Total Joint Academy

Sioux Falls Specialty Hospital

Contents

Introduction		
About SFSH	2	
Welcome Letter	2	
Total Joint Replacement Team	3	
Preparing for Surgery		
Physical Therapy	4	
Pre-Operative Appointment Checklist	5	
Preparing Your Home	6	
Preparing Your Body	7	
Things to Bring to Hospital	8	
Things to Leave at Home	8	
Surgery		
Surgery Morning	9	
Pre-Op	9	
Operating Room	9	
Post Anesthetic Care Unit (PACU)	10	
Recovery Care (RCC)	10	
Recovery		
Day of Surgery	11	
Post-Op Day One	11	
Pain Control	12	
Medications	13	
Going Home		
Discharge Planning	14	
Discharge Instructions	15	
Frequently Asked Questions	16	
Balanced Diet Reference	17	
Survey	18	
RAPT Form	19	



Welcome to SFSH!

Our Mission

P.R.I.D.E.

Personalized

Responsive Innovative Care

Dedicated to

Excellence

Our Cornerstones

Our Vision

Providing service excellence.

Our Values

Our values are relationships, passion, honesty, integrity, accountability, quality, innovation, and fun.

- **People:** Fostering honesty and respect in dealing with ourselves and others. We will hold ourselves to the highest criteria of honesty, fairness and professional ethics.
- **Progress:** Enhancing our reputation as a facility that customers can rely on to deliver care that promotes empathy, dignity and respect for all.
- **Performance:** Seeking sustainable, profitable growth by encouraging persistent pursuit of our vision through innovation and leadership.
- **Service:** Deliver care that is so outstanding in its responsiveness and safety, that our name will be synonymous with outstanding quality in the healthcare market.

Dear Guest,

On behalf of our expert physicians, nurses and healthcare staff, we would like to thank you for choosing the Sioux Falls Specialty Hospital (SFSH). We look forward to helping you feel better!

Our goal is to provide you with valuable information regarding what to expect before, during and after your surgery. Additionally, we want to give you the opportunity to learn and ask questions related to your surgical journey.

We are committed to helping you become an active partner in your healthcare. We will do everything we can to help prepare you for the surgical process. In this packet you will find important information to prepare you for surgery. Please take time to read the material carefully. If you have any further questions please contact the hospital or your surgeon's office.

Sincerely,

Your SFSH Team

Total Joint Replacement Team

Orthopedic Surgeon

Your orthopedist is the doctor who performs the joint replacement and is responsible for your health during your surgical journey.

Physician's Assistant (PA)

Your PA may assist the physician in performing your procedure and will visit you while you are in the hospital.

Anesthesiologist/ Certified Registered Nurse Anesthetist (CRNA)

Your anesthesiologist and CRNA administer anesthesia, monitor your vital signs and maintain your airway during and after your surgery.

Hospitalist/Medical Doctor

The hospitalist is the medical doctor who oversees all non-orthopedic health concerns while you are in the hospital such as, blood pressure control, nausea, vomiting and diabetic management.

Registered Nurse (RN)

You will have multiple RN's involved in your care throughout your hospital stay. Some may assist with your healthcare needs, while others may assist your surgeon in the operating room.

Nursing Assistant

Nursing assistants will assist you and your nurse with your healthcare needs. They will assist you with your activities of daily living, walk with you and assist you to and from the restroom.

Discharge Planner

The discharge planners are RNs who assist you with your needs and plans for home. They will help you prepare for an optimal and safe recovery.

Nurse Navigator

Depending on your physician, you may have an assigned nurse navigator, who will follow you throughout your surgery and healing process. This will be your designated contact person with questions and concerns.

Physical Therapist (PT)

Your PT is trained to assist you in regaining strength and motion in your new joint. A physical therapist will work with you twice per day while you are in the hospital. Additionally, you may be required to work with a PT in the weeks following your procedure.

Occupational Therapist (OT)

Your OT is trained to teach you how to safely perform the activities of daily living, such as dressing and bathing.

Physical Therapy

Physical therapy begins the day of or day after surgery, depending on your doctor. You are expected to participate in 2 sessions per day.

Total Knee Replacement

- Patients who have had a total knee replacement will begin outpatient therapy within a few days of leaving the hospital.
- If you are able to schedule your appointment before you come for surgery, you will have a better chance of getting the date and time you prefer.
- A prescription for therapy (2-3 times a week) will be given to you prior to discharge.

Standard Total Hip Replacement

- Hip precautions to be followed for 8 weeks unless your surgeon specifies otherwise.
- Do not bend your hip into more than 90 degrees of flexion (right angle).
- Do not cross your legs, either at the knee or the ankle.
- Do not let your toes (hip) rotate inward.

Anterior Approach Total Hip Replacement

- No precautions to follow, unless specified by your surgeon.
- Outpatient physical therapy will be ordered after your first follow up appointment if needed.

Return to Activities Time Frame

- Please consult your physician with specific questions about returning to activities.
- Driving per physician guidelines
- Kneeling 8 weeks
- Dancing 8 weeks
- Bicycling 4-8 weeks
- Golfing 6-8 weeks

Arm Strengthening

We recommend arm strengthening exercises to assist you post-operatively as you may need to rely more on your upper body when using a walker or crutches.

A copy of strengthening exercises to start before your total joint surgery is located in our Total Joint Academy pamphlet as well as in our Power Point presentation.

Pre-Operative Appointments

Preparing for your new total joint begins several weeks prior to surgery. This checklist can assist
you in assuring all necessary appointments and phone calls have been completed prior to your
scheduled procedure.

Pre-Operative Medical Clearance: Approval from your primary care provider and/or indicated specialists for you to undergo a surgical procedure. <i>This must be completed</i>
within 30 days of surgery.
Physician:
Date:
Time:
Physician:
Date:
Time:
Pre-Operative Total Joint Class
Date:
Time:
Pre-Operative Nurse Phone Call
Date:
Time:
Surgery
Physician:
Date:
Time:
First Post- Operative Physical Therapy Appointment
Location:
Location.
Date:
Date:
Date: Time:
Date: Time: Post-Operative appointment

Preparing your Home

Get all "needs" on one floor if possible

We will teach you how to safely navigate stairs however; it is helpful to have all necessities available on one floor as you may require additional assistance climbing stairs.

Meal preparation

We recommend making meal time as easy as possible after surgery and it may be difficult to stand for longer periods of time. Additionally, it may be difficult to prepare meals while using a walker or crutches.

Remove rugs, cords, and all other tripping hazards

These items can cause you to trip and fall after surgery. Please remove anything that a walker or crutch leg could catch on.

Clean bed sheets and towels

We recommend having clean linens following your surgery to reduce the risk of infection.

Pet and mail arrangements

Please arrange for someone to assist with pet care and getting the mail, as these tasks may be challenging during the immediate post-operative period.

Equipment- walker, crutches, cane, bathroom supplies

If you own any of these supplies, we recommend getting them ready for use. However, if you do not have these items, do not purchase them before surgery as walking devices are often covered by insurance/Medicare following your procedure.

Grab bars in bathroom/Railing on stairs

If you have the ability to have these items installed before surgery they are helpful. If not, do not worry, we will teach you the best way to maneuver without them.

Strengthening exercises (TJA pamphlet)

In the weeks before surgery please begin the strengthening exercises located in the Total Joint Academy pamphlet that was mailed to you. If you need a new packet or did not receive one, please view our Power Point presentation or call 605-444-8200 for a replacement packet.

Healthy diet/weight management

Good nutrition is important before and after surgery to aid in the healing process. Please refer to page 17 for a balanced diet reference. Maintain a healthy weight as added body weight puts stress on your joints.

Quit smoking

Smoking is a leading risk factor for surgical complications. We strongly recommend you stop smoking as far in advance as possible to your surgical procedure.

Stop certain medication (Blood thinners, NSAIDs)

You may be required to stop certain medications prior to your surgery. Please check with your primary care provider or surgeon regarding the use of blood thinners and NSAIDs (ibuprofen, Aleve, Motrin, aspirin).

Shower as directed night before/morning of surgery

You will be required to shower the night before and the morning of surgery with a high quality/antibacterial soap. If you were given a special soap from your surgeon's office, please use as directed.

Remove nail polish

Please remove all nail polish/artificial nails prior to your procedure.

Dental cares

We recommend taking care of all dental needs prior to surgery as your surgeon may require you to wait a few months post-operatively for routine dental procedures.

Nothing to eat or drink after midnight the night before

Do not eat or drink anything after midnight the night before surgery. The pre-operative nurse will instruct you regarding any alternative recommendations.

Things to Bring to the Hospital

	Insurance and prescription cards		
	RAPT form		
	All labeled medications in the prescription bottle (except pain medication)		
	☐ Comfortable and supportive walking shoes		
	Loose fitting clothes		
	Toiletries		
	Cell phone charger		
	Pillows to use in car		
	CPAP if used for sleep apnea		
	Assistive device if owned		
	May bring electronic devices, Wi Fi is available throughout building		
Thing	gs to Leave at Home		
	Large sums of money		
	Valuables		
	Jewelry		
	Vitamins/supplements		
	Pain medications		
	Larger suitcases		

Surgery Morning

The morning of surgery can be very stressful. Here is a list of necessary steps to assist in making your surgery go as smooth as possible. It is important to follow these instructions or your surgery may be delayed or cancelled.

- Shower as instructed
- Take instructed medications
- Nothing to eat, clear fluids as instructed
- Arrive at scheduled time
- Utilize valet parking
- Check in with Registration

Pre-Op

Our pre-op area is where you get ready for surgery. Below are some of the tasks that take place during your time spent in pre-op.

- You will be given 6 warm disinfectant wipes to clean your body from chin to toes and 4 nasal swabs of iodine to clean both nostrils (This decreases the amount of bacteria on your skin reducing your risk for an infection in your surgical site)
- You will change into a hospital gown
- Your nurse will review your health history and medications
- Your anesthesiologist will meet with you to discuss types of anesthetic and pain control options
- Vital signs will be taken, labs drawn and an IV placed
- Your surgeon will verify your procedure and mark the surgical site

Operating Room/Surgery

- The length of surgery will depend on the extent of the procedure, however it usually takes 1 ½ to 2 hours per joint replacement
- You will have a choice between general and spinal anesthesia. You will discuss these options with the anesthesiologist in the pre-op area.
- You will have an airway in place to help you breath. This may cause you to have a sore throat following surgery.
- Family will be able to speak with the surgeon after surgery. Please make sure your family member will be present in the building in order to ensure timely communication with the surgeon.
- A waiting area with light refreshments is available for family until you are moved to your overnight room.

Post Anesthetic Care Unit (PACU)

Our post anesthetic care unit is where you will wake up from surgery. Family will not be able to visit you while in this area; however they will be notified of your status. Below is a list of tasks that take place during your stay in PACU.

- It usually takes 1-2 hours to wake up from surgery
- Your nurse will be taking your vital signs every 15 minutes
- You will be given pain medication, warm blankets, oxygen, SCD's (sequential compression device wraps) to promote circulation and TED Hose (compression stockings) to reduce swelling
- X-rays will be done on the surgical extremity
- Family will be notified when patient is transferred to Recovery Care (RCC)

Recovery Care (RCC)

Recovery Care is our overnight area of the hospital. This is where you will stay until you are discharged home. Below are tasks that take place upon your arrival to your overnight room in RCC.

- Orientated to your overnight room
- Nurse will complete an assessment
- Vital signs will be obtained
- You will be reunited with your family
- Belongings will be delivered
- There is a pull-out couch for a family member to stay
- Food menus for you and one menu daily for your visitor will be given

Visitors

- Visiting hours are 10:30 a.m. to 9:00 p.m. daily
- Visitors should enter at the Sioux Falls Specialty Hospital drive-through on the southeast side of the building, other entrances are locked at 6:00 p.m
- Caregivers can stay with patients around the clock
- For access outside visiting hours, caregivers can press the intercom button at the entrance
- Latex balloons are not allowed at SFSH, Mylar balloons are a safer alternative
- SFSH campus is a smoke-free establishment

Day of Surgery

- Activity
 - Bed/Chair
 - Up to bathroom/ you may have a catheter in your bladder which drains your urine
 - May see Physical Therapy
 - Walk as tolerated with staff
 - Use walker and gait belt
- Diet
 - Fluids/Light meal (soup, toast)
 - Advance as tolerated
- Equipment
 - Oxygen/heartrate monitor
 - IV pump
 - Hemovac/incisional drain
 - SCD's (sequential compression device wraps) to promote circulation
 - TED Hose (compression stockings) to reduce swelling
 - Polar Ice/Ice packs
 - May or may not have a CPM (continuous passive motion) machine depending on your doctor's preference
 - Volurex (an exercise device for your lungs)
 - Walker/crutches

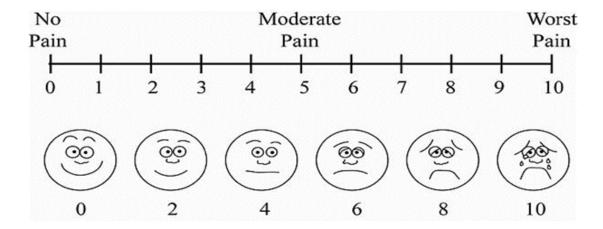
Post Op Day One

- Care Visitors- These are the individuals who will be checking on you before you go home.
 - Physical Therapy
 - Occupational Therapy
 - Discharge Planner
 - Doctors/PAs
- Equipment will be removed.
 - Drains, IV and catheter
- Labs- You may require your blood to be drawn
- Activity
 - Ambulate with walker/crutches in hall
 - Practice stairs with Physical Therapy
 - Change wound dressing
 - May shower/wash up/dress in own clothes
 - Go through pertinent instructions with nurse
 - Discharge to home

Pain Control

• Goal: Well Controlled Pain

- Nurses will assess your pain level every 2 hours
- Don't be afraid to ask for pain medication
- Scale 0-10 (0 being no pain, 10 being maximum pain)
- Pain should be tolerable at rest
- You will not likely be pain free
- Be proactive when taking pain medicine as it takes 45 minutes to an hour to take effect



Medications

Pain Medication

- Narcotics (hydrocodone, oxycodone, Dilaudid, morphine)
 - Side Effects:

Constipation

Nausea

Drowsiness

Dizziness

Itching

- Non-Narcotics (acetaminophen, tramadol, meloxicam)
 - Side Effects: Vary

No driving or operating heavy machinery while on narcotic pain medications.

Stool Softeners/Laxatives (Colace, Miralax, Fibercon)

• Side Effects:

Abdominal cramping

Diarrhea

Blood Thinners (Xarelto, Fragmin, aspirin)

• Side Effects:

Mild Bleeding

Bruising

Antibiotics (Ancef, clindamycin)

• Side Effects:

Rash

Itching

Flushed face

Discharge Planning

- A discharge planning RN will visit with you either the day of surgery or post-op day one regarding your needs and plans for home.
- They will also assist you with ordering any equipment.
- We try to take you and your family's preferences in to account. People typically do very well after surgery and usually are safe to discharge to home.
- Please plan to discharge home however, if inpatient rehab or home health services are medically necessary we can help you set up these services while you are in the hospital.
- If you have any questions or concerns regarding your discharge needs or feel that you may need these services, please contact one of the discharge planners at (605) 444-8205.

No matter how prepared you are for home it will be an adjustment. You will likely experience anxiety and may question whether you were ready to go home. Be assured that this is a normal feeling. We will do everything we can to assist you with this transition. You can do it!

Please do not compare your surgery to anyone else's or even to a previous surgery that you've had. Each surgery is unique and each person heals differently.

Discharge Instructions

- Return Appointment with your surgeon will be made for you.
 - Usually 10-14 days post-op
- Medications
 - Blood thinner, pain medication, stool softener
- Physical Therapy
 - Home exercise program to complete 2x's/day
 - Outpatient PT for total knee replacements
- Walker/Crutches
 - For at least 7-14 days
- TED Hose
 - On during the day only for 4-6 weeks, off at night
- Polar Ice/Ice packs
 - For comfort and swelling
- Incision Care
 - Expect bruising and swelling
 - We will send you with all dressing supplies needed
 - Watch for signs of infection (redness, swelling, pain, foul smelling drainage, temperature over 100.4 degrees F)
- Showering
 - May shower with incision covered as directed
 - Do not submerge wound
 - No tub baths
- Dentist
 - You may be asked to wait at least 3 months for elective dental work.
 - You will need antibiotic protection prior to any invasive procedures, including routine teeth cleaning. Your doctor will send you with a card documenting your surgery and need for prophylactic antibiotic therapy. Please present this to your dentist as well as primary care provider for their records.
- Medication Refills
 - If you feel you may need a refill on your pain medication please contact your surgeon's office 4 days prior to running out of medication as your surgeon will need to mail you a new prescription. Providers are unable to call in narcotics to your pharmacy. You will require a hand written prescription.

Frequently Asked Questions

Q. What if I live alone and I don't have anyone to help at home?

A. We recommend having a friend or family member stay with you at least the first 24 hours after returning home. We especially recommend someone there at night and then someone available to check in on you throughout the day.

Q. What will I wear in the hospital? What clothes should I bring?

- A. You will wear a hospital gown for at least the first 24 hours. Bring comfortable clothes/shoes that are easy to take on and off and that can accommodate for swelling in the feet, as this is common after surgery.
- Q. Will I need to go to an inpatient rehab facility such as swing bed or a skilled nursing facility after surgery? Will I need Home Healthcare?
- A. Our patients typically do very well after surgery and are able to go home. If you have any questions regarding inpatient rehab or home health care please feel free to contact one of our discharge planning nurses at (605) 444-8205.
- Q. When can I resume my daily activities?
- A. You can increase daily activities as you feel tolerable within your doctor's guidelines.
- Q. How long will I have to do physical therapy?
- A. Individuals having a *total knee replacement* are expected to go to outpatient physical therapy 2-3 times per week for at least 3 weeks.
 - Individuals having a *total hip replacement* will not be required to go to outpatient physical therapy unless instructed otherwise by their surgeon.
- Q. Do I have to do therapy exercises at home?
- A. Yes, all individuals will be given daily exercises to complete at home during their healing process.
- Q. Can I skip outpatient therapy and just do my exercises in my home?
- A. No, total knee replacements will still be required to go to outpatient therapy 2-3 time per week for 3 weeks.
- Q. How long will I need to use crutches or a walker after surgery?
- A. At least until your return appointment, usually around 2 weeks, minimum.
- Q. How long will I need to wear ted hose/compressions socks after surgery?
- A. They are to be on during the day only for 4-6 weeks. Take them off at night.
- Q. What does weight bearing mean?
- A. Your weight bearing status refers to the amount of weight you will be allowed to put on your surgical extremity following your surgery.
- Q. Will I have pain medication to take home?
- A. A prescription for pain medication will be sent with you to fill at the pharmacy of your choice.
- Q. Will I be on antibiotics when I go home?
- A. You will receive prophylactic IV antibiotics while in the hospital. You will not discharge home with antibiotics unless otherwise specified by your surgeon.
- Q. When will I get a call from the hospital?
- A. A pre-operative nurse will contact you 2 days prior to your scheduled procedure to verify your medical history and scheduled procedure.
- Q. Is there a place close by for my family to stay while I am in the hospital?
- A. We can accommodate for one family member to stay with you here in the hospital. There is also a hotel attached to our facility. The Center Inn's phone number is (605) 334-9002.

Balanced Diet Reference



Photo retrieved from http://www.draxe.com/wp-content/uploads/2012/07/Superfood-Plate.jpg

Total Joint Academy Patient Survey

Date:	Surgeon:
1.	How did you hear about the Total Joint Academy class? I was provided information at my Surgeon's Office during my clinic appointment.
	☐ I received a letter and Total Joint Academy brochure from the Sioux Falls Specialty Hospital in the mail.
	☐ I received a phone call from Sioux Falls Specialty Hospital.
	☐ I received a phone call from a Nurse Navigator at SFSH.
	☐ I saw it on the Sioux Falls Specialty Hospital website.
	☐ Other (please explain)
	☐ Yes ☐ No, if no, what time would be more convenient? ————————————————————————————————————
3.	What is something you learned today that you did not know?
4.	Were the goals (given at the beginning of class) met for you?
5.	Do you have any suggestions for this class?

RAPT: RISK ASSESSMENT AND PREDICTION TOOL

To be completed by patients undergoing elective Hip or Knee Replacement Surgery. Please bring this form with you to Total Joint Academy or to Sioux Falls Specialty Hospital on the day of your surgery. If you have any questions regarding this form please contact our Discharge Planner at 605-444-8205, Monday through Friday 8-5pm.

Name:			
Surgery Date:			
Surgeon:			
Procedure: Total hip replacementTotal knee replacement			
	Value	Score	
1. What is your age	<50-65 years	=2	

	Value	Score
1. What is your age group?	<50-65 years 66-75 years >75 years	=2 =1 =0
2. Gender?	Male Female	=2 =1
3. How far on average can you walk?	Two blocks or more (+/-rest) 1-2 blocks (+/-rest) Housebound (most of time)	=2 =1 =0
4. Which gait aids do you use? (More often than not)	None Single-point stick Crutches/walker	=2 =1 =0
5. Do you use community supports? (home help, meals on wheels, home health nursing)	None or one per week Two or more per week	=1 =0
6. Will you have someone available to care for you after your operation?	Yes No	=3 =0
	Your score (out of 12)	

Key: Destination at discharge from acute care predicted by score.

- Score <6 --- may need to discharge to skilled nursing facility or swingbed
- Score 6-9 --- may need additional services (e.g. home health care)
- Score >9 --- should discharge directly home.

Patient's preference	Score	
Patient Signature:		Date: