

General Medical Center

500 University Avenue, Palo Alto, CA 94301

Tel: (650) 723-4000 | Fax: (650) 723-4001

PATIENT DISCHARGE SUMMARY

Patient Name:

James O'Connell

Date of Birth:

07/29/1958

MRN:

GMC-2026-55211

Admission Date:

01/28/2026

Discharge Date:

01/30/2026

Attending Physician:

Dr. Robert Chen, MD (Orthopedics)

Primary Language:

English

Discharge Disposition:

Home with home health PT

PRINCIPAL DIAGNOSIS

Status post Right Total Hip Arthroplasty (THA) for severe osteoarthritis of the right hip. Anterior approach. Implant: ceramic-on-polyethylene bearing surface.

SECONDARY DIAGNOSES

- Osteoarthritis, generalized
- Hypertension, controlled
- Obesity, BMI 31

HOSPITAL COURSE

Patient underwent elective right THA via anterior approach without complication. Intraoperative blood loss was 250 mL. Postoperatively, patient participated in physical therapy and was able to ambulate 100 feet with walker on POD 1. Pain was well controlled with multimodal analgesia. Wound clean and dry. Hemoglobin stable. Discharged on POD 2 with home health physical therapy arranged.

DISCHARGE MEDICATIONS

- Enoxaparin (Lovenox) 40 mg - Inject subcutaneously once daily for 14 days for blood clot prevention.
- Celecoxib 200 mg - Take by mouth once daily for inflammation and pain.
- Tramadol 50 mg - Take by mouth every 6 hours as needed for moderate pain.
- Docusate Sodium 100 mg - Take by mouth twice daily to prevent constipation.

FOLLOW-UP APPOINTMENTS

- Orthopedic Clinic: PA Smith - February 12, 2026 at 11:00 AM - Orthopedic Surgery Associates - Wound check and X-ray
- Physical Therapy: Home Health to contact within 48 hours to schedule. Start February 5, 2026.
- Pre-operative clearance follow-up: Dr. Patel (PCP) - February 20, 2026 at 3:00 PM

DAILY SELF-CARE INSTRUCTIONS

- Follow posterior hip precautions: No hip flexion beyond 90 degrees, no crossing legs, no internal rotation of operative leg.
- Use the walker for all ambulation until cleared by your surgeon or physical therapist.
- Apply ice to the surgical site for 20 minutes, 3-4 times daily to reduce swelling.
- Keep the incision clean and dry. You may shower 48 hours after surgery but do not soak the wound.
- Perform ankle pumps every hour while awake to promote circulation.

WARNING SIGNS - SEEK IMMEDIATE MEDICAL ATTENTION

- n Calf pain, swelling, or tenderness (signs of DVT - blood clot)
- n Sudden shortness of breath or chest pain (signs of pulmonary embolism)
- n Inability to bear weight on the operative leg
- n Fever greater than 101°F (38.5°C)

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n Increasing redness, warmth, or drainage from the incision