Welcome to the Connecticut Orthopaedic Institute at MidState Medical Center

435 Lewis Avenue, Meriden CT 06451

On behalf of the Connecticut Orthopaedic Institute at MidState Medical Center, we welcome you and extend our thanks for choosing us to be your orthopaedic surgery provider. We recognize you have a choice when deciding where to receive care and appreciate you giving us the opportunity to exceed your expectations.

Our goals at the Connecticut Orthopaedic Institute are to ensure the highest standards of medicine and to provide a high quality experience for you. We are committed to keeping you informed, and helping you become an active participant in your healthcare. We will do everything possible to make your stay with us outstanding.

In this patient education guidebook you will find important instructions and information to prepare you for your upcoming surgery. The guidebook is intended to answer many of the questions you may have. It outlines the things you need to do before and after surgery. Planning tools, advice on medications, as well as diet and exercise recommendations are included. We encourage you to read the entire guidebook carefully.

Please keep in mind this is only a guidebook – your surgeon may specify certain aspects of your experience throughout this journey.
Joint replacement class

It is the expectation of your surgeon that you attend one of the Connecticut Orthopaedic Institute joint replacement classes offered every month. For your convenience, these classes are offered at various locations and times, as well as virtually. In the class, you will learn how to prepare for surgery and what to expect during your hospital stay. It is recommended that you attend class at least two weeks before your surgery.

To register for a class, please contact any of our orthopaedic nurse navigators:
Peter Cegelka, 860.384.8614
Christina DiMaggio, 203.464.7819
Kimberly Padovani, 203.802.8378

Please bring this guidebook and a family member or Coach with you to in-person or virtual classes.

Coach support is strongly encouraged throughout the process.

MY CLASS DATE/TIME: ________________________________

LOCATION: _______________________________________
Pre-Admission Centers (PAC)

There are three Pre-Admission Centers (PAC) in the Central Region, offering comprehensive pre-operative care for all patients scheduled for elective surgery. All patients must have a surgeon affiliated with Hartford HealthCare to participate.

SERVICES
• Pre-operative testing, including blood draw, EKG, and nasal screening
• Anesthesia evaluation, if requested by the patient’s surgeon
• Patient education for Enhanced Recovery After Surgery
• Pre-operative history and physical for those unable to obtain an appointment with their primary care provider within 30 days of surgery. This includes those who have not yet secured a primary care provider and/or prefer to complete their pre-operative testing at PAC in a single visit.

APPOINTMENTS
• Patients may request an appointment at a PAC by calling the appointment line at 203.694.8191 or 860.224.5131.

LOCATIONS
• Connecticut Orthopaedic Institute PAC at MidState Medical Center
  435 Lewis Avenue, Meriden, CT 06450
• Hospital of Central Connecticut
  5 Highland Street, New Britain, CT 06052
• Connecticut Orthopaedic Institute PAC of North Haven
  190 Universal Drive North Suite 101, North Haven CT 06473
MidState’s Mission and Vision

“Our mission is to improve the health and healing of the people and the communities we serve.”

“Our vision is to be nationally respected for excellence in patient care and most trusted for personalized coordinated care.”
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Directions to the Connecticut Orthopaedic Institute at MidState Medical Center
435 Lewis Avenue, Meriden, CT 06451

From Interstate 95-South
- I-95S To exit 48 (I-91N)
- I-91N to Exit 17, (I-691-W)
- Travel I-691 W to Exit 6 (Lewis Ave.)
- At end of exit ramp, take left to Main Entrance on right

From Interstate 95-North
- I-95N to exit 48 (I-91N)
- 91N to Exit 17, (I-691-West)
- Travel I-691 W to Exit 6 (Lewis Ave.)
- At end of exit ramp, take left to Main Entrance on right

From Interstate 91-South
- I-91S to Exit 18, (I-691-W)
- Travel I-691 W to Exit 6 (Lewis Ave.)
- At end of exit ramp, take left to Main Entrance on right

From Interstate 91-North
- I-91N to Exit 68W, (I-691-W)
- Travel I-691 W to Exit 6 (Lewis Ave.)
- At end of exit ramp, take left to Main Entrance on right

From Interstate 84-East
- I-84E to Exit 27, (I-691-E)
- Travel I-691 E to Exit 5 (Chamberlain Hwy.)
- At end of exit ramp, left onto Chamberlain Hwy. to third traffic light
- Right at traffic light and proceed approx. 1/2 mile to Lewis Ave.
- Right onto Lewis Ave. and then left at first traffic light

From Interstate 84-West
- 84E to Exit 27, (I-691-E)
- Travel I-691 E to Exit 5 (Chamberlain Hwy.)
- At end of exit ramp, left onto Chamberlain Hwy. to third traffic light
- Right at traffic light and proceed approx. 1/2 mile to Lewis Ave.
- Right onto Lewis Ave. and then left at first traffic light

When you arrive at the MidState Campus, proceed to the entrance located near the large flag pole. Valet parking is available at the entrance.
**Lodging**

For the convenience of your family and caregivers, two nearby hotels offer discounted rates to COI patients and caregivers.

**Inn at Middletown**
The Inn at Middletown, located less than 10 miles from the Connecticut Orthopaedic Institute, offers comfortable and charming accommodations for overnight guests. To reserve a room at a discounted rate, visit innatmiddletown.com and enter the promotional code: ORTHO or call 860.854.6300.

70 Main Street  
Middletown, CT 06457

**Courtyard New Haven Wallingford**
The Courtyard New Haven Wallingford, located less than seven miles from the Connecticut Orthopaedic Institute, offers guests convenient access to MidState Medical Center and desirable amenities. To reserve a room at a discounted rate, visit Marriott.com and enter online booking code “HFA” or call 1-888-236-2427 and ask for the “Connecticut Orthopaedic Institute rate.”

600 Northrop Road  
Wallingford, CT 06492

**Transportation**

We understand that traveling to and from the hospital may be difficult for some patients. We have partnered with a local travel company to set up complimentary transportation for patients. If you have a transportation issue, please contact your surgeon’s office and they can help set up the necessary transportation needed to or from our facility.

**PLEASE NOTE:** This service is only available to patients who live within a 25 mile radius of MidState Medical Center.
Preparing your body for surgery

**TOBACCO**
STOP smoking at least six weeks before surgery. Smoking is a modifiable risk factor that can increase complications after surgery. Nicotine hinders the healing process and the bone needs to grow on the new implant. Smoking cessation education programs can help combat these complications and facilitate recovery. If you have not stopped smoking, your surgeon may postpone your surgery. For more information on smoking cessation, please contact the nurse navigators.

**ALCOHOL**
No alcohol use one week prior to surgery. Also, please inform your healthcare team of your drinking history because serious harm can result from alcohol withdrawal when not properly managed.

**DENTAL CARE**
If you need dental work, get it done at least two weeks before surgery. After a joint replacement your surgeon may want you to take antibiotics before any future dental work. Depending on your dental history, your surgeon may require you to obtain pre-operative clearance from your dentist.

**EXERCISE**
Keeping your muscles toned will help you to recover after surgery. If you have access to a stationary bike please utilize that 3-4 times a week and attempt to increase the amount of walking you do daily.

**NUTRITION**
Proper nutrition is important before and after surgery. Proper nutrition will help ensure you have the strength for rehabilitation. You are encouraged to eat healthy, well balanced meals. Examples include:

- **Iron rich foods** (meat, fish, poultry, whole grain foods)
- **Vitamin C** to help absorb iron (multivitamins, juices and fruit)
- **High fiber foods** (raw fruits and vegetables, beans, whole grain foods)
- **Always drink** plenty of fluids

A blood tests performed prior to surgery is called Hemoglobin A1c. This measures of how well your blood sugar has been controlled over the past three months. An elevated Hemoglobin A1c may cause your surgeon to postpone surgery in order to prevent complications.
Importance of having a COACH
Coordinate Orthopaedic Awareness & Collaborate Healing

It is important that you choose a family member or friend to be your COACH. COACHES are people who help you throughout this journey. It should be someone who can assist with your daily activities in the immediate post-operative period, and when you return home. COACHES may be required to drive you to appointments or therapy sessions until you are cleared by your surgeon.

Here at the Connecticut Orthopaedic Institute we believe patients respond well to assistance of their COACH. Their encouragement and support will help you progress during recovery. If you live alone, consider having a friend or family member stay with you for the first few nights. At a minimum, patients should have their COACH available to stay with them for the first 24-48 hours after the return home from MidState Medical Center.
Preparing your home for after surgery

It is a good idea to prepare your home for your hospital discharge **BEFORE** you go to the hospital. The following is a list of suggested items that may help you during your recovery.

- Check with your insurance plan to verify which items are covered.
- You may find these items at medical supply companies; also many town senior centers have DME loaner programs.

Below are items that may be useful at home. A rolling walker and straight cane are required following a knee or hip replacement. Other items are recommended, or optional.

<table>
<thead>
<tr>
<th>Durable Medical Equipment (DME)</th>
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<tr>
<td><strong>Personal Aids</strong></td>
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<tr>
<td>Rolling walker</td>
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<tr>
<td>Elastic shoe laces</td>
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<tr>
<td>Long-handled reacher/ grabber</td>
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![Image of DME equipment]
Making your home safe

Here are some things you can do before to surgery to better prepare your home when you return from the hospital

• Remove all throw rugs, loose rugs, electrical cords and clutter from your hallways/walking areas as those pose an increased risk for falling.

• Patients need to complete stairs prior to leaving the hospital. If you have stairs to your bedroom, some patients set up a temporary sleeping arrangement on the ground level. This may alleviate the necessity to go up and down the stairs multiple times, until you have mastered the stairs at home.

• Though not required, you may consider installing safety bars, especially in the shower/bathroom. There are both permanent and removable items that can be purchased at medical supply stores or drug stores like CVS/Walgreens/Rite Aid.

• Check your cabinets for items that you routinely use and place them at a level where you will not need to bend, reach, or use a step ladder to access.

• Make preparations for pets that may be underfoot.

Blood thinners prior to surgery

• If you are on a blood thinner CURRENTLY, you will be directed by your surgeon when you should STOP taking that medication BEFORE surgery.

• Once your surgery is completed, you will begin back on blood thinners as directed by your surgeon.

• Keep in mind your surgeon may start you on a different blood thinner after surgery before returning back to your regular medication.

• This will also be discussed with your surgeon at your pre-op visit or with the orthopaedic team.
Pre-op showering instructions

Bathing instructions

Before surgery, you can play an important role in your own health. You can reduce the number of germs on your skin by carefully cleansing before surgery. Following the instructions provided will help you to ensure that your skin is clean before surgery to prevent infection.

You will need to shower with a special anti-bacterial soap called chlorhexidine gluconate (CHG). A common brand name for this soap is Hibiclens, but any brand of CHG is acceptable to use.

You need to shower daily with CHG soap the night before your surgery and in the morning before arriving at the hospital. Add at least two tablespoons of CHG soap to a clean washcloth to lather your skin taking care to avoid eyes, ears, and genital area. You will receive a bottle of CHG soap at your pre-operative joint replacement class or when you visit the Pre-Admission Center. Below is a picture and instructions on how to apply the CHG soap.

Caution: CHG is not to be used by people allergic to chlorhexidine.

If you have an allergy to chlorhexidine please speak with your surgeon regarding alternative anti-bacterial soaps.

Turn the shower on and rinse off your entire body.

1. Using a CLEAN wash cloth, apply the solution to your body.
2. Wash completely from the neck down, avoiding the private areas.
3. Allow the solution to dry for 2-3 minutes.
4. Turn the shower back on and rinse off completely. Dry off with a clean towel.
5. DO NOT use perfume, deodorant, powders, or creams after using the skin cleanser on the day of surgery.
6. Avoid shaving your legs for at least three (3) days prior to surgery. Any needed hair removal will be done at the hospital with surgical clippers.
The **night before your surgery**

Do not eat anything after midnight (at least 8 hours before surgery)

You may drink clear liquids up to two hours prior to arrival at the hospital. This includes water, Gatorade, Powerade, or apple juice. General guidelines are to drink between 8-16 ounces to help reduce nausea and dehydration after surgery.

**FOR DIABETIC PATIENTS** – we encourage you to substitute G2, a low sugar version of Gatorade.

- No food, hard candy, or gum on the morning of surgery.
- Water is allowed up until 2 hours prior to arrival at the hospital.

The **morning of your surgery**

- Shower using the CHG solution per instructions on the previous page.
- You may brush your teeth
- **DO NOT** use perfume, deodorant, powders, creams, makeup or nail polish.
- Wear comfortable clothing that is easily removed. Pack a clean, comfortable outfit for the next day.
- Wear comfortable non-skid or rubber soled shoes.
- **DO NOT** bring any home equipment (canes, walkers etc.) to the hospital unless you currently require them to walk.
Items to bring to the hospital

- Driver’s License
- Insurance Cards
- Eyeglasses with case (NO CONTACTS)
- Hearing aids or dentures with case
- Cell Phone, tablet, Kindle etc.
- **DO NOT** bring money or valuables
- **DO** bring a debit/credit card in case of a co-payment for any equipment
- **DO** remove all jewelry (wedding rings must be removed)

Clothing/footwear

- Loose fitting clothes (shorts)
- Slip resistant shoes (rubber sole)
- Special shoes (diabetic)
- **NO** open-back shoes

CPAP/BiPAP

- Be sure to know the proper settings on your machine at home.
- Please write the settings down if you are unable to remember them.
- You will be evaluated by a member of our respiratory therapy team.
- Bring your home mask or mouth guard.
- **DO NOT** bring your machine, the hospital will supply a machine for you.
Arriving at the Connecticut Orthopaedic Institute at MidState Medical Center

When you arrive at the hospital, you may use our free valet services or park in the parking lot near the flagpole outside of the Connecticut Orthopaedic Institute.

Once you have entered the Connecticut Orthopaedic Institute, please check in at the registration desk located immediately inside the entrance. A staff member will register you and guide you to the preoperative area, where you will change into a hospital gown and have a short physical assessment.

Then the surgical team will be introduced to you, and anesthesia will discuss their plan. Your surgical site will also be identified.

A staff member will direct your family member or COACH to the waiting area. When your surgery is complete, a staff member will notify your family member or COACH and arrange for them to speak with the surgeon.
**Valet parking services**

MidState Medical Center offers all patients convenient access to the hospital with free valet service provided by LAZ Parking.

**Valet parking business hours**

- 5 am to 8:30 pm, Monday to Friday

**Valet parking during business hours**

- Patient vehicles that pull up to the curb outside the Connecticut Orthopaedic Institute or Medical Office Building will receive a ticket from a parking ambassador.
- All valet vehicles will be parked on the MidState Medical Center campus.
- When it is time to retrieve your car, a staff member will contact a parking attendant.

**How to retrieve your vehicle after business hours**

To pick up your vehicle after 8:30 pm, please follow this procedure:

- Use the Patient Info Line by picking up the black phone on the wall beside the desk at the galleria entrance (Pavilion A). The phone will directly connect to the switchboard. No dialing required.
- Inform the switchboard operator about which vehicle you’re retrieving by using the information on the valet ticket.
- Switchboard will dispatch a Public Safety officer, who will retrieve the keys and escort you to your vehicle.
- Please wait for the Public Safety officer in the seating area adjacent to the Patient Info Line phone.
Meet your team at the Connecticut Orthopaedic Institute

**Surgeon:** The doctor who is responsible for evaluating the need for surgery and performing the surgery itself. The surgeon will manage your orthopaedic care during your hospitalization and in the office following surgery.

**Advanced Practitioners:** These are healthcare professionals who practice under the supervision of a physician. When your surgeon is not available for immediate hands-on care, the PA or APRN will round daily on patients to assist with medication adjustments, dressing changes, test-result monitoring and communicate daily with the orthopedists on patient care needs.

**Anesthesia Team:** Responsible for safely administering and monitoring anesthesia during surgery and in the recovery room. They will monitor you during your postoperative care for any issues related to anesthesia.

**Nurses:** Nurses are essential to care in the recovery of all patients after surgery in both the recovery room and on the orthopaedic floor after surgery. Many of our nurses have an orthopaedic certification – a mark of excellence among those in the profession who are committed to providing the best care for orthopaedic patients.

**Clinical Care Associate:** Under the direction of a licensed nurse, the clinical care associate performs vital sign monitoring, and provides bathing and toileting assistance.

**Physical Therapists/Occupational Therapists:** Therapists are trained to help patients safely start to move after surgery. They will provide reinforcement and education on the surgeon’s directions for walking, sitting, dressing, and movement after surgery.

**Care Management, Nurse Social Worker and Nurse Navigators:** These are licensed staff that assist in the planning, coordination, and monitoring of medical services for the patient with emphasis on quality of care, continuity of services and cost effectiveness. The Nurse Navigators will be in contact with you prior to surgery, throughout the process and then up to 90 days after your surgical procedure.
Anesthesia

There are several anesthetic techniques that may be chosen for total joint replacement surgery. You and your anesthesiologist will discuss all necessary factors prior to surgery and agree upon a plan for your anesthetic.

❖ Regional anesthesia (most common)

• This is a technique that will numb a particular area or region of the body.
• Examples include:
  » Spinal Anesthesia
  » Peripheral Nerve Blocks

Spinals: A spinal will make you numb from about the waist down to your toes. It lasts only a few hours and you may have a numbing sensation to your legs in the immediate post-operative period.

Peripheral Nerve Blocks: A peripheral nerve block may also make your extremity numb and generally lasts for 24-48 hours.

❖ General anesthesia

• Anesthesia that affects the whole body. You are completely unaware of your surroundings and will not respond to stimulation.

Duration of surgery

Your surgery will last approximately 1-2 hours. Once the surgery has been completed your family member will be notified a staff member. The surgeon will meet with your family member or COACH and update them on your progress.
Recovery—PACU

- The Post-Anesthesia Care Unit is also referred to as PACU.
- After surgery you will be brought to the PACU where you will be closely monitored as anesthesia wears off.
- The length of stay in the PACU will be determined by many factors such as the type of procedure and the nature of the anesthetic used. You may be in the PACU between one to two hours, but it will depend on your clinical need.
- We may ask that visiting time be limited.
- Please note that no food or drink is allowed for visitors.

While you are in the PACU, the nurses will monitor your blood pressure, temperature, respirations, heart rate and oxygenation levels, as well as continually assess your pain level. You may have a urinary catheter in place during your surgery, which will likely be removed at the end of your case.

Once the staff determines that you are ready to be transferred to your inpatient room, they will contact the unit and provide a report of your surgical case and time spent in the PACU.
Mobility

Mobility is medicine!
Research has shown that early mobilization following surgery can decrease complications. Mobilization (getting in and out of bed, going to bathroom, transferring to a chair) will happen on the day of surgery.

### Mobility includes

<table>
<thead>
<tr>
<th>Transfers (includes car transfer training)</th>
<th>Toileting</th>
<th>Stair training</th>
<th>Walking with an assisted device (cane or walker)</th>
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</thead>
</table>

**Getting started**

- Mobility may begin on the day of surgery.
- You will receive a Physical and/or Occupational Therapy evaluation and a customized therapy program will be developed.
- **DO NOT** get out of bed without the assistance of a healthcare team member for toileting, transfers, or walking.
- It is best to take your pain medication **prior** to your therapy session to allow better participation.
Pain management: keeping you comfortable

You will experience surgical pain following surgery. However, we will work with you to help manage your pain appropriately. If you are in pain or discomfort, please tell us. Good pain control takes partnership between you and your caregivers. Managing your pain will help you recover more quickly.

Our goals:
- Develop a pain relief plan
- Decrease pain to a level that is tolerable
- Determine if pain medication is needed and the appropriate amount

Pain assessment:
- To help us minimize your pain after surgery, you will be asked to rate the intensity and type of pain through the use of a pain scale zero to 10. (0 is no pain, 10 is excruciating pain)
- Realistically, a pain score of zero is not attainable after surgery, but a score between a three or four is attainable and acceptable for most patients.
- It is best if you obtain medication when your pain level starts to rise. Do not allow your pain to get severe. If you maintain pain control, it takes less medication and less time to manage the pain.

Pain Scale (0-10)
Lung exercises—coughing and deep breathing

You will be encouraged to perform simple lung exercises like deep breathing and coughing after your surgery. This prevents lung complications, like pneumonia, from occurring.

What is an incentive spirometer?
- An incentive spirometer helps with deep breathing.
- It is best to use it five to ten times every hour when awake for the first few days after surgery.

Beginning physical therapy

There will be physical therapists and occupational therapists assisting you with gaining strength, providing exercises that help increase range of motion and mobility. It is important to do these both before and after surgery. Besides strengthening your arms and legs you are also instilling muscle memory. Prior to surgery you can perform one to three sets of each exercise for ten to thirty repetitions, as tolerated. After surgery, consult with your physical therapist for the appropriate number of exercise, sets, and repetitions.

EXERCISES TO START NOW AND CONTINUE AFTER YOUR HOSPITAL STAY.

Ankle Pumps
- Stretch your toes back towards your knees. Next point them forward away from you.
Short-Arc Quad Sets

• Roll up a towel or a small blanket and place it under your knee. Straighten your knee while lifting your heel off of the bed. Hold this position for 5 seconds then bring your foot back down to the bed.

Knee Extension

• While sitting upright in a chair straighten your knee. Hold this position for 5 seconds then slowly return to the starting position.

Heel Slides

• Bend your knee and pull your foot back towards your buttocks and then slide it back to the starting positions. If you have hip precautions after surgery this exercise should be done while reclining in bed.

Hip Abduction/Adduction

• Lie on your back with your knee straight and your toes pointed up. Move your leg out to the side as far as you comfortably can, then slide your leg back to the starting position. If it is too difficult to slide foot along the sheet, you may do this exercise while standing.
Gluteal Sets
• Squeeze your buttock muscles together. Hold this position for 5 seconds then relax.

Quad Sets
• Tighten your thigh muscles by pushing the back of your knee down into the bed. Hold this position for 5 seconds then relax.

Modified Squats
• Stand while holding onto a counter or table. Bend your knees and squat pushing your buttocks back as though you were going to sit in a chair. Knees should remain behind your toes. Maintain a straight back. If you have hip precautions after surgery, make sure you do not bend more than 90 degrees.

Heel Raises
• Stand while holding onto a counter or table. Raise your heels off of the floor, then return to the starting position.
**Walking/Ambulation**: Your physical therapist will instruct you how to properly transfer out of bed, chairs, and cars. Your therapist will also review assistive devices helping you with proper balance and walking safely. It is expected that you sit up for a few hours in a reclining chair each day, including the day of your surgery.

- **DO** make every attempt each day to increase your walking distance.
- While you are in the hospital you will learn to walk into the bathroom, in the hallway and up and down stairs.

**Blood clot prevention**

- Deep Venous Thrombosis (DVT) is a blood clot in a vein. This could occur in either leg. The biggest danger is that a clot breaks off and travels to the lungs. This is known as a Pulmonary Embolism (PE) and it can be life-threatening.

- Signs and symptoms of a blood clot might be:
  - **DVT (clot in the leg)** – calf pain and/or swelling, warmth, redness, numbness/tingling
  - **PE (clot in the lungs)** – difficulty breathing, shortness of breath, chest pain, fast heart rate

- Frequent walking is important for blood clot prevention.
- Avoid sitting or lying in one position for long periods of time.
- Additional medical devices and blood thinner medication will be provided to decrease the risk of a blood clot. Be sure to take blood thinner medication as directed by your surgeon.
Transitioning home

Medication instructions

• Take all medication as prescribed by your doctor.

• Some people are discharged home with a prescription for injections to prevent blood clots. It is important that you or a family member learn how to perform these injections prior to leaving the hospital. Home care will not come to your home every day for each dose.

• You will be provided instructions about your medications to take after surgery. This will include a list of previous as well as new medications.

• Remember to check with your physician before you begin taking any over-the-counter medications, herbal remedies, and/or supplements.

• Avoid alcoholic beverages while you are taking pain medications.

• Pain medications will be prescribed after surgery.

• Constipation can occur secondary to narcotic pain medications. Increase your intake of water and add additional fiber to your diet. You may also need to take stool softeners and/or laxatives as needed.

• Ask your pharmacist questions you may have regarding your medications and associated side effects.

PLEASE NOTE:

• If your surgeon prescribes medications for you before coming into the hospital, pick them up from the pharmacy, but **DO NOT** bring these medications to the hospital.

• **DO NOT** take any of these medications before surgery; these are intended to be taken beginning once you return home from the hospital.
Showering/bathing

- Keep your incision dry at all times.
- You may shower when your physician instructs you to do so. When you are able to shower, **DO NOT** rub the incision.
- **NO** tub baths, hot tubs, spas, or pools until approved by your surgeon.
- You will receive instructions from your care team about wound-care management and showering.

Exercise

- Please follow the exercise plan that your doctor, physical therapist and/or occupational therapist have established for you.
- Your recovery process and continued health depends on good nutrition, rest and proper exercise.
- It is important to walk daily for short distances and frequently.
- There are no limitations to walking; however, you should avoid long distances, power walking, and treadmills.
- Keep pets away from you when you are walking as they may cause falls or twisting.
**Care for your incision**

Monitoring for signs/symptoms of infection is very important. Our nursing team will educate you on proper incision site management. We pride ourselves on having exceptionally low infection rates. It is important to keep your surgical incision protected and free from germs.

**Surgical dressing/bandage**

- There are different types of surgical dressings your surgeon may use after your surgery.
- Your nurse will discuss proper care of your dressing, as well as provide directions in your after-visit summary.
- Your surgeon will inform you when you are able to begin showering.
- Please cover your bandage while showering until you are told the incision can get wet by your surgeon.
- If skin glue was used, please leave it alone and let it release on its own.
- Do not apply creams, powders or lotions to your incision or the surrounding area.
- Do not scrub or soak your incision until cleared by surgeon.
Other important information

• Some degree of swelling is expected after joint replacement surgery. Elevation, ice and motion are helpful in decreasing the swelling. You should elevate your ankles above your heart during the day to decrease swelling. If severe swelling persists, call your surgeon.

• It is essential that you inform your dentist that you have had a total joint replacement, as you may need preventative antibiotics prior to having your teeth cleaned or other dental procedures.

• If you have any procedures following your joint replacement, inform that doctor that you have an implant. Your joint replacement surgery is now an important piece of your past medical history.

Transitional care planning

Length of stay

Our goal is to have you recover at home as soon as possible in a familiar and comfortable setting.

• Most people go home the day of or the day after surgery.

PLEASE NOTE: length of stay in the hospital is based on medical necessity and not physical capabilities.

Patients are responsible for making their follow-up appointment with their surgeon post-operatively.

Home care services

If homecare services are medically required they will begin the day after you return home. The frequency of your services will be discussed with you prior to leaving the hospital. This service will be arranged prior to leaving the hospital.
Do not forget!

- It is important that you fully understand your transitional care plan to ensure your continued healing, safety, and comfort. You will receive these instructions in writing before you leave the hospital.

- Before you leave the hospital ask questions about all of your medications. Be sure you know what medications are being prescribed, the proper dosage, how, and when to take the medication.

- Be informed about your health condition (ask the care team if you do not understand any information shared with you) and what you can do to help facilitate your recovery.

- **NO** driving while on narcotic pain medication. When you are allowed to drive will be decided by your surgeon.
CONGRATULATIONS!

You are well on your journey to recovery! Thank you for trusting us with your care.

Should you have any questions before or after your procedure please do not hesitate to call one of our nurse navigators:

Peter Cegelka
860.384.8614

Christina DiMaggio
203.464.7819

Kimberly Padovani
203.802.8378
Notes