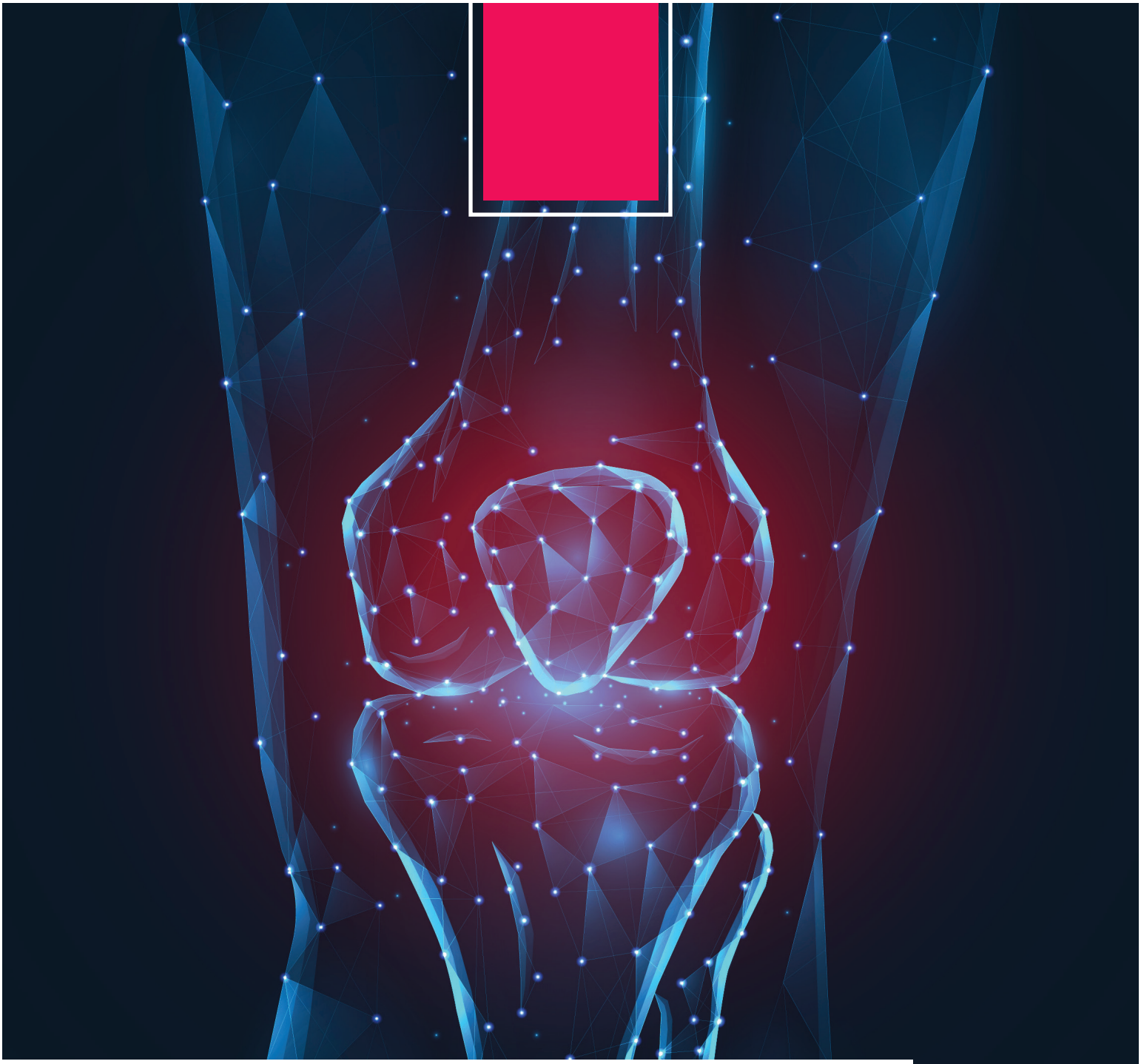

TOTAL KNEE JOINT REPLACEMENT

Patient Education Guide

Your Total Knee Replacement

Thank you for choosing OrthoIndy Hospital for your knee replacement surgery. Please use this booklet, as well as your ***Preparing for Surgery*** booklet, as a guide for information and recommendations. Always be sure to follow your physician's instructions first and ask for any clarifications needed. By reviewing the following information, you will optimize yourself for a great outcome and minimize risks of complications.

Additional Online Resources

- Preparing for Surgery Guide
  OrthoIndy.com/PreparingForSurgery
- Supplement Guide
  OrthoIndy.com/Supplements
- Total Joint Education Page
  OrthoIndy.com/joint-surgery
  Education will cover:
  - Adaptive Equipment
  - Transportation After Surgery
  - Showering After Surgery

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Discharge Planning

Discharge Planning Starts Now

Most patients successfully return directly home after leaving OrthoIndy Hospital. It is important to speak with your surgeon prior to surgery about discharge options. Your care team will assist in coordinating whatever is determined to be best for you.

Possible therapy options include:

- **Home exercise program** to be done at home per physician's instructions.
- **Outpatient physical therapy** close to home. You will need to have someone drive you to your appointments, usually three times per week.

Home Planning and Preparation Recommendations

See the ***Preparing for Surgery*** guide for more details.

Adaptive Equipment

Most insurances will pay for a walker after total knee replacement surgery. The following items, which are not always necessary, but may be useful include: a raised toilet seat, shower seat, long-handled bath sponge, shoehorn, sock aid and dressing stick. These items are not usually covered by insurance. Check with your insurance company for more specific details regarding your insurance coverage.

Where to Find Adaptive Equipment

These items are designed to help in your recovery and are available online at Amazon. Equipment is also available on multiple websites. Search under "adaptive equipment for tub and shower" and "adaptive equipment for activities of daily living."

Walkers

If you already have a walker, please bring it with you the morning of surgery labeled with your name. **Walkers with two wheels are okay, but not walkers with seats.** If you do not have a walker, physical therapy will issue a new one to you after surgery.

Shower Seat

A shower seat extends over the side of the tub to provide safe access into the tub. The shower seat goes inside the tub or shower and adjusts to the proper height. This allows you to enter the tub by first sitting down, keeping weight off the operative leg. Most shower seats will elevate to 21 inches.

Elevated Toilet Seat

An elevated toilet seat reduces stress on your knees following surgery. Elevated toilet seats are available with and without handles.

Dressing Stick

A dressing stick assists you in dressing yourself until you can bend your knee more. The combination hook-pusher on one end helps you pull on pants or skirts, or to remove socks.

Other Places to Find Adaptive Equipment

Apria Healthcare
317.865.4200

At Home Health Equipment (AHHE)
4309 W. 96th St.
Indianapolis
800.848.4670

Bed, Bath & Beyond

CVS Pharmacy

Home Depot

Lincare
800.617.4140

Lowe's

Menard's

Walgreens

Wal-Mart

Long-handled Shoehorn
Until you are able to reach your foot, a long-handled shoehorn helps you put on your shoes.

Elastic Shoelaces
Elastic shoelaces provide firm support yet stretch to allow your feet to slip in or out of the shoes without having to untie and retie them.

Sock-aid
If you are unable to reach or bend over because of pain or physical limitations, a sock-aid helps get your socks on.

Transportation
Upon discharge, the nursing staff will assist you with getting safely into your car. The following are some things to consider before surgery. For a few weeks after surgery, it may be more comfortable to ride in a mid-size or large car. Your size, the size of the front and back seats of the car, as well as height are factors to consider. Try out the seating situation before surgery, so you have a transportation plan for after your surgery. You must be accompanied by a friend or family member.

Click on the button above to watch a video showing the proper way to get in and out of a car after a total knee replacement.

Before Your Surgery

Dental Work

No dental cleanings or procedures should be done two weeks before surgery or three months after. Make sure your dentist is aware you will be having total joint replacement surgery, so the information can be placed in your chart. **After your joint replacement, you will need to take preventative antibiotics before any dental work.** You will need to do this for the rest of your life. This helps to preserve and protect your artificial joint. **Please wait three months after your total joint replacement before having any elective procedures done.**

Prevention of Surgical Site Infections

Your surgeon will utilize a variety of evidence-based techniques to help reduce your chances of developing an infection. We are committed to doing everything possible to prevent infections. A surgical site infection is an infection that occurs after surgery in the part of the body where the surgery took place. Surgical site infections can be minor, involving the skin only, but others can be more serious and possibly involve your new joint replacement. These infections can result in you needing more surgeries and antibiotics for several weeks, making your recovery more difficult.

Preparing Your Skin for Surgery

The number one cause of infection after a surgical procedure is bacteria (germs) living on the persons own skin. Reducing bacteria from your skin before surgery helps prevent these infections. Studies have shown that applying specific products to the skin removes bacteria and lowers the risk of infection at the surgical site.

- Chlorhexidine gluconate (CHG) is a product that is often used to cleanse the skin before surgery. CHG adheres to the skin which kills and reduces the amount of bacteria on your skin for several hours. Applying CHG the night before and the day of surgery provides two layers of protection. **If you are allergic to CHG please let your healthcare provider know.**
- Povidone iodine nasal antiseptic is a product that reduces bacteria in the nose for at least 12 hours after it is applied. If you are allergic to iodine or shellfish, please let your healthcare provider know.

The Night Before Surgery

Bathe/shower with 4% chlorhexidine gluconate (CHG) the night before surgery.

Please follow these instructions for cleaning your skin using CHG:

1. In the shower or tub, wash your body with regular soap and water first. Wash your hair as usual with your normal shampoo.
2. Do **NOT** shave 24 hours before surgery as CHG can irritate freshly shaved skin.
3. Rinse your hair and body thoroughly to remove soap and shampoo residue.
4. Turn the water off to prevent rinsing off the CHG too soon.
5. Apply CHG to your body from the neck down avoiding private areas.
   a. Do **NOT** use CHG above the neck.
   b. Do **NOT** use CHG near the eyes or ears to avoid permanent injury to those areas.
6. Wash the body gently for five minutes. Pay special attention to the knee that is being operated on.
7. Do **NOT** wash with regular soap after using the CHG.
8. Turn the water back on and rinse the body thoroughly.
9. Pat dry with a clean, soft towel.
10. Do **NOT** put lotion, powder, oil, deodorant, make-up or any other product on your skin after bathing.
11. Dress in clean pajamas or night clothes and sleep on clean sheets.

The Day of Surgery

- Do **NOT** shower or bathe on the day of surgery. Washing with regular soap after applying CHG could reduce the product's ability to kill bacteria.
- You may wash your face and hands as you normally would.
- Do **NOT** put lotion, powder, oil, deodorant, make-up or any other product on your skin.
- After you arrive at the hospital pre-operative area, staff will help prepare you for surgery.
- The staff will ask you to remove your clothing and provide you with special wipes to apply CHG.
- You will use these wipes to apply the CHG from your chin down to your toes covering all areas of your body, except your head, face and private areas.
- Staff will assist you with any area that is difficult to reach.
- Allow your skin to air dry and then put on your hospital gown.
- Hospital staff will provide you with the povidone iodine nasal antiseptic product and instruct you on how to apply it. You will need to apply the antiseptic to the inside of your nose. The antiseptic is brown in color and you may notice a discoloration while blowing your nose for several days after.

Hibiclens is a brand name for a soap that contains 4% CHG. You can get CHG at most large pharmacies or online on Amazon.

Please be sure to keep chlorhexidine (Hibiclens) out of reach of children.

After Your Surgery

Recovery Room/Post-anesthesia Care Unit

- After your surgery, you will go to the post-anesthesia care unit (PACU) where you will be monitored as you wake up.
- Several factors determine the length of your stay in PACU including the type of procedure and the anesthetic used.
- The nurses will monitor your blood pressure, pulse, respiratory rate and oxygen level.
- PACU nurses will also assess your IV intake, urine output and your dressing.
- During recovery and throughout your stay, staff will encourage you to take deep breaths, cough and move your feet.
- Family and friends are not allowed in the PACU. When you are ready to leave the PACU, we will notify your friends and family.

Care Following the Recovery Room

Intravenous (IV)

- Your IV will remain in place until you are ready to be released.
- You will receive IV fluids until you are able to eat and drink without nausea or until your physician decides.
- You may receive pain medication and/or antibiotics through your IV site.
- Make the nurse aware if your IV site becomes painful or you notice any changes in the site.

Wound Care

- You may have a dressing over your incision.
- You may or may not have your dressing changed prior to going home.
- You may have skin staples; these will be removed as ordered by your physician.
- Your surgeon may place a drain during surgery to help the incision heal and prevent bruising in the surrounding wound tissue. Drainage will be collected and measured after surgery. The drain is typically removed the day after surgery. There may be some discomfort as the drain is being removed.
- You will need to follow your surgeon's discharge instructions regarding your dressing and incision.

Measures to Preventing Blood Clots

- You may be instructed to wear compression stockings (TED hose). If you are prescribed to wear TED hose, it is best to wear your TED hose for two weeks following surgery.
  - Remove TED hose daily to prevent heel sores. Observe heels daily for pressure areas and redness. Elevate your heels to avoid pressure from the mattress. Burning or soreness in the heels may indicate too much pressure.
  - You may have TED hose on both legs, regardless of only one operative site.
- Staff may apply compression foot pumps to your feet while in the hospital. Compression foot pumps automatically squeeze and release through foot sleeves connected to a machine.
- Perform ankle pump exercises. Do this by pulling your toes up toward your chest and then pointing your toes down. This action contracts and relaxes your calf muscles.

Eating and Drinking

Your care team will let you know when it's safe to begin eating and drinking after surgery.

Activity

- Incentive Spirometry (IS) is important to prevent pneumonia and/or fever. IS encourages deep breathing. Medications used for anesthesia or pain can prevent you from breathing deeply. Staff will instruct you to utilize IS to perform ten deep breaths every two hours while awake. You should continue the use of IS for one week at home.
- Physical therapy (PT) will begin as soon as possible and may be as early as the day of surgery. PT will evaluate you and create a customized therapy program beginning in the hospital and continuing upon your discharge to home.
- Initially some dizziness or lightheadedness is common while getting out of bed. Staff will ensure it is safe for you to get out of bed by monitoring your vital signs as you begin moving.

Avoiding Falls

Patients who have just had surgery are at a high risk to fall. Your chances of falling are greater if you have fallen before, have dizziness, unsteady on your feet, cannot hear well or have periods of confusion. Please take precautions to prevent falls. Please review the Preparing for Surgery guide for further instructions on how to prevent falls.

Measures Taken to Prevent Falls During Your Hospital Stay

- **Always call for assistance before getting up from the bed, chair or toilet.**
- The call light will be in reach to allow you to call for assistance.
- While you are in bed, a bed alarm will be activated to alert staff if you attempt to get out of bed without calling for help.
- An emergency call cord is in the bathroom for you to call for help before standing up from the toilet.
- We encourage families and employees to keep your path clear of furniture and other items.
- Staff will check on you frequently to be sure you are safe.
- A wide cloth belt called a gait belt will be in your room and used to help assist you with moving safely.

Medication Management While in the Hospital

- Make sure you have given staff a complete list of medications that you take. This includes all prescription medications, over-the-counter medications, vitamins, herbs, supplements and natural remedies.
- Your medical staff also needs to know the amount of alcohol you drink each day or week as well as recreational drugs you use, if any.
- Make sure before taking any medication while in the hospital that the nurse has checked your wristband and asked you your name before giving you the medication. The nurse will use a bar code scanner to check medications you receive and your patient identification band to keep you safe in the hospital.
- **Don't be afraid to tell the nurse if you think you are about to get the wrong medicine.**
- **Know what time you should receive your medication and speak up if you don't get it.**
- Let the nurses know if you don't feel well after taking a medicine.
- Most pain medicines are ordered on an as needed basis. Discuss with your nurse the timing of these medications to manage your pain appropriately and safely while you are in the hospital.
- Call the nurse immediately if you think you are having a side effect or reaction from the medicine.

Patient Safety During Your Hospital Stay

OrthoIndy Hospital works to keep patients safe during their stay. As a patient, you can help us make your stay safe by being active and involved during your hospital stay.

- Please speak up if you have any questions or concerns about your care. Ask again if you don't understand something. We want you to know what is going on with your own body.
- Be alert and aware of all treatments and medications you get while in the hospital.
- Educate yourself about your surgery and recovery period.
- Ask someone you trust such as a family member or close friend to be your advocate while in the hospital. Please remember that your medical information is protected by the HIPAA law. www.hhs.gov/hipaa
- **Make sure you understand all of your discharge instructions before you leave.**

Resource: Speak Up: Preparing for Surgery. The Joint Commission, JointCommission.org/speakup.aspx.

OrthoIndy PT Locations

We offer a variety of locations for out-patient physical therapy appointments. To see an up-to-date listing of locations and hours, visit OrthoIndy.com/locations. To schedule an appointment, please call **317.956.1082**.

Brownsburg
9070 E. 56th St., Ste. 300
Brownsburg, IN 46112

Carmel
805 W. Carmel Dr.
Carmel, IN 46032

Center Grove
1579 Olive Branch
Parke Ln., Ste. 100
Greenwood, IN 46143

Fishers
10995 Allisonville Rd.
Ste. 101
Fishers, IN 46038

Greenwood
1260 Innovation Pkwy.
Ste. 135
Greenwood, IN 46143

Lafayette
2548 Cumberland Ave.
Ste. 100
West Lafayette, IN 47906

Northwest
6040 W. 84th St.
Indianapolis, IN 46278

Westfield
288 E. 175th St., Ste. 200
Westfield, IN 46074

Going Home

Goals for Hospital Discharge

Typically, you are ready to go home if the following are met:

- If your care team deems you ready to go home
- If you can sit up and lie down on your own
- If you can stand up from a sitting position on your own
- If you can walk safely with your assistive devices
- If you can demonstrate precautions, perform home exercises, and perform your own activities of daily living such as bathing, brushing your teeth and dressing

Showering/Bathing

- You may shower per surgeon instructions. When you are able to shower, do not scrub the incision.
- Do not submerge your surgical site in any type of water (tub, pool, hot tub, spa, lake, ocean, etc.) until approved by your surgeon.

Physical Therapy/Exercises

Please follow the exercise plan that your physician and physical therapist have established for you. Your recovery process and continued health depends on good nutrition, rest and proper exercise.

Medication

Take all medication as prescribed by your physician. You may need to take your blood thinner (anticoagulant) medication for about one month after surgery.

Nutrition and Orthopedic Surgery

It is common to have a poor appetite after surgery. Eat as well as you can when your appetite is good. Eating small, frequent meals or snacks can help you to take in more nutrients. This can improve your energy level and enhance the recovery process. Keep in mind that your body is healing and requires adequate nourishment for tissue regeneration. **Therefore, your hospital stay and immediate post-op period is not a good time to begin a weight loss program.**

Fluids

Drink plenty of fluids (at least eight 8 oz glasses each day unless directed otherwise by your physician) to prevent dehydration. Most of your fluid intake should come from water.

Protein

Protein consists of amino acids, which are building blocks that help grow and maintain the body's tissues including muscles, tendons, blood vessels, skin, hair and nails. After surgery, your main focus for protein should be to consume high quality protein from good sources. This means you should aim to increase your intake of **eggs, lean meats, fish, tofu, nuts, seeds, beans, dairy products and soy products**. These are foods that contain essential amino acids which help aid wound healing and keep your immune system strong.

Helpful Resources

Academy of Nutrition and Dietetics
EatRight.org

ChooseMyPlate for Nutrient Density
ChooseMyPlate.gov

Eating for Strength and Recovery
EatRight.org/fitness/sports-and-athletic-performance/advanced/eating-for-strength-and-recovery-after-sports-injury

8 High Protein Foods to Reach For (Dietitian Approved)
Health.ClevelandClinic.org/8-high-protein-foods-to-reach-for-dietitian-approved

Bowel Care

Constipation may occur after surgery because of reduced physical activity and the use of pain medication. To solve this problem:

- Drink at least eight 8 oz. glasses of water daily.
- Add fiber to your diet by eating at least five servings of fruits and vegetables and three to four servings of whole grains, such as multigrain bread, brown rice and whole grain cereals.
- Eat yogurt with live culture.
- To prevent constipation, you will need to take an over-the-counter stool softener, laxative or fiber supplement. If you experience diarrhea, you may need to stop these medications.
- Foods containing caffeine (coffee, tea, chocolate, etc.) may also stimulate a bowel movement.
- Walking and moving about can be helpful.

Timeline for Recovery and Pain Management

Every patient is different, with varying degrees of physicality before surgery, and thus every individual's recovery is different as well. In general, six weeks is the acute phase of recovery from a total knee replacement. During this time, patients will use pain medication to enable their recovery, improve range of motion and strength with physical therapy, control swelling with cold therapy and transition from assistive devices to independent walking. It is likely that you will not require pain medication for the full six weeks of the acute phase of recovery. Throughout the first six weeks of recovery, you should decrease your pain medication and will likely not need medication around four weeks after surgery.

Your new knee is made of metal and plastic. You will likely notice some clicking noise early in your recovery. As you regain strength and functionality, it will diminish.

Difficulty sleeping is common in the first six weeks after surgery. If you are having trouble sleeping, you may try over the counter remedies such as Melatonin, herbal teas and etc.

Driving may begin around week three or four depending on your functional level and will depend on if you are still using narcotics. You cannot drive if you are consuming pain medication.

After six weeks, progress will continue to depend on the individual, but you may begin to increase your activities as tolerated. You will likely experience some soreness, soft tissue swelling and warmth for some time after six weeks. This is normal and part of the healing process. Overall, most people will notice continued improvement in their functionality throughout the first year.

Role of the Caregiver

Tips on caring for your loved one at home following total joint replacement surgery.

Caregivers should review all details in your provider instructions, *Preparing for Surgery* guide, and this booklet.

First Days Home

For the total joint replacement patient, it is likely that the first few days at home are the most difficult. Be aware of the following to help care for your loved one:

- They will most likely be tired and have pain.
- May become frustrated or even scared when faced with the difficulty of getting around.
- May feel they have lost their independence. This is likely the time that they will need you the most.
- May need assistance getting to the restroom and getting up from the toilet.
- May need assistance performing basic grooming necessities.

Medications

It is important that your loved one take all medications as prescribed. To have a better understanding of what medications they will be taking at home, it is helpful if you are present at the hospital when they receive their discharge instructions. As a caregiver you may need to help your loved one with their medications including:

- Helping them keep on a medication schedule.
- Monitoring the medication for refills.
- Renewing and picking up prescriptions from the pharmacy.

Wound Care

You will need to care for your loved one's incision as ordered and monitor it for any changes. Duties involving wound care may include:

- Change dressings – Instructions will be given upon discharge.
- Monitor the incision for redness, swelling and drainage.
- Report any wound changes to the surgeon.
- Acquire any dressing change supplies needed.

Household Chores

Household chores and meal preparation are difficult for someone who had surgery. You will need to assist with the following:

- Shopping, cooking, cleaning, laundry and various other household chores.
- Ensuring they are eating the right foods.
- Making sure they are getting plenty of rest.

Follow-up Appointment/Physical Therapy

It is important your loved one keeps all appointments after surgery to follow-up with the surgeon and PT sessions, if ordered. Missing appointments can lead to complications or setbacks in their recovery. You will also need to provide or arrange transportation to appointments.

Motivation for Rehabilitation and Exercises

Your loved one will likely say that exercising is painful and difficult, especially at first. You can help by:

- Providing motivation and encouragement through this difficult time.
- Helping them keep track of exercises including their results and progress.
- Making sure they stick to the rehabilitation plan.
- Giving them support and encouragement.

Emotional Support

In addition to the physical stress after surgery, there is also a great deal of mental stress related to recovery and rehab. You should remember:

- Decreased activity can affect a person's mental attitude and outlook.
- People can become frustrated due to pain or their feelings of inadequate progress with rehab.
- You can provide emotional support and encouragement by keeping them motivated and on the path to recovery.

Questions and Concerns

It is common to have questions for the physician, nurse and/or therapist after surgery and while recovery is taking place. Keep a pen and pad of paper handy to write down any questions or concerns. This helps you both remember any discussions that you need to have with the medical team.

Resources When You Go Home

Medical Issues

If you have concerns about your diabetes, blood pressure, urination or any other medical issue, please consult your primary care physician.

Case Management

If you have questions regarding the planning of your discharge or services set up by our Case Management department, please call **317.956.1148**.

Dietary Questions

If you have questions regarding your dietary intake, please contact our dietitian at **317.956.1114**.

Physical Therapy

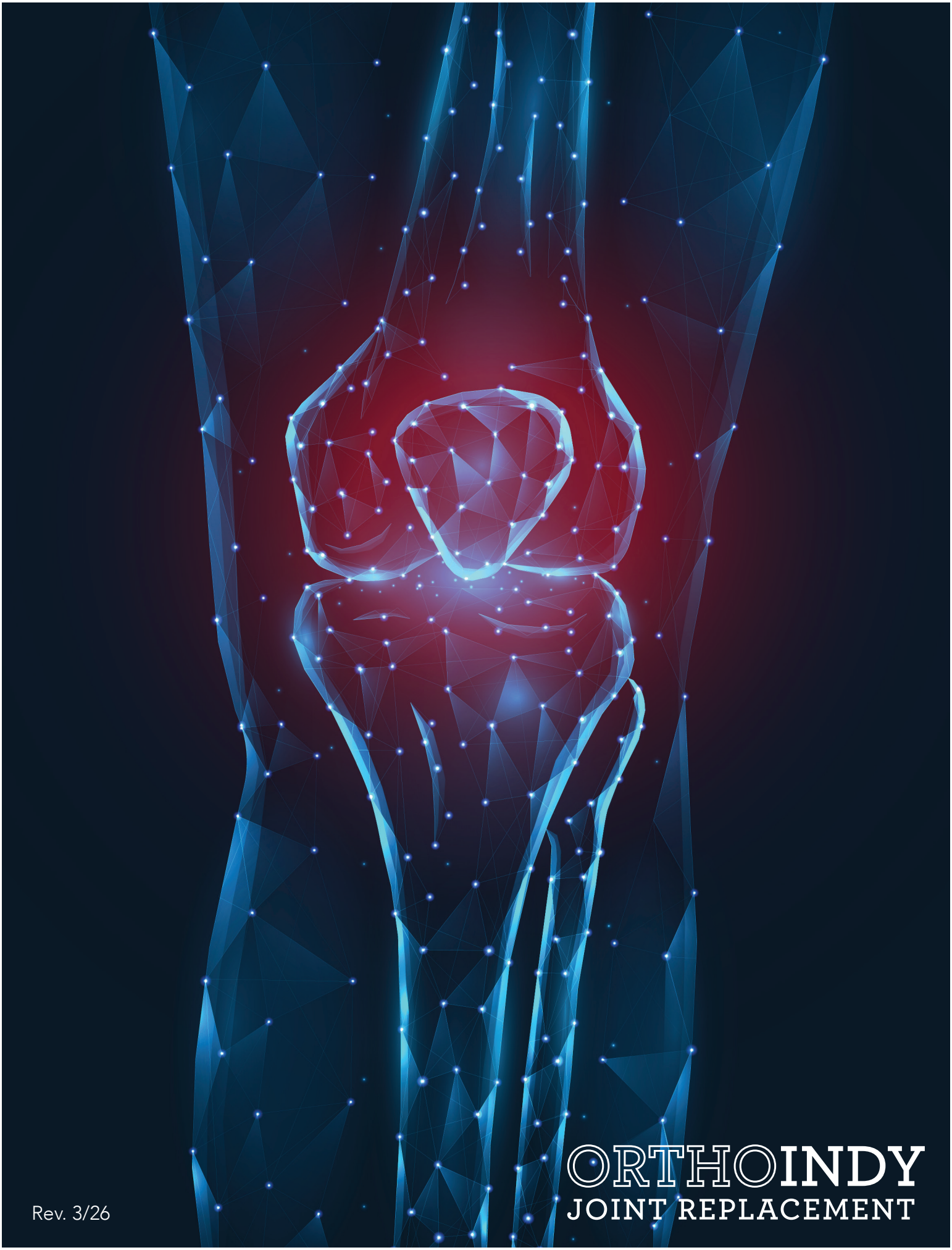
If you have questions regarding your therapy or exercises, please contact our Physical Therapy department at **317.956.1082**.

Hospital Billing

If you have questions regarding your bill, please contact our Billing department at **877.773.0055**.

OrthoIndy Surgeon

If you have questions or clarification is needed regarding your instructions, contact your surgeon's office at **317.802.2000**.



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