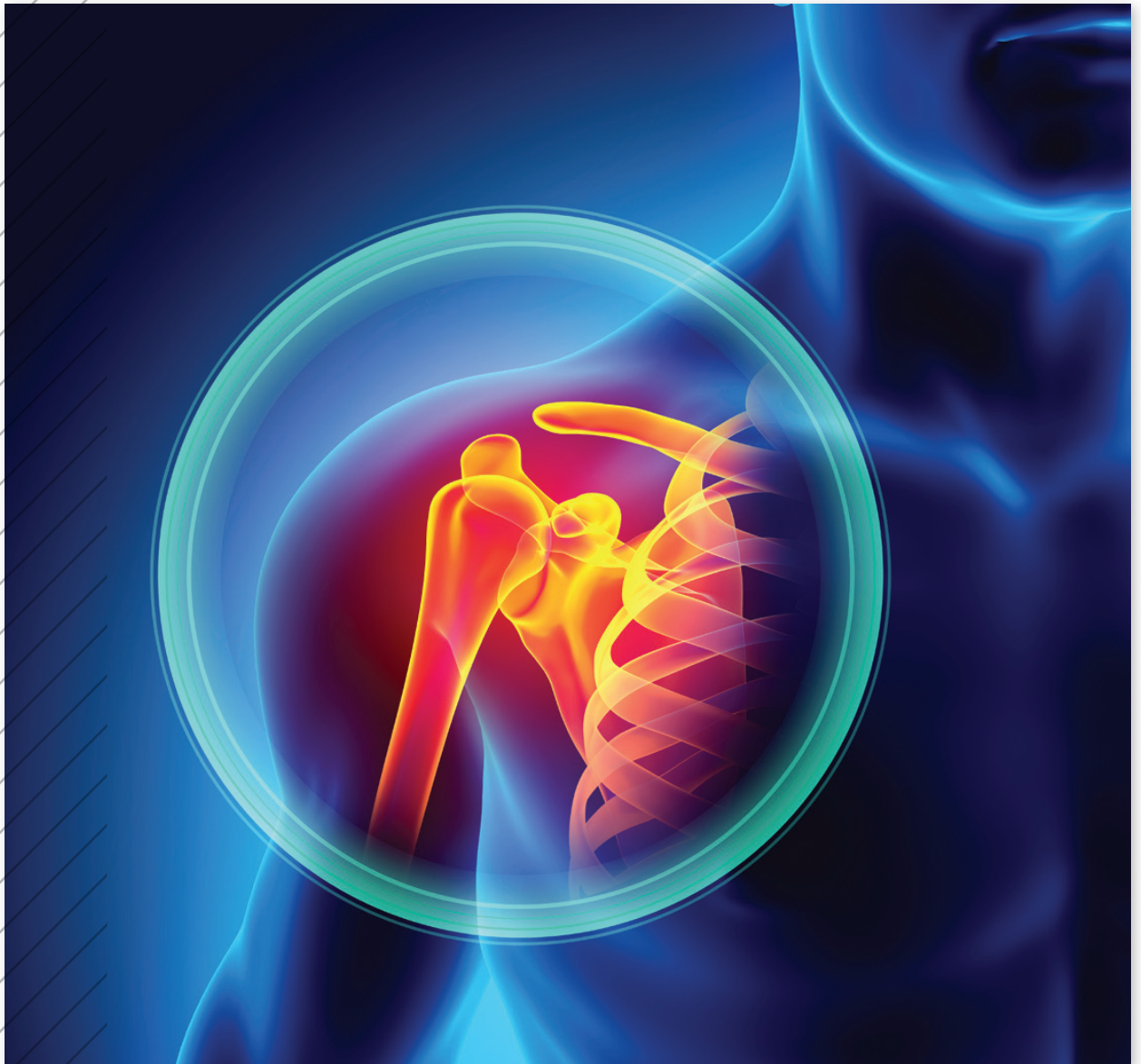


Shoulder Replacement Patient Guidebook



Connecticut 
Orthopaedic Institute

at MidState Medical Center

MidState Medical Center, 435 Lewis Avenue, Meriden, CT 06451



Connecticut 
Orthopaedic Institute

at MidState Medical Center

Welcome to the Connecticut Orthopaedic Institute at MidState Medical Center

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 COI joint replacement classes offered every month. For your convenience, these classes are offered at various locations and times. 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 2 weeks before your surgery.

In order to register for a class, please contact one of our orthopaedic nurse navigators at: [860.384.8614](tel:860.384.8614) or [203.464.7819](tel:203.464.7819).

Please bring this guidebook and a family member or Coach with you to class.

Coach support is strongly encouraged throughout the process.

MY CLASS DATE: _____

LOCATION: _____

Pre-Admission Center (PAC)

The Pre-Admission Center (PAC), located at the Connecticut Orthopaedic Institute at MidState Medical Center, offers 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 PAC by calling the appointment line at 203.694.8191

LOCATION

- Connecticut Orthopaedic Institute at MidState Medical Center, Pre-Admission Center
- 435 Lewis Avenue, Meriden, CT 06450
- Phone: 203.694.8194
- Fax: 203.694.7622

HOURS

- Monday to Friday, 8 a.m. to 4:30 p.m.
- Closed weekends and major holidays

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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Driving Directions to the Connecticut Orthopaedic Institute at MidState Medical Center

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 onto 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 (\$109 a night, with breakfast), 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 Connecticut Orthopaedic Institute, offers guests convenient access to MidState Medical Center and desirable amenities.

To reserve a room at a discounted rate (\$120 a night, plus tax), 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 transportation for patients. If you have a transportation issue, please contact your surgeon’s office and they can help set up the necessary transportation needs to and/or from our facility.

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.

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

Depending on your nutritional status prior to surgery, your doctor may request that you see a nutritionist.

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.

Connecticut Orthopaedic Institute Amenities

14,500-square-foot space on the second floor of MidState Medical Center, includes:

- 11 operating rooms.
- 21 in-patient beds (all private rooms each with a bathroom).
- A large rehab gym for patient recovery, including physical therapy and occupational health staff.
- Separate kitchen for 6 a.m. breakfast so patients can start their day earlier/rehab faster.
- Galleria upgrade to 2,600 square feet.
- New furniture, beds, window treatments, patient curtains, and motivational artwork to encourage patients during their stay.
- Private consultation rooms.
- Lounges for family to enjoy while patients are having surgery.
- New updated reception area.
- Food Trucks outside of Institute entrance to provide diverse unique food options.
- Cable TV in all rooms.

Importance of Having a COACH

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 stay with you for the first few nights.

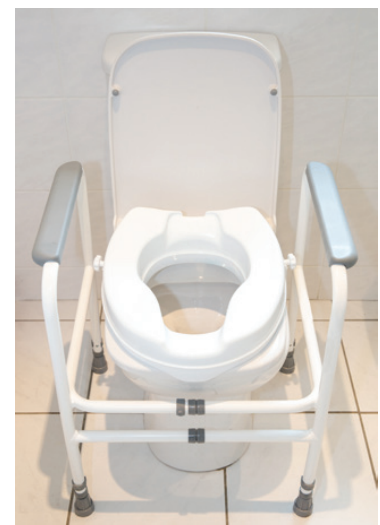
**Coordinate
Orthopaedic
Awareness &
Collaborate
Healing**



Preparing Your Home for After Surgery

- Some patients may require equipment to help them after surgery. Our physical and occupational therapists will assist you in determining any DME that you may need.
- The case coordinator will check with your insurance plan to verify which items are covered.
- For items not covered by insurance you may be able to purchase them at a medical supply company; also many town senior centers have DME loaner programs.

Durable Medical Equipment (DME)			
Personal Aids		Bathroom	
Rolling walker	Crutches/Straight cane	3-in-1 commode	Shower chair
Elastic shoe laces	Sock aid	Raised toilet seat	Hand-held shower head
Long-handled reacher/grabber	Long-handled shoehorn	Grab bar for shower/tub	Long-handled bath sponge



Making Your Home Safe

Here are some things you can do prior 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.
- Though you will be required to perform stairs with your physical therapist prior to returning home, it is recommended to set up a temporary sleeping area on the first floor if your bedroom is upstairs. For the immediate discharge time-frame this may alleviate the necessity to go up and down the stairs multiple times, until you have mastered the stairs with your at home physical therapist.
- 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.
- Make arrangements for your **COACH** (a family member or friend) to stay with you for the first few days once you return home from the hospital.

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 as an inpatient.

Night Before and Day of Surgery Preparations

Bathing Instructions

Before surgery, you can play an important role in your own health. Because skin is not sterile, we need to ensure that your skin is free of germs before your surgery. You can reduce the number of germs on your skin by carefully cleansing before surgery. Following the instructions provided by your surgeon 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.

Your surgeon may use CHG wipes instead. Whichever product is used by your surgeon, the office will provide you with the proper directions for application and when to apply these products.



- **DO NOT** use perfume, deodorant, powders, or creams after using the skin cleanser.
- Remove all gel nail polish.

The Night Before Your Surgery

DO NOT eat or drink anything 8 hours prior to surgery.

- No food, hard candy, or gum
- Water is allowed up until 1 hour prior to arrival at the hospital
- No coffee

Please note: Your surgeon may instruct you to drink PowerAde or Gatorade the morning of surgery to help maintain electrolyte balance. Ask your surgeon about this prior to surgery. If indicated, you will be instructed by your surgeon.

The Morning of Your Surgery

- You may brush your teeth. Try not to swallow the water.
- **DO NOT** use perfume, deodorant, powders, creams, makeup or nail polish.
- Wear comfortable clothing that is easily removed.
- Wear comfortable non-skid or rubber soled shoes.
- **DO NOT** bring any equipment (canes, walkers etc.) to the hospital unless you currently require them to walk.

Important Medication Instructions:

Your surgeon will instruct you about which at-home medications are **safe** and which are **not safe** to take on the morning of your surgery.

If you are instructed to take medications the morning of surgery please do so with water or your approved electrolyte drink.

Items to Bring to the Hospital

Two forms of Identification

- Picture Identification
- Insurance Cards
- Eyeglasses with case (**NO CONTACTS**)
- Hearing aids with case
- Cell Phone, tablet, kindle etc.
- **DO NOT** bring money or valuables
- **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.
- 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 valet service provided by LAZ Parking. Valet parking is free.

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.

Primary Care Provider: A doctor who manages a preoperative evaluation and medical clearance for surgery. They do not manage surgical issues during hospitalization, but may be called upon to assist with any medical issues during your hospitalization.

Physician Assistant: Professionals who practice under the supervision of a physician. When your surgeon is not available for immediate hands-on care, the PA will round daily on patients to assist with medication adjustments, dressing changes, test-result monitoring and communicate daily with the orthopaedists 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 in the recovery of all patients after surgery. They have expertise in the care of orthopaedic patients and your postoperative needs.

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: Licensed staff who assisting in the planning, coordination, and monitoring of medical services for the patient with emphasis on quality of care, continuity of services and cost effectiveness.

Anesthesia

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

Regional Anesthesia

- This is a technique that will numb a particular area or region of the body.

Examples include:

- Peripheral Nerve Blocks

Peripheral Nerve Block: A peripheral nerve block may make your extremity numb and generally lasts for 24 to 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 2-3 hours. Once the surgery has been completed your family member will be notified by either via the pager or text by an OR staff member. The surgeon then meets with your family member and updates them on your progress.

Recovery – PACU

- The Post-Anesthesia Care Unit is also referred to as PACU.
- After your 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 including the type of procedure and 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.



Welcome to the Connecticut Orthopaedic Institute Inpatient Unit!

Inpatient Unit:

Congratulations! You are now ready to start the journey to recovery. Once you have been transported to the inpatient unit, you will be greeted by staff members who will provide direct care to you in the hospital.

These staff members include your nurse, certified nursing assistant, physician assistant, physical therapist, and occupational therapist. They will help you get settled in your room, perform assessments and notify your family member when it is safe to enter your room. You will be working with your physical therapist the day your surgery.



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			
Transfers (includes car transfer training)	Toileting	Stair training	Walking with an assisted device (cane or walker)

Getting Started

- 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.



Your Hospital Stay

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 a 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 your pain through the use of a pain scale of zero to 10 (zero is no pain, 10 is excruciating pain).
- Realistically, a pain score of zero is not attainable after surgery, but a score between a four or five is an attainable and acceptable score 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)

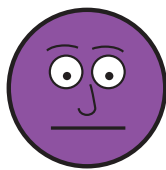


0



1-2

Pain is present but **does not limit activity**



3-4

Can do most activities with rest periods



5-6

Unable to do some activities because of pain



7-8

Unable to do most activities because of pain



9-10

Unable to do any activities because of pain

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 10 times every hour when awake for the first few days after surgery.

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.

Sequential Compression Sleeves

These sleeves are placed on your calves after surgery. They inflate and deflate automatically and assist in the prevention of blood clots. They are worn while you are in bed and sitting up in a chair.

Shoulder Exercises

PLEASE NOTE: Your occupational therapist will discuss with you what exercises you are allowed to do **AFTER** surgery.

You are able to perform all of these exercises (to the best of your ability) **PRIOR** to surgery. This will aid with muscle memory and help your rehabilitation after surgery.

Pendulums

- Stand while holding onto a counter or table. Let your operated arm hang down.
- Use your body weight to swing it forward then backward.



Pendulums Alternate

- Stand while holding onto a counter or table. Let your operated arm hang down.
- Swing your arm in a clockwise circular motion, then try it in a counter-clockwise direction.



Hand & Wrist Exercises



Finger Flexion/Extension

- Open your hand, spreading your fingers wide. Then curl your fingers into a fist position.



Elbow Flexion/Extension

- Place your arm on the arm rest with your palm facing up.
- Slowly bend your elbow as far as you can, then bring it back down to the starting position.



Wrist Flexion/Extension

- Place your arm on the arm rest with your palm facing down, and then flex your wrist up and down.
- Next, turn your arm so that your palm is facing up and flex your wrist up and down.

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.

Showering/Bathing

- Keep your incision dry at all times.
- You may shower when your surgeon 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 incision 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.



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

- Continue to wear your compression stockings as instructed. The length of time will be determined by your surgeon.
- Some degree of swelling is expected after shoulder 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.
- You will most likely return to all your normal activities about 6-8 weeks after surgery.
- 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 shoulder replacement, inform that doctor that you have an implant. **Your shoulder replacement surgery is now an important piece of your past medical history.**

Transitioning Home

Length of Stay

Our goal is to have you recover at home as soon as possible in a familiar and comfortable setting. Occasionally, a stay at a rehabilitation center may be necessary. Be aware that a rehabilitation stay must first be approved by your surgeon and insurance company.

- The expectation for a shoulder replacement is an overnight stay in the hospital. Once your physical therapist and occupational therapist have completed their evaluations and you are deemed safe to return home the staff will begin the discharge process.
- **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. Most visits occur 2 weeks after surgery.

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.

Don't 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.



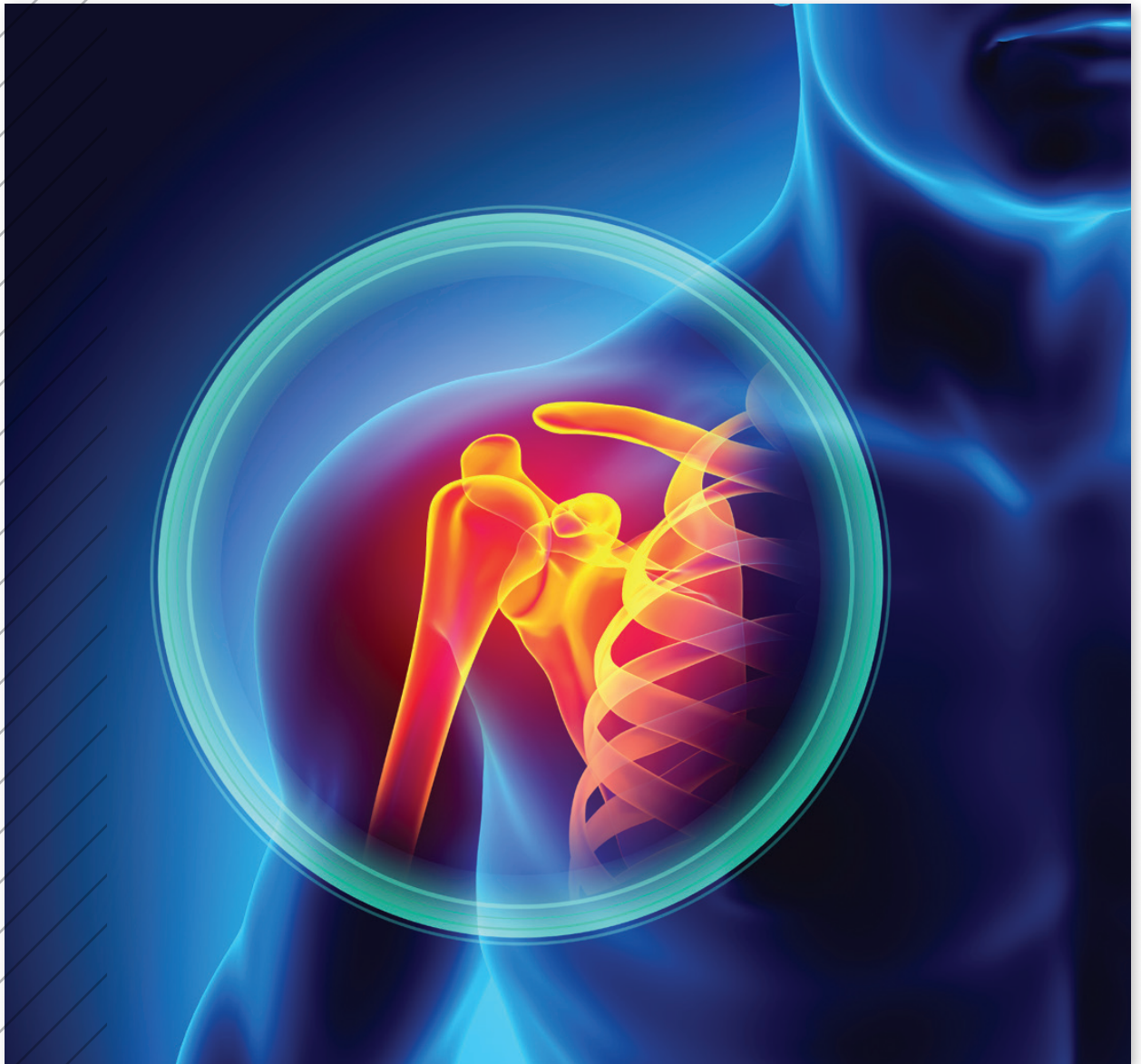
Congratulations!

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 our nurse navigators at 203.464.7819 or 860.384-8614.



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