



All you need
to know for
your
upcoming
surgery!



Your team.....

- * Dr. MacArthur
- * Holly MacArthur ARNP
- * Ashley and Lisa- our incredible office ladies
- * Nursing
- * Physical Therapy
- * Occupational Therapy
- * Social Services
- * Anesthesia



* Frequently asked Questions:

- * Total knee replacement = 80 minutes
- * Total hip replacement = 60-90 minutes
- * Can I hurt the new joint replacement?
- * When can I drive?



Length of stay.....

- * The trend across the country is 1-2 day stay, and many times it is due to what your health insurance will and will not cover.
- * Hip replacements- overnight
- * Knee replacements- usually 1 sometimes 2 nights which includes the night of surgery.
- * Medically doing fine
- * Eating and drinking
- * Passed physical therapy (stairs etc)
- * Pain is tolerable....not gone but tolerable



* What company makes my implant?



* Traveling and metal detectors



Metals....

- * Knee replacements are made of cobalt chrome
- * Hip replacements are made of titanium
- * Have you ever been told you are allergic to **Nickel**?



Medications to stop today!

- * Aspirin- full strength-325mg
- * Advil, Aleve, Ibuprofen, Naproxen, Voltaren, Diclofenac(NSAIDs)
- * Blood thinners (Coumadin/Warfarin)
- * Plavix, Eliquis, Xarelto
- * Rheumatoid Arthritis medications
- * Prednisone
- * Vitamin E, Fish oil, and flax seed



Equipment after surgery

- * IV fluids
- * Ice packs
- * Oxygen in your nose (if you need it)
- * 5 lb weight/sand bag(total hips only)
- * CPM machine (total knees only)
- * Incentive Spirometer



Why do I feel pain???

- * A knee or hip replacement is not gentle surgery.
- * Discomfort/pain is normal and is expected
- * Every week patients get thru it and you will too!!!!
- * It gets better day to day, usually the most challenging day is #2



Pain control

- * We inject a cocktail into your soft tissues around your joint before we close your incision
- * Pill form of narcotic pain medication will be available as needed
- * IV form of pain medication will be available in case you are very uncomfortable
- * Scheduled Tylenol and an anti-inflammatory (of course this depends on your allergies)



Medications in addition to your normally taken medications....

- * Stool softeners
- * Nausea medication
- * IV antibiotic that you will receive before surgery and for 24hrs after surgery
- * TXA- lessens blood loss



Day of surgery....

- *Get out of bed!!!!!!
- *Drink plenty of fluids
- *Use incentive spirometer
- *Eat a little bit



Day #1 and #2

GOAL=independence

- * Get up and walk, sit in chair, do exercises with physical and occupational therapists
- * Every day we want you to walk a little more
- * Blood work to monitor blood loss
- * Shower day/get dressed day #2
- * Independence
- * Be discharged to home.....



Miscellaneous issues you might experience that are normal.....

- * Bruising/swelling- this is also expected
- * Inability to lift your leg off the bed
- * Bruising of shin and ankle
- * More swelling as you get more active-you need to manage this.....
- * Pain at night
- * Loss of appetite/possible weight loss
- * The blues...



Physical Therapy



- * One of the **MOST** important aspects of your recovery
- * It begins in the hospital and **MUST** continue after you are discharged
- * Three options:
 - * Visiting nurses-home care for 1-2 weeks
 - * Outpatient physical therapy at a clinic
 - * Rehabilitation center
- * Therapy is 1-3 times per week, an hour each session
- * You will also have a home exercise program that you will be expected to do
- * When you are discharged you will receive a physical therapy referral in your packet and it is up to **YOU** to set that up at a clinic local/close to you



Outcomes

- * It is up to you to make your new joint replacement as good as it can be!
- * We can give you a new joint but the real work comes from you after surgery
- * **YOU MUST MANAGE YOUR SWELLING!!!**
- * We will help guide you through this process during your recovery
- * It is a process so do not expect to be 100% better the day after surgery



Important things to know...

- * **Range of motion** of your joint replacement is most crucial in the first 6 weeks (mainly total knees)
- * Push through the discomfort!!!!!!! Pain will not kill you!!!!
- * **Pain medication** is usually used in some fashion for 2-4 weeks.
- * Refill of your pain medication must be submitted **Thursdays by noon**. We have the ability to securely fax a refill to the pharmacy closest to you however this is only available Monday thru Thursday. PLAN AHEAD!!!!



Swelling.....

- * Once you are home you may get more swelling of the leg. This is the most frequent phone call we get. To manage swelling you **MUST**:
 1. Use an ace bandage to compressively wrap the knee (knees) or thigh (hips)
 2. Elevate your foot 10cm above your heart – yes, this is high above your heart
 3. Ice !!!!!!!
 4. Decrease activity if needed- you may be being too active in the early stages



If you do not manage your swelling.....

- * You will have more pain
- * You will have less motion
- * Your skin will start to get stressed and you may get a superficial infection of the skin called cellulitis
- * Your rehabilitation with physical therapy will be more difficult



Risks of surgery:

- * Infection
- * Blood clot
- * Anesthetic Risk
- * Neurovascular injury
- * Inconsistent outcomes with range of motion and function



Infection... some of these things you can help with!

- * No dental abscess or broken/rotten teeth
- * No urinary tract infection
- * No open areas of your skin that are infected
- * Cleanliness/personal hygiene
- * Chlorhexidine shower
- * Pre-operative antibiotic
- * Surgical Prep
- * Surgical hoods



Blood Clots

- * Muscles contracting in your legs pushes blood back to your heart...**SO WALK!!** Once you are home we expect you to walk once an hour while you are awake.
- * TED stockings- compression socks-on in a.m. off in p.m.
- * SCDs-sequential compression devices, in hospital only
- * Blood thinner-

Total hips = Xarelto for 30 days, you should have this prior to surgery but do not start it until after surgery

Total knees = Lovenox for 2 weeks/ecotrin for 4 weeks for a total of 6 weeks



Anesthesia

- * You will all be meeting with an anesthesia provider to discuss what the best plan is for you.
- * Together you will create a plan for your anesthesia during surgery



Neurovascular Injury

- * There are nerves and vessels around any major joint
- * We take care to identify those structures however there is a small risk that one of them may be compromised.
- * What can cause injury- stretching, swelling, compression of the nerve or vessel



Leg length—Total hips only

- * Only with a hip replacement do we have the ability to really affect leg length
- * We use live x-ray to measure length
- * However at times we have to make the leg longer to give you stability
- * We try our best to keep your legs the same length



What to bring to the hospital...

- * Loose clothes that are easy to put on, for hip replacements this means loose underwear also!!!!
- * Hygiene items: toothbrush, hairbrush
- * Computer, iPad, Kindle (internet access)
- * Crutches, walker, cryocuff –if you have them, bring them.....



Tid Bits

- * If you do not hear from our office about your preoperative labwork this means that all looks normal.
- * If you do not have preoperative soap you can stop by the office the day of your labwork and receive it.
- * We will send your postoperative prescriptions to the pharmacy here at Littleton Regional Healthcare and they will deliver them to your room prior to you leaving. We will use your pharmacy for any refills.
- * If you did not list inhalers or eye drops on your medication list please bring those to the hospital.

Words of wisdom...



- * Rehabilitation after joint replacement is a process. **It gets better daily but not the day after surgery!**
- * Be patient with yourself. A joint replacement takes time to heal and improve. **12-18 months**
- * **Always remember the old worn out joint was only going to get worse....this one will get better!**
- * **We have noticed that patients that use pain medication sparingly do better over time.**



Questions... please contact our office at
603-259-7700

