

# Guide to Total Joint Replacement



**Joints in Motion**  
Total Joint Replacement Program

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# How to Prepare Your Home



## Before Surgery

The most important planning you should do is to arrange for someone to stay with you for one to three weeks once you return home. Most patients leave the hospital one to three days after surgery and will need help with things like bathing, dressing, preparing meals and getting to doctor visits.

### **Modifying Your Home For Safe and Easy Mobility**

- Remove all throw rugs, which might cause you to slip and fall.
- Make sure that you have a high, firm chair with armrests to help you sit and stand.
- Remove any furniture or clutter which might cause you to trip and fall. Items in stairways and hallways should also be moved.
- Put the most frequently used kitchen utensils and food on shelves and counters that can be reached easily.
- Find someone to help care for or feed your pets.



# Preparing to Stay at the Hospital

## **Are there any medications that I should stop taking before surgery?**

Ask your orthopedic doctor if you should stop taking any medications or herbal supplements before coming to the hospital. People are usually told to stop taking aspirin, products with aspirin, blood thinners (such as Coumadin) and medications such as Advil, Ibuprofen, Aleve, Goody's or BC powders. It is important to ask the doctor when to stop taking these kinds of medications. If you need medication for pain relief, ask your doctor about ordering an aspirin-free product.

## **What do I do if I smoke?**

The hospital is a tobacco-free environment and you will not be allowed to smoke on the hospital campus. You should try to quit smoking before your surgery or you will need to discuss alternatives to smoking with your doctor so he can be prepared to order you a patch or offer other solutions to help you through your hospital stay.

## **What do I bring with me to the hospital?**

- A list of all the medications that you are taking with the dosages and the times they are taken. (Do not bring any medications to the hospital.)
- A short housecoat or robe that opens down the front. You may not be able to wear your pajamas right after surgery because of IVs and tubings you will have.
- Comfortable supportive shoes for when you leave the hospital. Low heeled, non-skid are suggested. Backless bedroom slippers are NOT safe to use after joint replacement surgery.
- Short gowns, pajamas, underwear, socks/stockings and one set of loose, comfortable clothes to wear home.
- Any specialized ankle, foot or leg braces that assist you in walking.
- Any favorite items that you may want for personal care, like lotions or makeup.
- Education materials you received at preadmission classes that you would like to reference and/or take notes in may be helpful.
- A copy of your Living Will and Healthcare Power of Attorney if you have either one. Hospital staff are required to ask for these when you are admitted. Hospital staff will make a copy for your medical record and return your original to you.





Drainage Tube



IV Line



Foley Catheter

**You will NOT need to bring:**

- Copies of your insurance card or your ID to your hospital stay because these items will have already been entered into the system during your pre-op visit.
- Any walking aid that you are using at home, like a walker or crutches. While you are in the hospital, we will bring to your room the appropriate walking aide for you to use with our assistance. If you need equipment for further use at home (like crutches, a walker or bedside commode) we will arrange for equipment to be ordered for you before you discharge from the hospital.

**When will I be admitted to the hospital?**

You will be admitted to the hospital the day of your surgery. Specific information will be explained to you during your pre-op visit about your surgery day/admission day and then the nurse on the day of surgery will further explain your stay. General information about your surgery is explained below.

**What bandages and tubes may be used?**

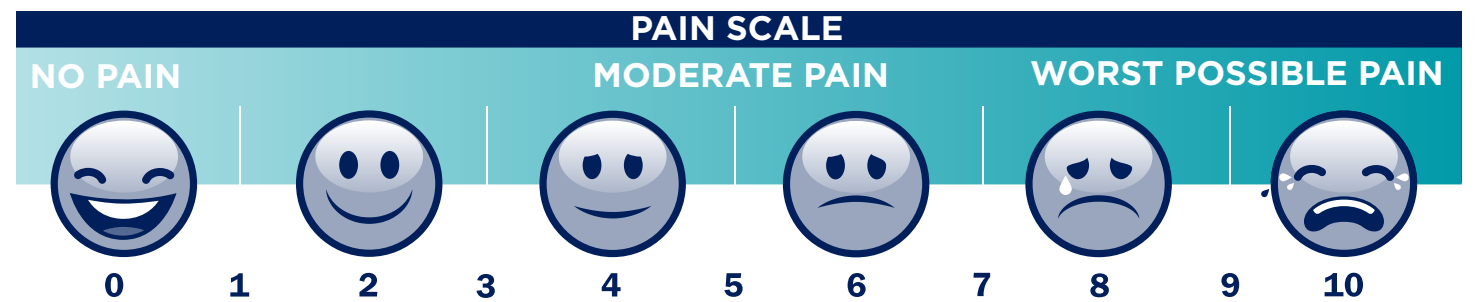
- **Bandage**  
Staples are usually used to close incisions. There will be a bandage on the incision, which will be changed according to your doctor's orders. This may or may not be during your hospital stay. Your discharge orders from your doctor will help guide this process.
- **Drainage Tube**  
Your doctor will decide if you need one of these or not. This tube comes from under your bandage and drains blood from your incision into a small round container to help decrease swelling. Your nurse will empty this container every eight hours or more often if needed. This tube will be removed by your doctor one or two days after surgery.
- **IV Line**  
This is a tube that is connected to a small plastic needle placed in your vein. You will be given fluids and/or medications through this tube for a day or two after surgery.
- **Foley Catheter**  
This is a small tube that is placed in your bladder and connected to a drainage bag. Your doctor will decide if you need one of these or not. The Foley Catheter measures your urine after surgery. If you have a Foley Catheter, the goal is to have it taken out within 24 hours after surgery.



# How Will My Pain Be Controlled?

Your physician will order medicine to ease your pain. This medicine may be given to you by pill, IV, injection, pain pump or epidural. Ice packs may also be placed around or on your surgical site to help control your pain. Other things you can do to help control your pain include:

- Listening to music
- Watching television
- Enjoying visits with family and friends
- Reading books



### How can I position myself in bed?

A staff member will help you to turn and change your position in bed. Do not try to turn yourself.

### For hip replacement

**surgery:** DO NOT twist your leg when turning or rolling in bed. It is best to have a bed pillow between your legs when rolling from side to side. The pillow will remind you to keep your legs apart.



### For knee replacement

**surgery:** DO NOT PLACE A PILLOW UNDER YOUR KNEE while resting in a recliner or in bed. If you place a pillow under the knee it may become stiff and difficult to straighten your knee.



### How soon can I get out of bed after surgery?

This is not the same for every patient, and your doctor will decide what is best for you. Most likely your nurse will help you sit on the side of the bed the day of your surgery, if your doctor says it's okay. Also on the day of surgery, you may have your first physical therapy session that may include exercises, sitting on the edge of the bed and/or walking. You must always ask for help when trying to move in bed or getting out of bed. You do not want to take a chance of falling.



# How Can I Help Myself After Surgery?

### How can I help myself after surgery while I am here?

- Do breathing exercises to help your lungs. Take deep breaths and cough every one to two hours. Your doctor may order an item called an Incentive Spirometer to help you take deep breaths. This helps post-operative breathing problems. Your nurse will teach you how to use this device if ordered by your doctor.
- To help prevent constipation, drink plenty of fluids and eat foods high in fiber such as fruits and vegetables as your diet allows.
- Limit your time in bed. Getting out of bed is important, however DO NOT get out of your bed or chair without staff help.



**Incentive Spirometer**

### How can I improve my circulation?

Your doctor may order one or more of the following to help prevent blood clots and improve circulation:

- There are 2 kinds of inflatable devices. One wraps around your lower leg and one wraps around your foot. One of these may be applied after your surgery. These alternate with air (inflating and deflating) helping to keep circulation going while you are still in bed or in the recliner.
- Elastic support stockings may be applied before and/or after surgery. If any of these items are not comfortable, please tell your nurse or your doctor.
- Aspirin or blood thinners may also be ordered by your doctor and given to you by your nurse.
- Exercises and moving will assist with your circulation. Your Physical and Occupational Therapist will begin teaching you some simple exercises you will be able to perform by yourself in bed and/or in your recliner, as well as begin helping you to move and walk. These will be very important and helpful for swelling and circulation while minimizing stiffness.



# Rehabilitation During My Hospital Stay

During your hospital stay, your physical and occupational therapists will help with planning your transition from hospital to home. Part of this planning will be teaching you possible safety tips you need to follow, including how to move in bed, sit, stand, walk, bathe, dress and get in and out of a car properly. These safety tips will be based on the type of surgery you are having. When you leave the hospital, you should be able to get in and out of bed, walk to the bathroom, dress and bathe, get in your house and do all exercises with the help of a friend or family member. Your therapist may make changes to your program to meet your special needs. Any extra handouts that you need will be given to you by your therapist during your hospital stay. By working with your physical and occupational therapists, you should feel safe and confident in these activities when you return home.

### Rehabilitation Tips You Need to Know

- Do not twist your body to reach for things.
- Do take small steps to turn the walker with you.
- Do not climb on a footstool or ladder to get things from high places.
- Do not sit on a sofa because sofas are usually too low, too soft and do not have two armrests that you can use to push up.



# Preparing for Discharge



Your doctor's office may start the discharge plan. Discharge options will be discussed with you and your family. Once you are in the hospital, a Registered Nurse from the Care Management department will help with your transition out of the hospital. It is important to note that Medicare and most insurance companies only cover skilled services such as nursing and physical therapy. If your doctor's office sets up these services before your surgery, you should hear from the company before you come in to the hospital. If needed, the hospital case manager will have lists of home health agencies and information regarding private duty agencies.

## **When will I be able to go home?**

Your doctor will let you know when you are medically stable to go home with your caregiver or to another facility for further rehabilitation from Physical and/or Occupational Therapy. In order to transition home, your physical and/or occupational therapist will help guide you on how well you are moving and educate you and your family on how to help you do these things (walking, getting in and out of bed, getting into your home if you have steps and getting in and out of a car).

## **What are my discharge options?**

Most patients go directly home one to three days after total joint replacement. It is important to plan for someone to stay with you for one to three weeks after your surgery. This person should be able to help with bathing, dressing, meals and getting to doctor appointments. Most patients need some type of follow-up therapy once they leave the hospital. Depending on your individual needs (medical status, homebound status, etc.), you will typically get either outpatient therapy or home health therapy. Your case manager will work with your healthcare team in the hospital to help in deciding your options. If you need additional time to recover before returning home, there are options for continued care after your hospital stay, such as a skilled nursing facility or an inpatient rehabilitation center. Your healthcare team will help you decide if you are a candidate for any of these options.





### Important things to remember about your care.

- If you have support stockings, continue to wear them after you go home. Take these stockings off for about 30 minutes two to three times a day for bathing and skin care. You will need help taking these stockings off and putting them back on.
- Tell your doctor and dentist that you have had a joint replacement before having any type of surgery or dental work.
- Remove throw rugs and beware of wet spots or objects on the floor that could cause you to slip and fall.

#### Call Your Doctor If:

- Your temperature is above your normal or 98.7 degrees, experience shortness of breath, have chest pain or have pain/tenderness in your calves.
  - You have sudden increase in pain or an unusual feeling that does not go away when you move around.
  - Your pain worsens and/or you experience loss of use in the leg that was operated on.
- Continue to do your exercises at home as taught by your physical therapist. Your home health or outpatient therapist may change some of these exercises as you get stronger.
  - Use ice packs on your hip or knee after exercising, walking or if you notice any swelling. Be sure to check with your doctor before adding any activities.
  - Increase your activity as you are able. Follow your joint precautions or weight bearing restrictions at home at all times, as they were taught by your physical therapist and/or occupational therapist.
  - Be very mindful of your bowel movement patterns to prevent constipation. Check with your doctor and nurse before you leave the hospital to determine things you can do to prevent constipation. Here are a few tips:
    - ❖ Drink more fluids and eat more fiber, unless told otherwise by your doctor or because of other medical problems.
    - ❖ Prune juice, over the counter stool softeners and laxatives may be used for constipation, unless otherwise told by your doctor.
  - Follow your doctor's instructions on changing bandages, bathing and incision care. Here are a few tips.
    - ❖ Keep the bandage clean and dry at all times. If the doctor allows dressing changes, check with your nurse before discharge as to what the dressing should be.
    - ❖ Never apply ointments or creams to the incision unless otherwise told by your doctor.
    - ❖ Wash your hands before and after touching your incision or bandage.
    - ❖ Do not allow anyone to touch your incision or bandage without washing their hands.
    - ❖ Check with your doctor for instructions on when you can shower. Bathing can still be done at the sink, tub or shower as long as the incision stays dry and you remain safe. Follow the instructions taught to you by your physical or occupational therapists on how to stand and/or enter the shower/tub area safely. They will review this with you while you are in the hospital and continue to educate you when you return home through your home health or outpatient therapists as needed.
    - ❖ At your first follow-up appointment, your doctor may allow showering with no bandage on your incision, but this too is specific to each doctor's instructions. Follow your discharge instructions as ordered by your doctor until you see him/her at your first follow-up appointment.



## Intimacy:

# The “Hidden” Question

Your questions about sexual activity after having a total joint replacement are a valid and important part of your recovery process. Many people want to know when they can start sexual activity and how to protect their new joint after surgery. First, talk to your partner or spouse about your surgery process and changes in sexual activity after surgery. Next, talk to your doctor about the recovery (healing) process and when it would be the right time to start sexual activity. Lastly, take the time to teach yourself about things you cannot do and safety tips used to help protect your new joint. Proper positioning of the hip and knee (depending on which joint replacement you have had) during sexual activity is very important to reduce pain and stay within a safe range of motion. We understand that intimacy is a very sensitive and personal topic for many people. If you would like to learn more about intimacy, talk with your doctor or a member of your health care team.

# Questions for My Doctor

Below are suggestions for questions you may want to ask your doctor. Use this space to add additional questions for your doctor.

When may I shower, take a tub bath or get my incision wet?

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How long should I wear my support stockings (elastic hose)?

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When may I put all my weight on my operated leg?

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When may I drive my car?

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When do I go to the physician's office for my first follow-up visit?

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When can I go back to work?

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# Joints in Motion

*Total Joint Replacement Program*

## **Joints In Motion**

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