

Your Guide to Total Joint Replacement



Table of Contents

Video Health Library	1
Total Joint Replacement Surgery Checklist	2
Chapter 1: Before Surgery	3
Chapter 2: Hospital Care	8
Chapter 3: Care at Home	13
Chapter 4: After Surgery Activities	16
Chapter 5: Prevent Complications	17
Chapter 6: Exercises	19
Chapter 7: When to Call	24
Chanter 8: What is FRAS?	25

Video health library

Videos are available for this book on this page. They will help you understand the surgery process more. You can view them by:

Scanning the QR code with the camera of your smartphone or tablet.

- 1. Aim the camera on the back of your device at the QR code. Like you are taking a picture.
- 2. Hold your smartphone or tablet still for 2 to 3 seconds.
- 3. Click on the message with the URL address to be sent to the website.

Total Joint Replacement Patient Education Videos

UpToDate Engagement Education Library (Emmi)	Better Recovery after Surgery
Quitting Smoking: What You Can Do	Cleaning Your Skin
Home Safety: What you can do	What to Expect During Your Hospital Stay
Incentive Spirometry □详例回	How You Feel
Other Ways to Manage Pain	Opioids for Acute Pain
Taking Care of a Wound at Home	Preventing Infections: Hand Washing

Surgery checklist

My Surgery Date_____ My Arrival Time_____

Evening Before and Day of Surgery
☐ Stop eating solid food at: DateTime
☐ Stop drinking fluids at: Date Time
Shower with Chlorhexidine soap if directed to by your healthcare team.
Drink the complex carbohydrate drink if directed to by your healthcare team. 1st drink (evening before): DateTime 2nd drink (morning of) 1 hour before leaving home for the hospital: DateTime
What to Bring to the Hospital
Your most current list of your meds, vitamins, and herbal supplements.Mark each that have been stopped and when you stopped taking them.
☐ Driver's license or photo ID, insurance card, Medicare or Medicaid card, and any co-pay
☐ Copy of your advance healthcare directive and/or Living Will.
 □ Clean, loose fitting clothes, and slippers or shoes with backs and rubberized soles. □ Loose pajamas or short nightgown and short robe □ Loose shorts, jogging suit, sweats, and tops □ Socks and underwear
☐ Personal items such as: Toothbrush, toothpaste, deodorant, electric razor, comb, no powders
Bring any of the following if you use them and label with your name and return address. CPAP or BiPAP machine including the settings, tubing, and machine Glasses with case Hearing aids with case and batteries Dentures and container to put them in Cell phone and charger
☐ This Booklet – Your Guide to Total Joint Replacement
What to Leave at Home
Any item of value such as jewelry
☐ Cigarettes, nicotine products, and alcohol
☐ Home meds unless otherwise instructed
Arrange for:
A responsible adult to help you after surgery
Someone to drive you home after your surgery and to follow-up appointments Assistance with activities in the home (housework, loundry, most prop. and not care)
☐ Assistance with activities in the home (housework, laundry, meal prep, and pet care)

Introduction

At Novant Health, our goal is to help you get back to doing what you love most. All members of your care team work closely together during your surgical journey to make sure your experience is remarkable. Thank you for choosing Novant Health.

Your healthcare team

Your healthcare team members have special training and interest in surgery of the joints. They will guide you through what to expect before, during, and after surgery. You need to be an active partner with your healthcare team to have the best result. In this book, the word "provider" refers to the provider at your surgeon's office.

Chapter 1: Before surgery

Pre-surgery visit

Now is a good time to ask questions. You will meet with part of your healthcare team to talk about:

- Your health history including:
 - Bleeding or clotting problems.
 - Allergies to meds and foods.
 - o Past surgeries.
 - Any health problems.
 - o Any medical device in your body.
- Your healthcare team may talk to you about:
 - o High blood sugar.
 - Nicotine use.
 - Sleep apnea.
- You may
 - o Have a nose swab to screen for bacteria.
 - o Get an antibacterial soap (Chlorhexidine) to shower with the:
 - Night before your surgery.
 - Morning of your surgery.
 - Be asked to have more testing done.



What is a total joint replacement?

Total joint replacement is when your surgeon replaces your diseased or injured body part with man-made parts. The man-made parts are:

- Usually made of metals, ceramics, or plastics.
- Cemented or "press fit" into the bone.

Types of joint replacement

1. Shoulder replacement

Shoulder replacement can:

- Relieve arthritis.
- Lessen pain.
- Improve function over time.

2. Knee replacement

Knee replacement can:

- Improve bowed or knock knee deformity
- Relieve arthritis.
- Lessen pain.
- Improve function over time.

3. Hip replacement

Hip replacement can:

- Relieve arthritis.
- Lessen pain.
- Improve function over time.







Before surgery

Advance healthcare directive

- Helps to tell your healthcare wishes to the healthcare team.
- Bring a completed copy to the hospital.
- · You can get a form at the hospital.

Ask for help

Ask your spouse, children, neighbors, or friends for help after surgery.

Well-balanced food plan

Plan and eat healthy meals before your surgery date.

- You may get instructions for eating the days before your surgery.
- Eating healthy food helps your body heal faster. This includes:

o High protein foods

Fruits and veggies

o Whole grains

Low-fat dairy

- o Lean red meats
- Eat foods that have high amounts of iron.
- Your healthcare team may tell you to add a protein supplement to your food plan if you have:
 - o Lost weight
 - o A decreased appetite

Fluids

Water is the best choice for staying hydrated.

Smoking

- Talk to your provider to see if you have enough time to stop smoking or using nicotine before surgery.
- Smoking can cause breathing problems and slow down healing.

Infection

Tell your surgeon's office right away if you have:

- A cough, fever, rash or cold.
- An infection within a week before surgery.

Dental exam

Before and after your surgery:

• Check with your surgeon's office before having any dental procedures or cleanings.

Equipment

Talk to your healthcare team about equipment you may need after surgery such as:

• Hip and Knee Surgery

- Walker with 2 wheels
- o Elevated toilet seat or bedside commode

Shoulder Surgery

- o Immobilizer
- Sling
- Your healthcare team will let you know what equipment to use after surgery.
- Call your insurance company to learn more about what equipment is covered.
- You may be able to borrow equipment from family, friends, and local resources.

Pre-surgery exercises

Building strength is important to help you get ready for surgery. Activity you do before surgery helps you recover faster. It strengthens your muscles to improve movement after surgery. Plan to exercise 2 to 3 times a week before surgery. Every little bit helps!

Simple exercises are:

- Deep breathing
- Walking in waist-high water

- Water exercise
- Swimming

Low-impact activity sessions, by the Arthritis Foundation, are held at many local senior centers and gyms. Check with your healthcare team to see what exercises are right for you.

Home changes

You may need to make changes in your home before surgery. Start with getting rid of things that might make you trip or fall. This will help you to return home safely.

Meds

- Talk to your provider about what meds, vitamins, and herbal supplements to take before surgery.
- Please be honest about your drug and alcohol use.
 - o Drug and alcohol use can affect your anesthesia and pain management.
 - o Talk to your provider if you need help with ways to quit.

Transportation

- Make sure you know how you will get to and from the hospital and your outpatient visits after surgery.
- You are not allowed to drive yourself home from the hospital after your surgery.



Night before surgery

Showering

- Wash your hair with shampoo like normal and rinse it well. Do not shave from your neck down.
- If told to use a special soap follow these directions to help prevent infections after surgery.
 - o Avoid use on your face, hair, or genitals. Turn off the water or step out of the shower.
 - Wash from the neck down for 5 minutes.
 - This soap will not lather like your regular soap.
 - Pay extra attention to the place where you will be having surgery.
 - o Rinse the soap off and pat dry with a clean towel.
- After you shower:
 - o Do not put on any lotions, deodorants, creams, powders, or perfume.
 - o Put on clean clothes and sleep on clean linens.

Clear liquids

Follow your provider's instructions on when to stop eating solid foods and drinking liquids.

Clear liquids include:

- Tea iced or hot
 - Without cream, instant creamer, dairy, or nut milk
- Mineral, bubbly, or plain water
- Soda

- Coffee
 - Without cream, instant creamer, dairy, or nut milk
- Apple juice
- Sports drink
- * Clear liquids do not include broth or juice with pulp.

Day of surgery

At home

- Do not eat food, chew gum, or eat mints.
- Follow your provider's instructions on when to stop drinking clear liquids.
- Brush teeth and rinse. Do not swallow rinse.
- Shower
 - Use the Chlorhexidine soap that was given to you during your pre-op visit.
 - o Follow the same shower instructions you used last night.
- Remember to bring this booklet with you to the hospital.

Do not:

- Wear makeup, jewelry, fingernail polish or toenail polish.
- Take insulin unless instructed by your healthcare provider.
- Shave from your neck down.

Chapter 2: Hospital care

At the hospital

After you are checked in, you will be taken to a Pre-Op room. You will:

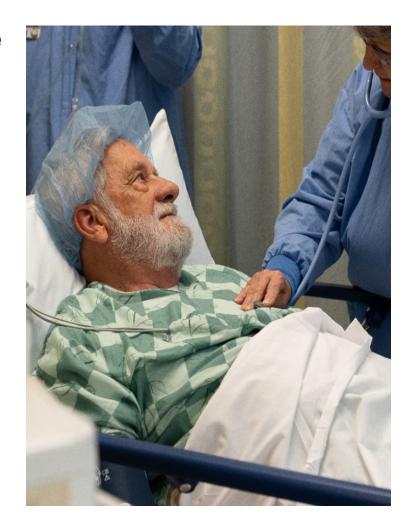
- Change into a gown supplied by the hospital and be given some meds to help you relax.
- Get special stockings placed on your legs to help stop blood clots from forming.
- Be given something to keep you warm.
- Meet your anesthesiologist and nurse anesthetist.

What to expect in the operating room

Many people will be in the room helping with your care.

You will be given:

- Something to keep you warm and IV meds to help you drift off to sleep.
- A mask to put on your face that will gently give you oxygen.
- Monitors will be used to watch your vital signs.
- You may be given general anesthesia which will allow you to sleep and be pain free during the surgery.
- You may be given a nerve block or an epidural. This
 - o Helps to control your pain after surgery.
 - May give pain control for up to 24 hours.



After surgery

Post Anesthesia Care Unit (PACU)

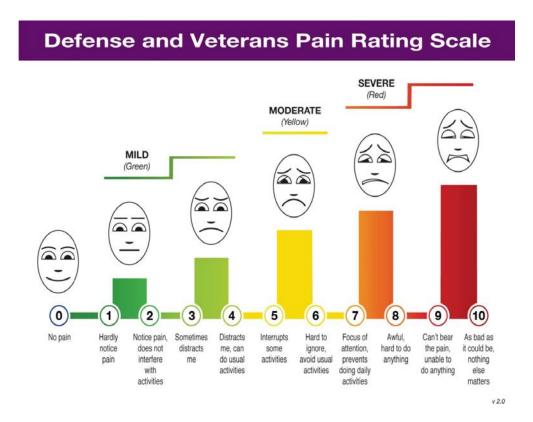
You will start to wake up here. You may not remember conversations, or the time spent in the PACU. The nurse will monitor your vital signs, pain, and nausea.

Managing pain and discomfort

- Pain is expected after your surgery.
- It may be uncomfortable to cough, sneeze, roll on your side, or stand up straight for long periods.
- Pain and discomfort will get better as you continue to heal.
- Your care team will work with you to help you best manage your pain.

Rating your pain

You will be asked to rate your pain on a scale from 0 to 10. The scale below is used to help show your care team the amount of pain you are feeling. Treating your pain will depend on this rating.



Meds for pain and discomfort

A combination of meds will work on different pain pathways. Let your healthcare team know if you are having pain.

Non-opioid meds

These meds may be on a schedule or you may have to ask for them. Follow the orders given by your surgeon.

Opioid drugs

- Used only if your pain is not controlled with scheduled non-opioid meds.
- Opioid meds will not be scheduled. You will need to let your healthcare team know if you need pain meds.
- The goal is to limit opioid use.

Non-med choices

Work with pain meds to help manage your pain, such as changing your position, ice, meditation, or massage. Ask your healthcare team which choices are right for you.

Same day knee or hip surgery discharge

If you have been chosen for same day surgery, you will

- Spend a short time in recovery or an observation room.
 - o The surgeon will speak with your family.
 - o Your family may be able to join you in the observation room.

Physical Therapy (PT):

- Will get you out of bed and work with you once your numbness wears off your leg.
 - Bring your rolling walker with you to the hospital on the day of surgery, if you have one.
 - Let the staff know **when you arrive** if you have not received your rolling walker.



Same day surgery going home goals

PT goals were met.
Vital signs are at baseline.
Has rolling walker.
Outpatient or home PT arranged.
Pain is controlled.
You can pee.
You can eat and drink without getting sick on your stomach.
You understand all instructions.

**We will plan for you to go home after the discharge checklist goals are met. If all goals are not met, you may be transferred to the nursing unit for an overnight stay.

Your hospital room

After the recovery unit, you may go to a hospital room. If you stay the night in the hospital, the surgery team will:

- Visit you at least 1 time per day.
- Look at your readiness to go home each time they visit.
- Talk about your going home choices and needs with your nurses or discharge planner.

Managing nausea

- You may have nausea after surgery.
- Meds will be given, if needed.

IV fluids

 IV fluids may be stopped when you are eating and drinking well.

Eating and drinking

You may drink fluids and eat solid foods as you are able.

Bowel function

- You may not have a bowel movement right after surgery.
- Bowel function returns slowly due to many reasons including anesthesia.
- Make sure you are drinking enough fluid.
- Get up and move as much as you are able.
- Talk to your provider if you feel that you need more help.

Managing swelling

- · After surgery, swelling is expected.
- To decrease swelling you may be asked to:
 - Elevate the area where you had surgery.
 - o Use cold therapy.

Preventing falls

***Call your healthcare team before you get out of your bed or chair. ***



Activity

Helps to prevent possible complications.

- Plan to get out of bed on the day of surgery. A member of your care team will help you get out of bed.
- You may need help when you turn in bed.
- ***Follow the joint precautions designed just for you.

Physical therapists

Your therapist will work with your surgeon to develop a plan just for you.

The therapists will teach you:

- Movements you need to avoid.
- Exercises to strengthen your muscles.
- How to walk and move safely.

Deep breathing

- Take deep breaths after surgery to prevent lung problems, such as pneumonia.
- You will be given a special tool called an Incentive Spirometer. Use this to:
 - o Practice deep breathing.
 - Use at least 10 times every hour while you are awake.

Circulation

- Perform leg exercises to help your blood circulate.
- You may have snug stockings and/or plastic sleeves wrapped around your legs or feet.
 - o If present, the plastic sleeves fill with air and then relax.
 - o Increases blood flow to your legs and helps to prevent blood clots.
- You will be given meds to reduce the chance of a blood clot.

Chapter 3: Care at home

Your path to healing will continue after you go home.

Coping with stress

Surgery can be a stressful event for anyone. It can be stressful to count on others to help while you are healing. Having support from friends and family is needed for a full recovery.

Rest

Make sure you get good quality sleep. Find ways to relax like listening to music.

Breathing

Use your incentive spirometer 10 times each hour while awake.

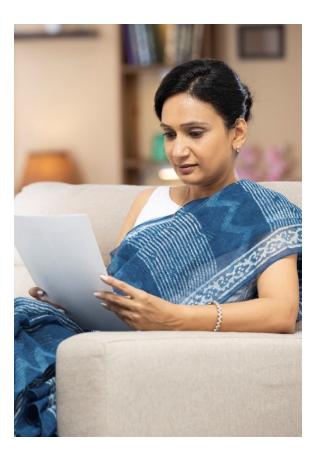
 This will help to prevent lung problems such as pneumonia and fluid building up around your lungs.

Meds to prevent blood clots from forming

- You may need your blood examined to make sure your med is working properly.
- Take for as long as directed by your provider.
- Contact your provider right away if you notice
 - Easy bruising
 - Nosebleeds
 - o Blood in your urine or stools

Bowel function

- Bowel function may not be normal and will return slowly after surgery. This will get better as you heal.
- For constipation:
 - o Drink plenty of fluids.
 - Use a stool softener and laxatives as told by your surgeon.



Showering

You may shower at home based on your surgeon's orders.

- Avoid scrubbing your wound. Use mild, non-scented soap.
- Let the water run down and pat your wound dry.

Wounds and dressings

Your wound may have stitches, surgical glue, staples or Steri- Strips. You may have a bandage over your surgical sites.

- Change and remove the dressing as told by your surgeon.
- Always wash your hands before caring for your wound to avoid infection.

Safety and avoiding falls

- Be aware of floor hazards such as throw rugs, small objects, pets and uneven surfaces.
- Use chairs with arms. Get up slowly from a chair or the bed.
- Change positions often to avoid getting stiff.
 Get out of the car and walk every 1 to 2 hours during travel.

Avoid

- Driving or operating heavy machinery until your provider tells you it is ok to do so.
- Taking tub baths, swimming, or getting in a hot tub until your surgeon tells you it is safe.



Pain at home

Numbness around the incision may be temporary or permanent. To lessen discomfort, you can:

- Change your position at least every 45 to 60 minutes during the day.
- Use cold therapy such as an ice pack or a cold therapy system on your joint for 20 minutes on and off for at least 20 minutes.
 - Use cold therapy if you have pain from surgery.
 - A gel pack, ice pack, cold therapy machine or bag of any frozen corn or peas can be used.
 - o Wrap cold therapy in a towel or place over clothing. Do not place directly on bare skin.
- Use non-opioid meds such as Tylenol (acetaminophen) and Motrin (ibuprofen) if ordered by provider.
- Take pain meds:
 - o 30 minutes before your planned therapy or exercise session.
 - o Before the pain becomes severe.
- Your pain will lessen as you heal.
 - Decrease your pain meds when you start to have less pain.

Opioid drugs

You may go home with a prescription for an opioid pain drug.

When taking opioid pain drugs, safety is very important.

- If needed, take the opioid drugs only as prescribed.
- Do not take them on an empty stomach.
- Store your opioid pain drugs in a safe place.
- Do not drink alcohol while taking opioid pain drugs.
- Do not operate a car or heavy machinery if you have used opioid drugs within 24 hours.
- Contact your surgeon if your pain is:
 - Not relieved with opioid drugs.
 - o Worse than it was in the hospital.

Your support persons need to call 911 if they notice:

- Slow, shallow, or fast breathing
- Trouble breathing
- It is hard to keep you awake

Getting rid of opioid drugs

- To prevent misuse and abuse, do not keep your meds for later use.
- Get rid of them as soon as you are no longer taking them.
- Always follow the throw-away instructions that come with your meds.



Restrictions

Knee surgery

- Do not kneel or twist the knee that you had surgery on.
- Do not lie in bed with a pillow under your knee
 - o Will lead to tightness in the back of the knee.
 - o Can lead to permanent loss of knee function.

Hip surgery

- Do not twist to see the incision for yourself.
- Use mirrors if you would like to view it.
- Follow any other precautions given to you by your healthcare team.

Shoulder surgery

- Do not bear weight on the side where you had surgery.
- Follow the instructions given to you by your healthcare team



Chapter 4: After surgery activities

Exercise

Exercise is very important after a total joint replacement. Exercise helps you strengthen your new joint and other muscles. It is normal to feel tired after surgery. Simple tasks may wear you out.

Keep on with your exercise program and challenge yourself to get better each day. The more you are active and exercise, the more you will be able to move.

- Your therapy team will suggest exercises that you can do.
- Do not hold your breath while exercising.

Activity goals

Try to walk further each day if you have stairs, use them to help make your legs stronger.

- Your therapist will continue to increase the number of exercises you do and your walking distance.
- Each week you should get close to how you were before surgery.

****Returning to activities, sports and work will be decided by you and your provider.

Chapter 5: Prevent complications

Surgical site infections

A surgical site is a cut in your skin from a procedure or surgery. Any cut made on the skin gives germs easy access into your body. Germs are always around. They are always looking for a chance to cause an infection.

After surgery, it is important to:

- Follow your surgeon's discharge instructions.
- Protect your surgical site against infection.

Once you are home from the hospital and ready to change your surgical bandage:

- Wash your hands with soap and water for at least 20 seconds.
- You may also use an alcohol-based hand sanitizer.
 - o If someone is helping you, they must wash their hands also.
- Keep your incision clean and dry.
- Your bandages need to be changed on a routine basis or if they get wet or dirty.
- Avoid submerging in large bodies of water such as swimming pools, lakes, or the ocean.
- Avoid tub baths and hot tubs.
- Contact your surgeon if you have signs of infection in your wounds. Signs are:
 - o Redness, heat or swelling around the surgical site.
 - Temperature over 100.4°F (38°C) or chills.
 - o Pus or drainage from your surgical site that smells bad.
 - o Pain that is more than it was in the hospital.

The faster your infection is treated, the faster you can get back on the road to healing.



Blood clots

A blood clot can move to the lung, leading to serious problems, including death.

Prevention:

- Snug stockings.
- Exercise and walk as instructed.
- If you are on a blood thinner med, take as directed by your provider.

Decreased appetite

It is normal to have a decreased appetite after surgery. This will get better as you heal.

- Eat several small meals daily. Follow the nutrition instructions given to you.
- Contact your surgeon if you have nausea or throwing up that does not go away.

Weight loss

- An ideal body weight puts the least amount of stress on your new joint.
- 1 pound of weight loss takes off 4 pounds of joint stress.
- To lose weight:
 - Follow your exercise and walking program.
 - Your surgeon can refer you to a dietitian if needed.

Watch for signs of dehydration

- · Feeling faint or passing out
- Dry skin
- Dark-colored urine

- Lack of energy
- Dry Mouth or cracked lips
- Very little urine

Chapter 6: Exercises

Shoulder surgery

Exercises for shoulder surgery patients will be given to you by your physical therapist. Instructions on number and how many times per day will be given by your therapist.

Hip and knee surgery

Ankle pumps



Sit in a chair or lie on your back in bed.

Straighten your knee and slowly push your foot forward and backward

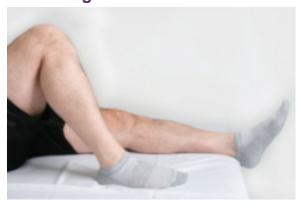
Quad sets



Lie on your back in bed.

- Press your knee into the mattress and tighten your muscle on the top of your thigh.
- Hold for a count of 5 to 10 seconds.
- Do not hold your breath.

Hamstring sets



Lie on your back in bed.

- Keep your surgical leg bent and the other leg straight.
- Tighten the muscle on the back of your surgical leg.
- Push the heel down into the bed with the surgical leg.

Hip and knee surgery

Gluteal sets



Lie on your back in bed.

- Squeeze your buttock muscles together.
- Hold for a count of 5 to 10 seconds.

Heel slides



Lie on your back in bed.

- Bend your knee and slide your heel to your buttock.
- Slide it back out straight.

Sitting knee extension



Straight leg lifts
(Do only when instructed by your healthcare team)



Sit in a chair

- Straighten your knee and hold for a count of 5 to 10 seconds.
- Lower your leg back down to the floor.

Lie on your back in bed.

- Tighten your thigh muscles and lift the leg up several inches off the bed.
- Keep your knee straight and toes pointed up.
- Hold the leg up for 5 to 10 seconds and then lower the leg back onto the bed.

Shoulder surgery

How to put a shoulder sling on.











- Have the foam pillow facing towards the floor when positioning your arm.
- Have a helper position your elbow in the back of the shoulder sling while supporting your arm.
- Have a helper flip foam pillow so it is snug against your side.

 Attach the strap that goes behind your neck into the top buckle.

Attach the 2 straps over your forearm.



 Bring the last strap around your back and buckle around your waist. It should be snug.

How to take a shoulder sling off.



Unbuckle strap around waist.



• Take off 2 middle straps that go over the forearm.



- Make sure your helper is supporting the surgical arm.
- Unbuckle strap that goes around neck.



 Have a helper support surgical arm while the shoulder sling is being removed.



 Once the shoulder sling is removed, place pillows under surgical arm to provide support while completing dressing, sponge bathing, etc.

Chapter 7: When to call

For all patients call 911 if you:

- Have trouble breathing.
- · Cough up blood.
- Have chest pain.
- Fall to the ground and cannot get up.
- Have increased anxiety when you try to take a breath.

For all patients call your surgeon if you:

Fall

Have signs of infection including:

- Temperature over 100.4°F (38°C) or chills.
- · Redness, heat, or swelling around the incision.
- Pus or drainage from your incision that smells bad.
- Pain that is more than it was in the hospital.

Become:

Dizzy, lightheaded, or faint.

Are unable to:

- Pee for 6 hours or more
- Have a bowel movement for 48 hours or more.

Have:

- Bleeding from your wound or the wound opens.
- Have nausea or vomiting that will not go away.

Have signs of a blood clot:

• Pain or a lot of tenderness, redness and increased swelling in your upper or lower leg.

For hip surgery patients call your surgeon

- If the leg that you had surgery on starts to turn in or out.
- You have a change in length of your leg.
- You can feel a lump over your hip
- An increase in numbness or tingling of your leg.
- If you are unable to walk or put weight on your leg.

For knee surgery patients call your surgeon

- If you have new or increased pain in your knee or your knee has an odd shape.
- · An increase in numbness or tingling of your leg.
- If you are unable to walk or put weight on your leg.

For shoulder surgery patients call your surgeon

If you have new or increased pain in your shoulder.

Chapter 8: What is ERAS?

Talk to your surgery team if you have questions about the ERAS program.

"ERAS" stands for Enhanced Recovery After Surgery. The goal of the ERAS program is to quickly and safely allow you to get back to doing what you love faster.

Recovery starts before, during, and after surgery. You will focus on:

- Staying hydrated
- Early walking and exercise
- Eating healthy

As an ERAS patient:

- You may drink clear liquid 2 hours before your scheduled surgery time.
- You will get 2 complex carbohydrate drinks at your pre-surgery visit.
 - Helps to prevent dehydration, nausea and throwing up, and blood sugar spikes during and after surgery.
 - Refrigerate or pour over ice.
 - o Night before surgery: drink 1 bottle before going to bed.
 - o Day of surgery: drink the 2nd bottle over 5 to 10 minutes 2 hours before your scheduled arrival time.
 - You may get protein drinks to drink for 7 days before surgery.
 - Increasing how much protein you get before surgery can help you heal better after surgery.
 - Your healthcare team will tell you how many protein drinks you need to drink each day.
- After surgery you will:
 - o Get out of bed.
 - Eat and drink.
 - Get a combination of meds that work on different pain pathways. Non-med options work with meds to help you manage your pain.

Expect Remarkable

R 03/2025 © Novant Health, Inc. All rights reserved.

This information is not intended as a substitute for professional medical care. Always follow the instructions of your provider at your surgeon's office.

