



**Community Memorial Health System**

# Total Knee Replacement Program

**Preparing for your Surgery**

# Class Agenda

1. Welcome and Introduction
2. Your Health Care Team
3. Anatomy of the Knee and prosthetic: TKR Surgery
4. Preparing for surgery – Timeline
5. What to expect when you're in the **Hospital**
6. What to expect when you're **Home**
7. Pain Management
8. Home Physical Therapy

# Anatomy of the Knee and Prosthetic

- Remove the damaged cartilage and bone
- Replaces them with metal and plastic
- All glued on with special cement
- PERMANENT



# Preparing For Surgery

**Outcomes of your surgery are in your hands.**

- A knee replacement is like getting a new pair of shoes. It will take a few months to become comfortable with it, and how far you can walk or bend your knee is dependent on **YOU**.
- Working hard with physical therapy in the ***first 6 weeks after surgery*** is key to achieving the best the outcome of your knee for the rest of your life.

# Before Surgery

## **We Get you “TUNED UP”**

- Get medical clearance: ECG, labs, x-rays, etc..
- Let your primary care doctor know about your planned surgery, review your medications

## **Things You Should Do:**

- Exercise daily, even if it hurts a bit - (handouts provided)
- Eat a healthy diet - plenty of protein, low in excess sugar
- Drink lots of fluids – 3 glasses of water each day
- Avoid alcohol and Stop smoking - increases risk of infection-slows recovery time
- Complete Advance Directives: may include a living will and/or durable power of attorney for health care.

## **Pre-op Appointment With Surgeon Days Before Surgery**

- Write down your questions for your surgeon
- Go over details of events in the coming days and post-operative care plans

# Before Surgery

## 7 to 10 Days before Surgery:

### **Insurance Benefit Review – Admitting Office will contact you:**

- Review insurance coverage
- Tell you of any Co-payment due at time of surgery
- Check that we have all information needed



## 3 to 7 Days before Surgery:

### **Pre-Operative Assessment – Nurse will call you to discuss:**

- Your health history & status
- Medications you are taking
- Plans for post-operative care



## **Case Management**

- You may be contacted by Case Management to arrange for your post-operative needs

# Before Surgery

Preparing in advance will make things easier and more comfortable

- **A family member or friend will need to be with you 24 hours a day for the first 3-7 days.**
- **Be aware that you will not be able to drive for an extended period of time.**
  - Usually no driving for 4 to 6 weeks
  - Must have safe use of your limb
  - Depends on Left or Right limb
  - Must be off of narcotics



# Before Surgery

## Preparing Your Home

- Get your house as free of clutter as possible
- Move electrical cords out of the way
- Night lights in the bedroom and hallways
- Have a path wide enough for a walker
- Remove loose throw rugs
- Stock up on items you'll need such as:
  - Toiletries,
  - Medications,
  - Easy-to-prepare meals
  - Pet needs



# Before Surgery

## Preparing Your Home

- Add pillows to low chairs so you don't have to bend too much to sit.
- Watch for small pets or objects on the floor.
- Wear anti-slip socks/shoes (rubber sole).
- Prepare a “recovery” table with a lamp, cell or cordless phone, bottle of water, pain medications, and any other necessary items.



# Home Safety Devices



Front  
Wheeled  
Walker



3 in 1 Shower-  
Commode Chair



Grab Bars and  
Shower-head  
Extension

**Highly recommended but NOT covered by insurances.**

They can be purchased through multiple sources:

Home Depot, Lowes, CVS, College Pharmacy and Amazon.

Loaners available at DuranCare and The Help of Ojai (for Ojai Residents)

# Helpful Devices

1. Dressing stick



2. Reacher stick



3. Contoured scrub sponge



4. Long handled shoe horn



5. Elastic Shoe Laces



6. Sock assist



# The Day Before Surgery

## Get your Skin Ready

- Shower before going to bed with Chlorhexidine cleansing solution (i.e. Hibiclens) or Anti-Bacterial soap
- Use clean towel
- Wear clean pajamas. Sleep on clean sheets.
- Shower again with Chlorhexidine cleansing solution (i.e. Hibiclens) or Anti-Bacterial soap before coming to the hospital.
- Use clean towel
- Put on clean clothes to come to hospital
  
- **If you have any signs of infection prior to surgery, please call your doctor to discuss.**



# The Day Before Surgery

- Surgeon office will call to tell you what time to come to hospital
- ***Do not eat any food or drink milk or any non-clear liquids after midnight***
- ***Do not smoke or vape***
- ***Do not drink alcohol or use marijuana/THC***
- Go to bed early and get a good night's rest!

# Day of Surgery

- Take your medications as directed by your surgeon.
- Drink 10 ounces of apple juice, Gatorade or 7-Up before you leave home.
- ***Do NOT drink milk, orange juice or coffee***
- Finish drinking any liquid at least 2 hours before your scheduled arrival time to hospital

# Day of Surgery

## What TO Bring With You

- No more than one family member - space is limited
- Your insurance card & picture ID
- List of your medications & vitamins/supplements
- Copy of Advance Directives - Durable Power of Attorney
- Wear LOOSE comfortable clothes:
  - Elastic waist pants,
  - T-shirts,
  - Closed toe - Slip on shoes, No flip flops!
  - Underwear
- Walker – if you have one, leave in car until after surgery

# Day of Surgery

## What NOT To Bring With You

- If you bring your mobile phone or tablet leave with family member until after surgery.
  - **We are not responsible for loss or damage to these items.**
- Do NOT bring your own medications.
  - We will give you your routine medications at the hospital
- Leave valuables at home:
  - Wallet-Cash
  - Jewelry
- Do not wear any metal products-hair clips, bobby pins, etc..



# Day of Surgery

## What To Do

- Report to Admitting Department on the first floor in the lobby of the hospital.
- You will be taken to the Surgical Admission Suite for preparation for your surgery.
- *The entire process from pre-op to recovery will take several hours.*

# Your Health Care Team

- Orthopedic Surgeon
- Orthopedic Residents
- Anesthesiologist
- Hospitalist
- Nursing Team
- Case Managers
- Physical Therapist
- Occupational Therapist



# Physicians

## Orthopedic Surgeon & Residents

- Specializes in the care of bone diseases and injuries. Performs surgery on bones, joints and tissues.

## Hospitalists

- Internal Medicine doctors at the hospital may assist in your care

## Anesthesiologists

- Will provide Spinal and general sedation to go to sleep
- Will assist in initial post-operative pain management

# Nursing Team

While in the hospital, your nursing team will consist of:

- Registered Nurse (RN)
- Nursing Assistants

Responsibilities include:

- Medication management
- Surgical dressing changes
- Monitoring your intravenous fluids
- Monitoring your pain control
- Patient Safety
- Coordinating your care with the multi-disciplinary team



# Case Managers

## Hospital Case Manager

- Help assist you and your family with discharge needs
- Arrange for medical equipment (walker)
- Assist physician in discharge planning either to home or skilled nursing facility

## Insurance Case Manager

- Primary coordinator between your insurance company, orthopedic surgeon and/or hospital case manager
- Pre-operative and post-operative management to help identify potential financial concerns related to services not covered by your health plan

# Physical Therapists

Trained health care professionals who will assist you with regaining your strength and mobility after surgery

Programs your physical therapist will assist you with include:

- Exercises to strengthen the muscles and improve motion
- Specific exercises and precautions to help you learn to use your new total joint properly
- Instructions in walking with a walker
  - If you have a walker bring it to the hospital and we can make sure it is set correctly for your height

***If you are able to complete all of the activities that your therapist instructs you to do, you will likely have a quicker recovery and shorter hospital stay***

# Occupational Therapist

- Trained health care professional who will help you adjust to your new joint after surgery by helping you find ways to safely care for yourself at home
- Will show you how to use equipment to help you get dressed, bathe and do household activities with less effort to save your energy for other activities

# After Surgery In the Hospital

- The goal is to get you moving as soon as possible.
- Expect to have pain.
- You may feel nauseated, weak, dizzy & tired.
  - This is likely from the anesthetic and anemia from surgery
- Remember, the implants are placed **permanently**.
  - You will not injure anything by putting weight on it.
- You can put **full weight** and walk as normal as possible.
- In fact, it heals faster if you put all your weight on it
  - With a walker and a therapist helping.



# After Surgery In the Hospital

- You will use a walker and get adequate pain medications.
- You will be evaluated by a Physical and Occupational Therapist.
- Some patients MAY be able to go home the **same day** of the surgery, if you are functionally and medically stable.
- **Most patients go home within one day of surgery.**

# Equipment You May See

- Intravenous fluids
- Respiration monitors
  - Although this equipment can be disturbing at times it is important
- Foley Catheter
  - A drainage tube inserted into the bladder.  
Usually removed the morning after surgery or in recovery
- Sequential Compression Devices (SCDs)
- Incentive Spirometers

# Preventing Post-Operative Complications

## Blood Clots

- Sequential Compression Devices (SCDs)
- Perform ankle pumps while in bed
- Anticoagulant medications (Aspirin or Lovenox)
- Activity is the most important factor in preventing blood clots and infection



## Atelectasis – Lung Collapse

- Incentive Spirometers
- Encourage coughing and deep breathing exercises
- Getting up and out of bed to facilitate deep breathing



# After Surgery

## Pain Management

**You will have Pain.**

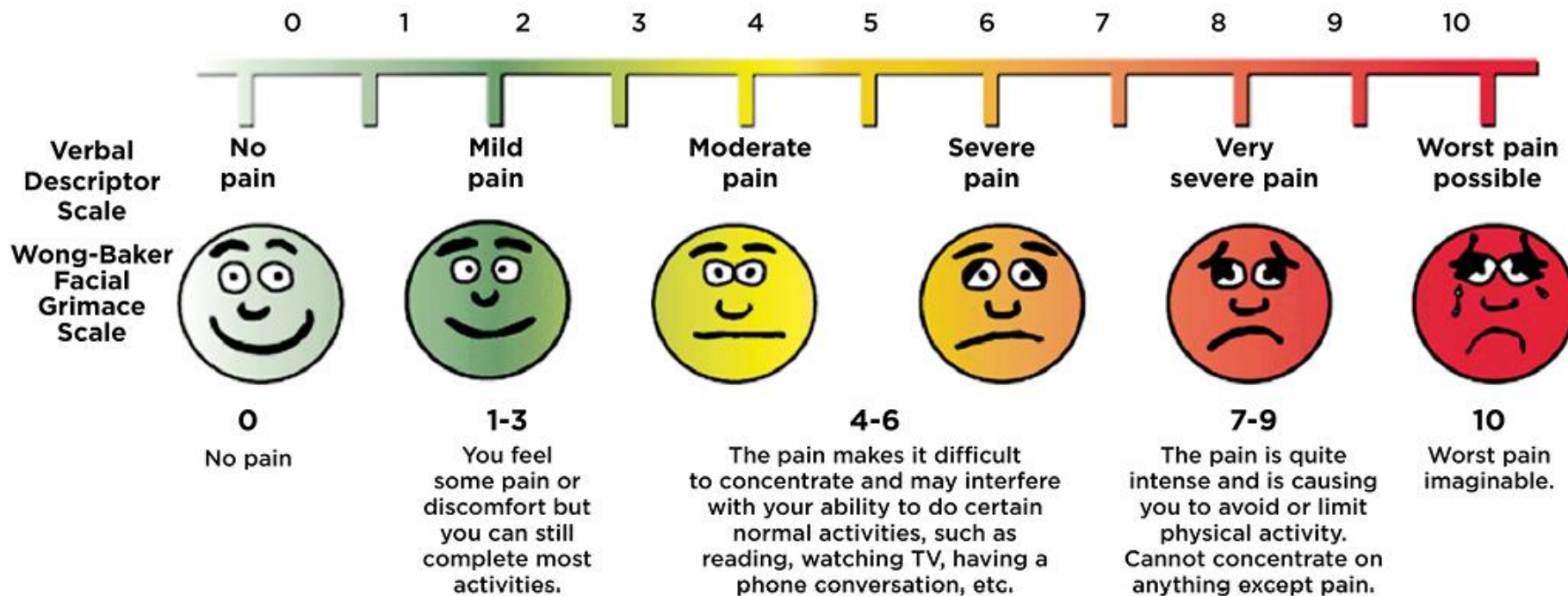
**Pain doesn't mean something is wrong.**

Medications that may be prescribed for you:

- Anti-inflammatory
- Narcotics
  - Common side effects: constipation, nausea, vomiting, dizziness, drowsiness, itchy skin, rashes
  - May cause addiction
- You may also get a prescription for constipation and nausea
- Your nurse will help you to start on oral pain medications as soon as possible
- Cold Packs – help to reduce pain and swelling

# After Surgery

## The Pain Scale



# Patient Safety

**S**peak up if you have questions or concerns. You have the right to know.

**P**ay attention to the care you are receiving. Be an active participant.

**E**ducate yourself about your diagnosis and your treatment plan.

**A**sk a trusted family member or friend to be your advocate.

**K**now what medications you are taking and why you take them.

**U**se your call light any time you need help or want to get out of bed.

**P**articipate in all decisions about your treatment.

You are the center of the healthcare team.

*If you have concerns about your care, please ask for the nursing director.*

*You can also use the Patient Safety Hotline at 805-948-5099*

***Please Call! Don't Fall!***

# Post-Operative Hospital Stay

- Blood tests (early in the morning)
- Your diet will be advanced to regular food as tolerated
- Begin blood thinners to prevent blood clots
  - Most patients go home on aspirin or Lovenox
- Discharge planning begins to ensure all your home needs are addressed before you leave:
  - Walker
  - Physical therapy
  - Home Health

# Post-Operative Hospital Stay

## Physical Therapy

- We highly recommend you have a family member or caregiver present during the first day of physical therapy, both morning & afternoon, to educate everyone on the expectations for optimal outcomes
  - **Therapists begin to see patients the day of surgery**
- Occupational therapy will assist you with use of your equipment to help you get dressed, bathe and do household activities with less effort to save your energy for other activities
- PT and RNs will work together to ensure you have had pain medication prior to participating



# Post-Operative Hospital Stay

## Physical Therapy

- Goals:
  - Getting in and out of bed
  - Transferring to Commode/Toilet
  - Walking (with walker) Independently
- Most patients go home between 1 and 2 days after surgery
- Some patients will go home the same day as surgery
- A walker will be sent home with you
  - If you have a walker – bring it to the hospital with you

# Recovering at Home

- As long as you can get in and out of bed by yourself, walk using the walker by yourself, and go to the bathroom by yourself, then ***you are better off being at home than anywhere else***
- Some patients may need to go to a skilled nursing facility where they can get additional nursing care
  - May not be covered by insurance

***You will recover safer and faster if you are home***



***Home Sweet Home***

# Recovering At Home

- Please arrange for a caregiver to be available for help for the first week after surgery.
- You will need help with meals and chores around the house.
- If you live alone and have no help, contact your surgeon and case manager **prior to surgery** to arrange a smooth transition upon discharge.



# Recovering At Home

## Physical Therapy

- Physical Therapy – 2-3 times a week for 2 weeks
  - You will be contacted within 48 hours by Home Health to arrange a Home Visit with a Physical Therapist.
- OR
- Outpatient Physical Therapy will be arranged
- The Physical Therapist will determine the frequency of future visits.

**The most important factor in getting an excellent result is WALKING**

# Recovering At Home

## What To Expect When You Are At Home

- Rest when you feel tired but do not stay in bed all day
- When you sit, use a firm chair with arms
- Do not sit on low chairs or couches
- Do not sit for longer than 30 to 45 minutes at a time.
- Use cold packs frequently to manage pain and control swelling.
- Use your pain medication as needed. Keeping your pain managed will help you to do your exercises.
- Increase activities gradually as instructed by health care provider.
- **Do not stop using your walker until instructed to do so by your doctor or physical therapist**
- Limit household chores/activities for the first 1-2 weeks

# Recovering At Home

## What To Expect When You Are At Home

- Keep the dressing on your incision clean and dry at all times
- You may have light running showers – but your dressing must be kept clean and dry
  - Your doctor or nurse will give you instructions on showering
- Always wash your hands with soap and water for 20 seconds prior to touching your incision
- Change the dressing only as instructed by your doctor or nurse
- If your dressing becomes loose, wet, or dirty-replace with a clean, dry dressing
- NO BATHS, JACUZZIS, OR POOLS until your surgeon tells you otherwise.

# Recovering At Home

## When to Call Your Doctor

- You have trouble breathing
- You have shortness of breath or chest pain
- You are sick to your stomach and cannot keep fluids down
- You have signs of a blood clot:
  - Pain in your calf, back of the knee, thigh or groin.
  - Redness and swelling in your leg or groin.
- You have signs of infection:
  - Swelling, warmth or redness that's worsening.
  - Red streaks leading from the incision.
  - Pus draining from the incision.
- A fever of 101 degrees or higher.
- **It is normal for the knee to be swollen and warm, but should improve everyday, not get worse.**

# Post-Operative Reminders

- Physical therapy is essential for maximizing recovery and to return to your daily activities sooner
- Your physical therapist and health care team will guide you through your specific post operative precautions.
- Working hard with physical therapy in the ***first 6 weeks after surgery*** is key to achieving the best the outcome of your knee for the rest of your life.



# Importance of Exercising

## Why do I have to exercise?

- Helps your joints heal faster
- Speeds up recovery
- Helps you **feel better sooner**
- You will be instructed on exercises designed to strengthen the muscles that will become weak after surgery and remain weak in the presence of pain or swelling

**It is important that you try to control your pain and the swelling so that you are able to exercise**

# FREQUENTLY ASKED QUESTIONS

