ROC
Regenerative Orthopedic Center

Total Hip & Knee Replacement Guide to Surgery

Important Communication Information

MYMOBILITY APP

Use QR Code to Download

General Office: 503-656-0836 | Nurse Advice: 503-213-1654

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Understanding Your Role & Disclaimer

Congratulations on your upcoming surgery! When it comes to preparing and recovering from surgery much of the work is up to you. This guide is to provide you with some resources and information on what to expect and some general information to assist you through the surgery process.

Thank you for partnering with our team!

This is a general guide for your surgery experience. Please follow the instructions your medical team gives you even if those instructions are different from what you read here.

Surgery Planning

The following **only** applies to pateints having a surgery at a surgery center. Hospital patients are contacted by pre-admit and scheduled for labs through that process.

- Please allow 3-4 weeks to obtain authorization for your surgery, the surgery scheduler will contact you once surgery has been approved. If you have not heard from them by 4 weeks from your initial consultation where surgery was indicated, please contact our office.
- Upon getting surgery scheduled they will notify you of any lab work or required testing that needs to be completed and where this is to be done. All lab work is to be completed before your pre-operative appointment. **It is imperative that you complete all pre-surgical testing as soon as possible.** Depending on your medical history and planned procedure these may include EKG, labs, nasal cultures, specialist consults and/or specific imaging.
- Please obtain the last office visit notes and lab test results from any specialists that you have seen within the past year. Please have office visit notes and labs faxed to 503-656-9464 or bring in a hard copy of the notes no later than your pre op appointment. **Please be aware that any hold-up of this information may postpone your surgery.**
- Recent steroid injection? Please note that surgery will be postponed by 3 months if you have had a recent steroid injection in the area to be operated on.
- Please find a physical therapy provider close to home. You will receive a prescription for physical therapy when your surgery is scheduled. We strongly encourage you to call and schedule your first physical therapy visit from **5–7 days to 10 days after surgery**. This timeline only applies to knee replacement patients, for hip replacement patients the timeline for physical therapy will be discussed at the pre-op appointment.
- For our surgeons that use robotics, you may need to get a CT scan. This will be addressed at the time of scheduling surgery.

Pre-Operative Appointment

The following **only** applies to patients having a surgery at a surgery center. Hospital patients are contacted by pre-admit and scheduled for labs through that process.

- Your pre-operative appointment will be scheduled when you receive your date of surgery. The pre-operative appointment is typically 30 days before your surgical appointment.
- All labs, EKG's, clearances must be done by the pre-operative appointment (and 60 days prior to surgery is ideal) to allow for proper review of all results.
- A new x-ray may be required at the pre-operative appointment.
- Bring a copy of your current medication list and your current local pharmacy.
    - Please include all prescribed narcotics, antibiotics, supplements, etc.
- Other issues to address at your pre-operative appointment include: This is a general guide for your surgery experience. Please follow the instructions your medical team gives you even if those instructions are different from what you read here.
    - If you have a history of pulmonary embolism or DVT.
    - If you have experienced any issues with anesthesia.
    - If you have experienced issues with nausea or vomiting.
    - If you are on a pain contract or take chronic narcotics.
- You will be asked to show the team that you have successfully downloaded the mymobility app and will learn about how this is our primary tool of communication during your post-operative period.

Surgery Checklist

- ✓ Be sure you have all the information you need before the day of your planned procedure. Please contact us through the mymobility app or Klara during business hours.
- ✓ Patients are REQUIRED to have a competent support person over the age of 18 to receive discharge instructions and stay with them for 72 hours.
- ✓ Your support person is REQUIRED to stay within a 15–20-minute radius of the surgery center or hospital.
- ✓ Patients are NOT allowed to drive themselves home from ANY surgery/ procedures or use any type of ride share service (Uber, Lyft, Taxi)
- ✓ Patients who are minors and/or cognitively disabled are REQUIRED to have a parent/guardian always stay on the premises.
- ✓ Please contact our office with any updates or changes to your pharmacy.
- ✓ Please make sure to have all prescriptions filled prior to surgery (this may be done 24 hours prior to surgery).

BEFORE SURGERY:

Being physically ready for surgery will improve your outcome and decrease your risk of complications. See the list below for some important conditions to manage before surgery:

- Tobacco Use – Smoking/all nicotine use must be stopped for one month prior to surgery
- Diabetes Mellitus – Hemoglobin A1C less than 8.0
- Sleep Apnea – bring C-Pap mask to facility
- Chronic Narcotic Use (this makes post-operative pain management difficult)
- Drug or Alcohol Dependence
- High Blood Pressure/ Hypertension
- Anemia
- BMI under 40 before surgery, and in some cases under 50

MEDICATIONS:

Update your medication list and stop certain medications before your surgery date as instructed. Your specific medications will be discussed at your pre-operative visit. This visit typically occurs 3-4 weeks prior to surgery.

- **MEDICATIONS to <u>STOP:</u>**
  - Anti-inflammatories (Ibuprofen, Naproxen, Advil, Aleve, etc.): **STOP 1 week prior to surgery date.**
    - Tylenol (acetaminophen) is **NOT** an anti-inflammatory.
  - Blood Thinners (Coumadin/Warfarin, Eliquis, Xarelto, Plavix, Pradaxa etc.): **STOP as directed.**
  - Aspirin: **STOP 7 days prior.**
  - Other Dietary or herbal Supplements not prescribed by a physician: **STOP 1 week prior to surgery date.**
  - Weight loss/GLP-1 Medications: **STOP 2 weeks prior to surgery date.**
  - Diabetic medications (Metformin) to **<u>STOP:</u> discuss at your pre-operative appointment with your PA or surgeon.**
  - Jardiance and related medication: **STOP 4 days prior to surgery.**
- Medications to ALERT your surgeon you are taking:
  - Long term steroids (You may need to temporarily increase your dosage due to surgery.)
  - Immunosuppressants (For patients with Rheumatoid Arthritis or organ transplants.)
- What to do the night **BEFORE SURGERY:**
  - Do not eat or drink anything after midnight the night **BEFORE SURGERY,** including water.
  - Medications prescribed by a physician should be taken on the morning of surgery, especially beta-blockers unless otherwise instructed by your physician or surgeon.
    - You may take approved medications with small sips of water.
  - No coffee and gum on the morning of surgery. Failure to comply may result in the cancellation of your surgery for safety reasons.
  - No alcohol intake the night prior to your procedure.
  - Remove jewelry.
  - Please follow the instructions from the facility regarding showering and shaving.

DENTAL VISITS:

Dental care is not recommended 2 weeks prior to surgery and for at least 3 months following surgery; however, circumstances may occasionally require dental work within this 3-month recovery period.

If any deep dental work is needed within this time frame, consult your dentist for antibiotics prior to the procedure. Your dentist may require a letter from your surgeon because of this request.

The American Academy of Orthopedic Surgeons recommends antibiotics prior to deep dental work only if you have a history of joint infection or severe immune disorder. They describe deep dental work as extractions, periodontal work, abscess, or root canal. Please contact our office with any additional questions.

VACCINES:

Please have vaccines done at least 2 weeks prior or wait until at least 1-2 weeks after surgery.

Day of Surgery

WHAT TO BRING THE DAY OF SURGERY:

- ✓ An updated list of your current medications.
- ✓ Copies of your advance directives if you so desire.
- ✓ Dress in loose, comfortable clothing.
- ✓ Phone and tablet are okay for times when waiting.
- ✓ Walker.
- ✓ Photo ID and insurance card.
- ✓ CPAP/BiPAP/mouth guard if applicable.

WHAT **NOT** TO BRING THE DAY OF SURGERY:

- ✓ Don't bring valuables such as jewelry or cash.
- ✓ Limit family members to no more than two on the day of surgery.
- ✓ Leave small children at home when possible. If you do bring children with you on the day of surgery, there must be another adult to supervise them.

CANCELING SURGERY:

Please contact our scheduler if there is any need to cancel surgery. This includes instances where you are not feeling well prior to surgery, this will help us decide if the surgery needs to be postponed. See below for examples of conditions that might delay surgery:

- ✓ Illness causing a fever within 1 week prior to surgery.
- ✓ Pneumonia.
- ✓ Uncontrolled asthma or unusual shortness of breath.
- ✓ Chest pain.
- ✓ Uncontrolled diabetes.
- ✓ Trauma to the skin in or near operative site.
- ✓ Infection (or have been prescribed antibiotics) please contact our office.
- ✓ If you have had a recent positive COVID test, please contact our office.

WHAT TO EXPECT WHEN YOU ARRIVE:

- ✓ You will see your surgeon and anesthesiologist prior to surgery.
- ✓ You will go over your medications one more time.
- ✓ You will change into a surgery gown and an IV will be placed to administer fluids and medications.

General Post Operative Instructions

Below are general instructions for after your procedure. There will also be instructions given on the day of surgery that will be more specific to your procedure. If you have any issues or questions, please contact our office for further guidance.

- **COMMUNICATION WITH OUR TEAM:** When your surgery was scheduled, you received instructions to download the patient care communication app called mymobility. We will ask you to show us that you have downloaded the app at your pre-operative appointment. Please use this as the primary tool to contact our office with any questions you may have after your surgery. Also, please follow the exercises as prescribed within the mymobility app. More information is available on page 12 about this app.
- **HOW TO GET HOME:** You should have a family member or friend drive you home and be available to stay with you continuously for at least 3 days (72 hours). You should not be left alone after anesthesia for safety reasons.

WHAT TO EAT OR DRINK AFTER SURGERY?

- Drink plenty of fluids after surgery. We advise you to start with bland foods and advance your diet as tolerated to ensure no post-operative nausea. Avoid large heavy meals for the first 24 hrs.
- No ALCOHOL after surgery while taking narcotic pain medications.
- NO SMOKING /NO TOBACCO USE/NO NICOTINE.

PAIN MEDICATIONS

(for more information see post operative medication instruction on page 10)

- Take your pain medications as instructed with food to prevent nausea.
- Pain medication refills will not be provided after hours or on the weekend.
- Any refills after 6 weeks from surgery will need to be through your primary care provider.
- Refills may take up to 48 hours. Please reach out before you run out.
- No pain medication will be prescribed for use prior to your surgery.

ANTIBIOTICS

- If prescribed, please take as directed.

SLEEP

- Interrupted sleep is very common after joint replacement.
- Consider changing position as it may be most helpful.
- For difficulty sleeping, avoid napping during the day, avoid alcohol and caffeine and limit food/liquids close to bedtime. Consider a non-habit-forming supplement such as melatonin.

STOOL SOFTENERS/LAXATIVES

- You should have a bowel movement within 2-3 days after surgery. If you haven't, please use stool softeners and laxatives in your regimen as instructed post-operatively. If you are having bloating, abdominal pain, diarrhea or constipation please contact our office on mymobility for further instructions.

DRESSINGS

- Please leave your dressings in place. Showering may be allowed with waterproof dressing on post-op day 1. Only remove dressing when directed to do so. Bleeding does occur after surgery and can be normal. If the bleeding continues or is soaking the dressing, please contact our office for further instructions.
    - The dressings are waterproof so you may shower with these dressings as well.
- Do not put any ointments or creams over or near the incision unless directed by your surgeon.

ACTIVITY

- Avoid strenuous activity for the first six weeks following your surgery. Advance activity only as your surgeon allows. Refer to post-operative instructions for weight bearing status and range of motion restrictions via the mymobility app.
- After 6 weeks from surgery, if an activity significantly increases your level of swelling or pain, that was too much for you that day. Back off and try again in a few days. If there is no increase in swelling after an activity, you may proceed.
- If you are having a total knee replacement, your surgeon will prescribe an in-home therapy bike.

SWELLING & BRUISING

- Some swelling and bruising is expected after surgery and should not cause concern. Often times, swelling can be to a significant degree.
    - This can include swelling in the joint, as well as the entire leg and foot. Swelling will likely worsen a few days after surgery. It is common for swelling to be better in the mornings and worse later in the day.
    - If you are on blood thinners, the swelling can be worse.
    - Swelling/bruising may be present for the next 2-3 weeks, however for some can last longer.
    - It is normal for some numbness around the incision.

ICE & ELEVATION

- Ice and elevation reduce swelling and inflammation and help relieve pain. Please ice 20 minutes every hour while awake for the first 2 weeks.
- We recommend elevating your toes above your nose while laying down at least three times a day for 30-60 minutes. When sitting, keep your foot elevated on a footstool or bench.

DRIVING

- Driving will be limited after your procedure.
- If your surgery was on the right side, we will address your return to driving at your first post-operative appointment. If your surgery was on the left, you should not drive until you can safely get in and out of the car and you are completely off narcotics (prescription pain medication).

FLYING

- We recommend against flying for 6 weeks after joint replacement if it can be avoided. In cases where it is necessary, understand it will not be comfortable and you will need to be up walking the aisle every 1-2 hours and doing frequent ankle pumps faces to prevent blood clots. Hip replacement patients will generally find flying more comfortable than knee replacement patients for the first 3 months after surgery.

When to Call the Office or On-Call Physician

- Pain is not managed well with current medication. **Communication on mymobility and if absolutely necessary phone calls regarding medication should be made during business hours.**
- Blood is soaking through the dressings and does not stop when pressure is applied, or new dressings are placed over the original dressing.
- Drainage that is yellow/green in color or is foul smelling.
- Opening of the incision.
- There is severe pain in the back of the calf with or without associated swelling.
- The operative leg appears darker in color or cooler to the touch.
- You have a temperature higher than 101 degrees F more than 4 days after surgery. Temperatures to 101 degrees F can be normal up to 4 days from surgery.
- There is worsening redness/swelling or increasing drainage involving incision site.

PLEASE GO DIRECTLY TO THE EMERGENCY ROOM IF YOU HAVE CHEST PAIN, SHORTNESS OF BREATH OR DIFFICULTY BREATHING.

Postoperative Medications

Your surgeon/PA will suggest multiple medications to help with your postoperative recovery. Generally, the recommended medications are listed below. Your surgeon and/or PA may make changes to these medications based on your current medication list and medical history/allergies.

- **OVER THE COUNTER (OTC) MEDICATIONS:**
    - OTC medication is considered the first line in pain control.
    - Please take your over-the-counter medications routinely for a few weeks after surgery to prevent falling behind on pain.
    - OTC medications dosing instructions:
    - Tylenol (acetaminophen), 1,000 mg every six hours (max dose 4,000 mg/day). We recommend extra strength (500mg) tabs.
        - If instructed, you can take one of the following NSAIDs:
        - Advil (ibuprofen) 600 mg every 6 hours (max dose 2,400 mg/day).
            - Aleve (naproxen) 220 mg every 12 hours.

        - Do not take OTC NSAIDS if:
            - You have a history of kidney disease, ulcers, gastrointestinal bleeding, gastric bypass surgery, or have been told by your doctor to avoid anti-inflammatory medications.
            - If you take a prescription blood thinner or a prescription anti-inflammatory, you should not take any OTC NSAIDs.
    - Tylenol (acetaminophen) and NSAIDs are safe to either take at the same time or alternate doses.
        - Your discharge paperwork will tell you when you had your last dose of Tylenol, and you should time your medications for 6 hours later.
- **NARCOTICS/PRESCRIPTION MEDICATIONS:**
    - General principles of pain:
        - Prescription medication is to be taken as needed for breakthrough pain.
        - You will not be pain free during the recovery process. It is important to remember that narcotics are to be reserved for severe pain. If the pain is intense enough that you can't walk or do your exercises this is a considered severe pain.
    - Oxycodone 5 mg tablet, 1 or 2 tablets every 4 to 6 hours AS NEEDED.
        - If there is an alternative medication prescribed, please take as directed.
- **OVER THE COUNTER BLOOD THINNER TO PREVENT BLOOD CLOT FORMATION:**
    - Aspirin 81 mg tablet twice daily for 6 weeks. This is to help prevent the formation of blood clots.
        - You will not take this if already on a blood-thinner or at high risk for blood clots; see below.
- **PRESCRIBED BLOOD THINNER OR ANTICOAGULANT:**
    - If you are already on an anticoagulant, we will continue that medication in place of aspirin. Please read below for medication specific instructions:
        - Eliquis: restart the day after surgery, taking Eliquis 2.5 mg twice daily for 7 days.
        - Xarelto: restart the day after surgery starting with 10mg daily for 7 days.
        - Plavix/Pradaxa: restart the day after surgery and take aspirin 81 mg once daily with it for 6 weeks.
        - Warfarin: restart the night of surgery.
        - Tranexamic acid: take it for 3 days following surgery.
    - If you are taking a prescribed blood thinner, **YOU CANNOT** take NSAID after surgery as indicated above in the first line medication protocol.

After Surgery Clinic Visits

A typical post-surgery follow-up schedule is detailed below but may change if necessary. The timeline is not exact after the first appointment. If you need to change a later visit by a reasonable amount of time, this is not an issue. You will see a member of our total joints team.

HERE ARE THE TYPICAL RETURN VISITS TO THE CLINIC:

- **1st Post Operative Appointment is one to two weeks after surgery,** this visit may occur via telehealth on the mymobility app. The following conditions are reviewed at that time:
    - Incision Check (please send a photo at least 1 hour ahead of your appointment)
    - Assess progress with therapy or to discuss starting physical therapy
    - Provide refills of pain medication if needed
- **2nd Post Operative Appointment is 6 weeks after surgery.** The following conditions are reviewed at that time:
    - Check motion for knees
    - Take & review X-rays
- **You may be asked to return one year after surgery,** this is as instructed by your surgeon. If you are seen 1 year post operatively, the following will occur at that 1 year post operative appointment:
    - Check X-rays
    - Assess final results

Helpful Links and Resources

MYMOBILITY PATIENT CARE MANAGEMENT APP

Once your surgery has been scheduled, a member of our team will enroll you onto the platform. Once enrolled, you will receive an email or text message prompting you to download the app and activate your account. Mymobility will be used as our primary tool of communication with our team throughout your post operative journey. The messaging platform is managed during office hours only. For emergent situations, please contact our on-call surgeon or go to the ER as instructed above. Downloading and use of this app is critical during your recovery and again, it will be our 1st means of communication with you during business hours.
mymobility (zbmymobilitysolutions.com)

Scan the QR Code to learn more

SURGICAL NUTRITION

ROC has partnered with a company called Thrive Protocol to offer evidence-based nutritional supplements to optimize your recovery. Please scan the QR code for more information and to order. Select your surgeon for a special discount.

Scan the QR Code to learn more

DIRECTIONS

Directions to the surgery center or hospital are available on our website:
https://rocpdx.com/surgical-facilities/

FMLA & DISABILITY PAPERWORK

Please visit our website at: **Submit Disability/FMLA Form - ROC PDX** for instructions on completing disability and FMLA forms as we outsource this service to Medical Recs Management. If you need to reach them, please call 971-224-7947 or send an email to: **disability@medrecsmanagement.com**

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