contain ACETAMINOPHEN (Tylenol), **do not take additional Tylenol** if it is already in your pain pills
- Continue to ice the surgical site as needed, 20 minutes on at a time (always be sure to have a piece of cloth/towel between ice pack and skin)

Notes:
