

Joint Camp Basics



NEWMAN
REGIONAL HEALTH
MEDICAL PARTNERS
**ORTHOPEDICS &
SPORTS MEDICINE**



OrthoKansas
Emporia

Thank You

We know you have a choice in healthcare providers. Thank you for choosing Newman Regional Health and OrthoKansas for your joint replacement needs. We look forward to caring for you throughout your joint replacement process.



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Contact

Please feel free to contact our office with any questions or concerns that arise before or after surgery.

Newman Regional Health Medical Partners

Orthopedics and Sports Medicine

(620)340-6181



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Joint Replacement Basics



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Arthritis Basics

- Arthritis is one of the most prevalent health problems, affecting 1 in 5 adults, and the nation's leading cause of disability among Americans over age 15.
- Arthritis is inflammation of one or more joints.
- Arthritis involves the breakdown of the cartilage that normally protects the joint.
- Cartilage also absorbs shock when pressure is placed on the joint, like when you walk. Without the usual amount of cartilage, the bones rub together and cause pain.

Arthritis Basics

- **If you have arthritis, you may experience:**
- Joint pain
- Joint swelling
- Reduced ability to move the joint
- Redness of the skin around a joint
- Stiffness, especially in the morning
- Warmth around a joint

Arthritis Basics

- Buckling or giving way of the joint (knee).
- Loss of motion to the joint and decreased ability to perform daily activities.
- Pain that keeps you up at night.
- Decrease in quality of life with advanced arthritis.

Joint Replacement Basics

- Joint replacement surgery is removing a joint damaged by arthritis and putting in a new one. This is an elective procedure, a choice that you make with your surgeon.
- The doctor has suggested a joint replacement to improve how you live. A joint replacement can relieve pain and help you move and feel better.
- A new joint, called a prosthesis is made of plastic and metal that is cemented and/or screwed in, depending on the joint being replaced.
- Arthroplasty- Metal resurfacing of a joint (knee or hip).

Total Knee Arthroplasty



Total Hip Arthroplasty



Preparing for surgery

- Preparing for a total joint replacement begins weeks before the actual surgery date.
- **Medical Clearance:** Patients who are considering total joint replacement will need to be evaluated by their Primary Care Physician for complete physical, lab work, urine analysis, EKG and chest x-ray (and possibly other testing if required by your physician) to determine physical ability to withstand a joint replacement. Medical clearance will need to be obtained from your primary care physician within **30 days** of scheduled surgery date and no later than 1 week prior to surgery date.

Medications

- Medications: Your Primary Care Physician (PCP) and Orthopedic Specialist has/will advise you of particular medications that may interfere with your anesthesia or put you at a higher risk for bleeding. These medications will need to be discontinued **1 week** before surgery, unless otherwise advised by your PCP. (Examples: Advil(Ibuprofen), Aleve(naproxen), Aspirin, Coumadin, Plavix, xarelto, multivitamins, herbal supplements, fish oil, Phentermine, some arthritis medications or anti-inflammatories, etc.).
- Medications that suppress your immune system such as: Humira, Remicade, Enbrel or Otezla will need to be discontinued 6 weeks prior to surgery and resume 6 weeks after surgery. Also Methotrexate should be stopped 2 weeks prior to surgery and resumed 2 weeks after surgery.

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Benefits of Smoking Cessation

- Smoking cessation is encouraged for proper wound and tissue healing.
- Aids in bone healing post- surgery.
- Reduces risks for infection.
- Provides adequate tissue oxygenation for healing.
- It is recommended you quit smoking 1 month prior to your surgery date. A nicotine test will be preformed to verify that smoking has been discontinued.
- NRH is a Smoke-Free campus, and you will not be able to smoke while you are in the hospital. Smoking cessation assistance is available to you during your stay. This involves a nicotine patch or other assistance that we can provide to help while you are here. Please notify the staff if you are interested in smoking cessation assistance.

Discharge Planning

- Start preparing your home for a walker by removing rugs, cords, and any trip hazards. Have a clear path.
- Pre-plan meals
- Have someone available to help at home following surgery
- Have someone available to drive for the first 2-3 weeks
- Apply padding to low rise home chairs

Enlist a Coach

- Patients can benefit from the assistance and motivation of a coach, find someone to coach you through this process (family member or friend)
- Value of coaches
 - Increase confidence
 - Support
 - Faster recovery
 - Improved results

Medical Equipment

- Bedside commode to place over your toilet (***It is recommended you get one of these prior to surgery if you have a low toilet***)
- Tub transfer bench
- Front wheeled walker
- Physical and Occupational Therapy will recommend other equipment you may need.

Resources

- Places that **loan out** medical equipment in Emporia:
- Senior Center 603 E. 12th Ave
(620)343-3160
- American Legion (620)342-1119
- VFW (620)342-9864

For purchasing medical equipment

Contact:

Newman Medical Supply
2718 W 15th Ave
(620) 343-1800

Preparing for Surgery

- Report any cuts or skin irritations, scrapes, scratches, or boils to your surgeon.
- Report any temperature elevation or signs and symptoms of infection (example; areas of redness or warmth).
- Do not shave surgical leg within 48 hours of surgery.
- Blood glucose must be below 180.
- It is recommended that your BMI be below 40 for optimal results.

Preparing for Surgery

- Shower the night before surgery, using a clean wash cloth. Dry with a clean towel.
- After showering, gently wipe the surgical area with the Chlorhexidine wipe provided for 3-5 minutes and let dry. Follow the directions on the paper.
- Wear clean clothing to bed.
- Sleep on clean sheets.
- Do not allow pets to sleep in bed the night before surgery.
- Repeat Chlorhexidine wipe the morning of surgery. Bring the paper with you on the day of surgery.

What to Bring to Hospital

- Bring 2-3 outfits that include loose fitting clothes (robe, shorts, capris, sweats) and personal hygiene items (toothbrush, toothpaste, deodorant, etc.)
- Good supportive tennis shoes
- Leave valuables at home like jewelry and cash. You may bring laptops, cell phone, hearing aids and dentures.
- Bring CPAP/BiPAP machines with you.
- Please do not bring your home medications for use at the hospital. The hospital pharmacy will provide medications for you to use while you are here. Inhalers may be an exception to this, so make sure to check with the pharmacist.

Nutrition Recommendations

- A loss of appetite is common after surgery. Eat small frequent meals of a balanced diet and drink plenty of fluids until your appetite improves.
- Start following these nutrition guidelines as soon as you schedule your surgery, if you haven't been doing so already.
 1. Eat three meals a day full of nutrient rich foods.
 2. Include 90 grams of protein per day.
 - 1 ounce of meat, fish, or poultry = 7 grams protein
 - 8 ounces of milk = 8 grams protein
 - 1 egg = 6 grams protein
 - ½ cup cooked beans or peas = 6-8 grams protein
 - 1 ounce of nuts or seeds = 4-6 grams protein
 - 1 cup oatmeal = 7 grams protein
 - You may consider protein bars, shakes and/or powders.

Nutrition Recommendations

3. Include a variety of leafy green vegetables, yellow/orange fruits and vegetables and citrus fruits to help stock your system with vitamins and minerals you'll need to aid in your healing.
 - Fruits (1 - 2.5 cups/day)
 - Vegetables (1.5 - 4 cups/day)

Nutrition Recommendations

4. Include probiotics and plenty of fiber in your diet to reinforce your immune system.
 - 4 ounces of either yogurt or kefir twice daily for probiotics
 - Fruits and vegetables
 - Whole grains (4-10 ounces/day) for fiber
 - 1 slice bread = 1 ounce
 - ½ cup rice, pasta, or cooked cereal = 1 ounce
 - 1 small (6" diameter) corn or flour tortilla = 1 ounce

Nutrition Recommendations

- A high protein diet helps by
 - *repairing tissue
 - *decreasing the inflammation phase
 - *decreasing muscle loss
 - *healing wounds following surgery
 - *assisting your immune system in building antibodies

Day and Weekend Before Surgery

- Drink eight 8oz glasses of water daily for 3 days before surgery. (Helps regulate blood pressure, helps kidney function and reduces risk of blood clots).
- Avoid alcohol and caffeine 3 days before surgery. (Helps with hydration)
- Do not eat or drink anything after midnight the day of your surgery (only take medications with sips of water morning of surgery as directed).

Day of Surgery

- Report to the hospital registration desk at the designated time.
- You will be taken to Same Day Surgery where an IV will be started, anesthesia provider will meet with you and blood work may be obtained if necessary.
- Family will be taken to the surgery waiting area where they will be updated periodically throughout the procedure.

Day of Surgery

- Joint replacement surgery generally lasts 1-2 hours, depending on your procedure.
- Blood pressure, heart rate and rhythm, and oxygen levels will all be monitored before, during and after surgery.
- A foley catheter may be placed during surgery and removed the next morning.
- Sequential Compression Devices (SCD's) will be placed around lower legs to massage and to help prevent blood clots.
- Ted hose (support hose) will be applied during surgery. They are to be worn at all times, except to shower, for 2 weeks and then as needed for 2-6 weeks there after to help prevent blood clots and reduce swelling.

Emporia Anesthesia Associates



What to Expect After Surgery

- You will be taken to the recovery room where your vital signs, pain level, and surgical site will be monitored for 1-2 hours. You will then be taken to your private room.
- Family will not be allowed in recovery, but once you are settled in your room, they will be reunited with you.

What to Expect After Surgery

- After surgery, labs maybe ordered to evaluate for anemia. If you are found to have severe anemia, a blood transfusion may be necessary.
- If you have a foley catheter it will be removed the morning following surgery.

What to Expect After Surgery

- For most patients the most discomfort is 12-24 hours following surgery. You will frequently be asked questions that help the staff monitor the pain, but we encourage you to let the staff know if you are having pain or it is not well controlled at any time.
- Getting up and walking as soon as possible after surgery is important following joint replacement. Walking helps prevent blood clots, postoperative pneumonia, and constipation.
- It is important to use the incentive spirometer as ordered by your doctor. You should cough and deep breathe at least every 2 hours while awake, to help prevent pneumonia.

What to Expect After Surgery

- If you opt to purchase a Polar Care ice machine, a pad will be placed over the knee incision. This will go home with you. You will use the Polar Care ice pack during the day while at rest to help with pain and swelling. If you do not ice packs will be placed over the incision and continued after discharge.
- You will need to put on your call light every time you need to get out of bed.

What to Expect After Surgery: Medications

- Pain Medications:

- Celebrex (celecoxib)

- Lyrica (pregabalin)

- Oxycontin (oxycodone)

- Percocet (oxycodone/acetaminophen)

- Toradol (ketoralac)

- Tylenol (acetaminophen)

- Ultram (tramadol)

- Vicodin (hydrocodone/acetaminophen)

What to Expect After Surgery: Medications

- Blood Thinner Medications
 - Aspirin
 - Lovenox (enoxaparin)
- Antibiotic Medications (Given intravenous during surgery and in the first 24 hours after surgery to help prevent infection)
 - Ancef (cefazolin)
- Nausea Medications
 - Zofran (ondansetron)
 - Phenergan (promethazine)

Hospital Discharge

- Plan for dismissal the day after surgery.
- Physical Therapy will make sure you are independent with a walker for ambulation and stairs before dismissal if you have had knee or hip surgery.
- You will receive detailed instructions for home care before dismissal.
- Social services will meet with you to plan for any equipment and services that may be needed in your home upon dismissal, including physical therapy.

Physical Therapy

- Outpatient physical therapy will start 1-3 days after hospital dismissal and continue for 4-6 weeks after surgery
- It is important that you do the exercise program at home as instructed.
- Outpatient physical therapy choices locally are:

Newman Physical Therapy
PT Associates of Emporia

Dismissal

- You will be given prescriptions at your surgeon's discretion, upon dismissal for pain.
- If you are presently on a pain management contract with your primary care provider, they will need to provide post-op pain management.
- If you have pain beyond our pain management protocols, you may be referred to your primary care provider for pain management.

Potential Complications

- Blood Clot
- Infection
- Pneumonia
- Numbness

Blood Clot Symptoms/Prevention

- Blood Clot symptoms may include:
 - Increased pain, tenderness, redness and warmth in the leg(not directly around the knee)
 - Swelling or tightness in the calf or ankle

Notify your surgeon immediate if you develop any of these symptoms. An ultrasound may be ordered to evaluate for blood clots. If clots develop there are medications that can treat them.

An undiagnosed blood clot in the leg can travel to the lungs and become a PE, or pulmonary embolism. Signs of this may include:

- Sudden difficulty breathing, felling short of breath or rapid breathing.
- Chest or back pain
- Coughing up blood
- Sweating
- Change in mental status

Call 911 or go to your nearest emergency room immediately as this is a medical emergency. A PE can be fatal if not treated quickly.

Infection Symptoms

- Infection Symptoms:
- Increased pain, swelling or redness around incision
- Change in color, amount and odor of drainage to incision (some clear drainage is normal)
- Temperature greater than 101 degrees for at least 24 hours or more
- Chills/shaking

*Notify your surgeon with any of the above symptoms.

Infection Prevention

- Wash hands prior to touching the surgical site.
- Keep incision/dressing clean and dry.
- Avoid putting creams or ointments on incision unless directed.
- Avoid soaking in bath tubs or pools until directed.
- **You will need to be medicated with antibiotics prior to any dental work or cleanings for 2 years after surgery. It is recommended to avoid any professional dental cleaning or procedures for 3 months after joint replacement surgery.**

Pneumonia

Symptoms/Prevention

- Pneumonia Symptoms
- Increased cough, change in color of sputum, difficulty breathing, fever > 101 degrees for more than 24 hours.
- * Notify your primary care provider if the above symptoms develop post-op for evaluation of pneumonia and proper treatment
- Pneumonia Prevention:
- Continue deep breathing and coughing for the first 3-4 weeks after dismissal from the hospital, and continue to use the incentive spirometer
- Drink plenty of fluids to keep secretions thin
- Remain active and out of bed as much as tolerated

Numbness after surgery:

- For patients who have had a Total Knee Arthroplasty, please note that there may be up to 6 months of skin numbness at and below the incision site. This is a common complication of total knee replacement. If after 6 months the numbness has not resolved, this will likely be a permanent area of numbness. This does not affect the functionality of the new joint, but may be a strange or uncomfortable sensation.

Follow-up Appointments

- Your first post-op appointment will be 2 weeks after surgery for removal of staples and/or dressing. Routine post-op follow up appointments will occur at 6 weeks, 3 months and 1 year. Appointments will consist of x-rays to evaluate for healing and stability of the joint.

Travel Considerations

- You may drive when you have discontinued taking narcotics. **Left leg** surgeries, 4 weeks after surgery. **Right leg** surgeries, 4 weeks after surgery with full weight bearing and leg control.
- No flying until 8 weeks out from surgery
- No car travel over 1 hour for 6 weeks after surgery.

