



Lakeland Regional **Health**[®]

Your Guide to Joint Replacement and Orthopedic Surgery



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INTRODUCTION

Making the decision for Total Joint Replacement Surgery is a positive first step on the path to achieving your lifestyle potential. A specialized team of surgeons, nurses, physical and occupational therapists and many other skilled care providers will work together with you using innovative treatment options throughout every step of this journey to improve the quality of your life.

Lakeland Regional Health Medical Center not only leads the area in the number of joint procedures performed, we are also recognized statewide for our expertise and capabilities in total joint replacement. We offer a number of modern implants that will help provide you with a more accurate fit to ensure a more natural range of motion. Your surgeon can offer improved results and added precision with computer-assisted surgeries that allow him or her to more accurately align implants and reduce stress on the joint, allowing longer use of the implant.

This booklet will answer many of your questions about Total Joint Replacement. It covers topics like:

- What is Total Joint Replacement?
- What to do before surgery, the day of surgery, and after surgery.
- The discharge process.
- Safety tips.
- Specific exercises.



TOTAL JOINT REPLACEMENT

What is Total Knee Replacement (TKR)?

Total knee replacement (TKR) involves removing the damaged joint and replacing it with a prosthesis—an artificial joint. The goals of a TKR are to relieve pain, make you more stable and improve your ability to function.

Common symptoms of a damaged joint include severe pain when standing on the affected leg, trouble moving the leg, limited range of motion, marked deformity, and failure of other forms of medical management.

Physical therapy can be performed before surgery to increase strength and improve mobility. After surgery, physical therapy will help to reduce swelling to allow your muscles to heal, reduce muscle loss in the leg both above and below the knee, improve range of motion, and restore function.

What is Total Hip Replacement?

Total hip replacement involves replacing both the femoral head (top of the upper leg bone) and the socket in which the femoral head rests. Reasons for a total hip replacement include rheumatoid arthritis, osteoarthritis, osteonecrosis, fractures, pain, difficulty walking, and significant alterations in activities of daily living. Physical therapy can be performed before surgery to increase strength and improve mobility. After surgery, physical therapy will help to reduce swelling to allow your muscles to heal, reduce muscle loss in the leg, improve range of motion, and restore function.

What is Shoulder Replacement Surgery?

Shoulder replacement is not as common as hip or knee replacement, but it provides many of the same positive results for patients. Depending on your condition, the entire joint or just part of the joint may be replaced. Common reasons for replacement include severe fractures, arthritis from a number of causes, and severe pain or loss of full motion that interferes with your daily life.

OTHER SURGERIES

Fractures

Trauma, osteoporosis, and overuse are common causes of fractures. Treatments can range from casts and braces to traction and surgery. If orthopedic surgery is required to treat a fracture, your doctor and physical therapist will help guide you as you plan your care.



WHAT YOU NEED TO KNOW TO **GET STARTED**

Before your surgery, your doctor and your healthcare team will teach you about your care for both before and after surgery. We have prepared the following information for you to provide an overview of this process.

Pre-Admission Testing Appointment

When you are scheduled for surgery, you may require a Pre-Admission Testing (PAT) appointment. Your surgeon's office may schedule this for you at the time of your office visit, or you may be contacted by a pre-admission nurse to determine if this is necessary.

IMPORTANT QUESTIONS TO ASK YOUR SURGEON

1. Please explain the surgery I will be having.
2. How long will I be in the hospital?
3. Will I have to change the medicines I take?
4. How long does recovery take?
5. Will I have to go to a rehab after surgery or will I be able to go home?

At this visit, we will also speak with you about the following:

Understanding Your Health Insurance

You and your family should take time to understand your health insurance coverage, especially for the care you may need after you leave the hospital.

Please bring your insurance cards and photo identification card with you to this visit. If you have not already made payment arrangements with the hospital, we will talk with you about financial responsibility and payment options regarding this surgery. Please bring a check or credit card with you on the day of surgery.

Please check with your insurance carrier to determine your need for pre-authorization. If you have any questions about your co-payment or your insurance authorization, please call 863.687.1199.

Medications

Tell your surgeon about any medications you are taking, including over-the-counter medications, vitamins, herbals and weight loss medications (prescription or over-the-counter). Ask about aspirin, anti-inflammatory medicines, herbs, and any diabetes medicines you are currently taking. Your physician will tell you if you need to make any changes. Diabetes medications containing metformin need to be held 24 hours prior to surgery.

Medical Condition

Please tell your doctor about your medical history, including any prior surgeries.

Allergies

Please tell your doctor and healthcare team about any allergies you have.

Dental Work

Please tell your doctor or healthcare team if you plan on having any dental work done either before or after surgery. Your doctor may want to give you special instructions.

Illness

If you should become ill with a cold or another illness in the week before your surgery, please let your healthcare team or doctor know.

Skin Care

If you develop redness, a scratch, a bug bite, or any open wound near your surgical site prior to the procedure, contact your surgeon's office.

Stay as Active as Possible

Follow your doctor's advice about exercise and moving around prior to surgery. In general, staying active prior to surgery will keep your muscles strong and make your recovery easier.

Advance Directive

An Advance Care Plan (Advance Directive; Living Will) will let your family and care providers know what kind of treatments you want in the event that you are very ill and cannot make your own decisions.

Please review your advance directive or living will and bring a copy with you to the hospital. If you do not have one, you can complete one before your admission. More information can be found at <http://www.myLRH.org>. This information is also offered to you at admission.

TOTAL JOINT CLASS



The orthopedic surgeons from both Lakeland Regional Health and Watson Clinic encourage you to attend the Total Joint Class.

The class is offered every Wednesday at 2:30 p.m. in the B201 classroom and is for patients preparing for Total Joint Replacement surgery. No registration is required.

Please call 863.687.1100, ext. 2975 for more information.

A video of the joint class is available at the following site:

<https://youtu.be/YIjyX9kRcUo>

Care Coordinators are available to answer your questions and may contact you to follow-up on your care:

LRH patients: 863.284.6712

Watson Clinic patients: 863.680.7155

INDIVIDUALIZED PHYSICAL THERAPY EVALUATION

You will receive an Individualized Physical Therapy Evaluation prior to discharge to help develop an appropriate rehab plan.



BEFORE SURGERY

Diet

You should not have anything by mouth after midnight the day before surgery unless your doctor tells you otherwise. Remember, nothing by mouth includes: water, hard candy, gum, breath mints and chewing tobacco. You may brush your teeth, but do not swallow the water.

Notification

Between 3:00 p.m. and 7:00 p.m. on the business day before your surgery, you will receive a phone call from the hospital confirming your time of surgery. If you do not receive this call, contact the surgery department at 863.284.1690. (Patients scheduled for Monday surgeries will be contacted on the Friday prior.)

Medication the Day of Surgery

Take your medicine as instructed by your doctor. Only use a small sip of water. Remember to bring a list of all your medicines –prescription, over-the-counter, vitamins, herbals and weight-loss medications, and include the dosage and times.

Clothing

Wear comfortable clothing. You will be asked to wear a hospital gown and remove your under clothes, dentures, partials, glasses, contact lenses, hair pins, wigs and all jewelry including piercings. You may be allowed to wear your hearing aids to surgery, if required.

Skin Preparation

- You will be asked to wash with a special antibacterial soap three times before surgery: the day before surgery in the morning, the night before and the morning of surgery (See Pre-Surgery Preparation).
- Wash your hands often to prevent infections.
- Use freshly washed bed linens and use clean towels and washcloths after each shower.
- Avoid contact with pets to skin areas.

Personal Belongings

Please leave valuables including jewelry, at home. Limit what you bring. Feel free to bring a robe and toiletries if you expect to stay overnight. Bring your personal cane, walker or wheelchair – please label these with your full name and telephone number.

PREPARING YOUR HOME FOR YOUR RETURN AFTER SURGERY

Before your surgery, take the time to prepare your home and get the supplies you will need after surgery.

Tips to Prepare Your Home before Surgery

- Make sure everything you need is easy to get to and on the same floor where you will spend most of your time.
- Put food and other supplies in a cupboard that is between your waist and shoulder level.
- Have enough lighting inside and outside of your home.
- Use night lights throughout your home.
- Remove throw rugs or fasten them to the floor with carpet tape.
- Use smoke detectors in your home.
- Have a list of emergency numbers prepared.
- Have unsafe sidewalks, walkways or stairs repaired.
- Install handrails where needed.
- Put grab bars by your tub, shower and toilet.
- Make your tub and shower slip-proof.
- Thoroughly dust your home to help reduce sources of infection.

Supplies to Have Available for Your Return Home

- Clean bed sheets.
- Clean sleepwear.
- Plenty of clean towels and washcloths.
- Have a supply of your regular medications so you do not run out while recuperating.
- Stock up on canned or frozen food, toilet paper, shampoo, and other personal items.
- Either buy or make single meals that can be frozen and reheated.

Other Helpful Items Include:

- Long-handled shower sponge.
- Long-handled shoe horn.
- A reaching aid to help you pick things up off of the floor.

IMPORTANT:

Pet dander near a surgical site can cause infections to develop, so plan to have a family member or friend take care of the needs of your pet(s) while you recover. (Grooming, litter box changing, etc.)

ITEMS TO BRING THE DAY OF SURGERY

- Insurance card and/or any copay required
- Insurance pharmacy card, if applicable
- Photo ID
- Medicine list
- Personal items (brush, comb, toothbrush, etc.)
- Loose-fitting underclothes, robe and sleepwear
- Non-slip shoes
- Cell phone and charger
- Contact information for your care partner
- CPAP machine if you have sleep apnea
- Braces or other orthotic devices that you use regularly



PROPER SHOWERING STEPS

For the safety of your surgery, it is important that each shower is taken using these three steps:

Step 1 - Rinse

Before starting to wash, please rinse your body with water.

Step 2 - Wash

Begin washing your body with the Chlorhexidine cleaner.

Step 3 - Rinse

To finish your shower, thoroughly rinse off the Chlorhexidine cleaner.

PRE-SURGERY PREPARATION

You will take 3 showers before your surgery and will need the following items:

- One bottle (3-4 ounces) of Chlorhexidine. (example: Hibiclens or similar)

Note: Keep the chlorhexidine out of your eyes, ears, and mouth.

- Three (3) clean washcloths.*
- Three (3) clean towels.*

*Please use a fresh clean towel and washcloth for each shower.

Shower 1 - Day before surgery

In the morning, take a shower using 1 oz. of the Chlorhexidine cleaner.

- Use the first clean washcloth and towel.

Shower 2 - Night before surgery

Take a shower using 1 oz. of the Chlorhexidine cleaner.

- Use the second clean washcloth and towel.

Shower 3 - Morning of Surgery

Take a shower with the remaining cleaner.

- Use the third clean washcloth and towel.

SHAVING

Please do not shave the surgical area. Any hair removal will be done at the hospital on the morning of surgery.

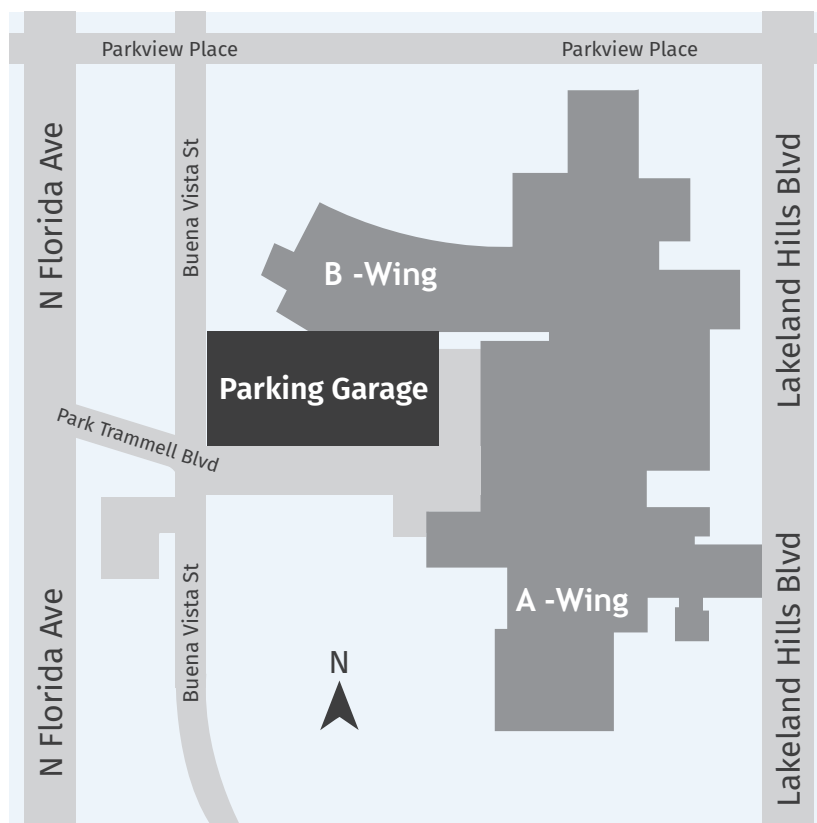
ARRIVING AT THE HOSPITAL

THE DAY OF SURGERY

When arriving at the hospital before surgery, please enter the B-wing entrance.

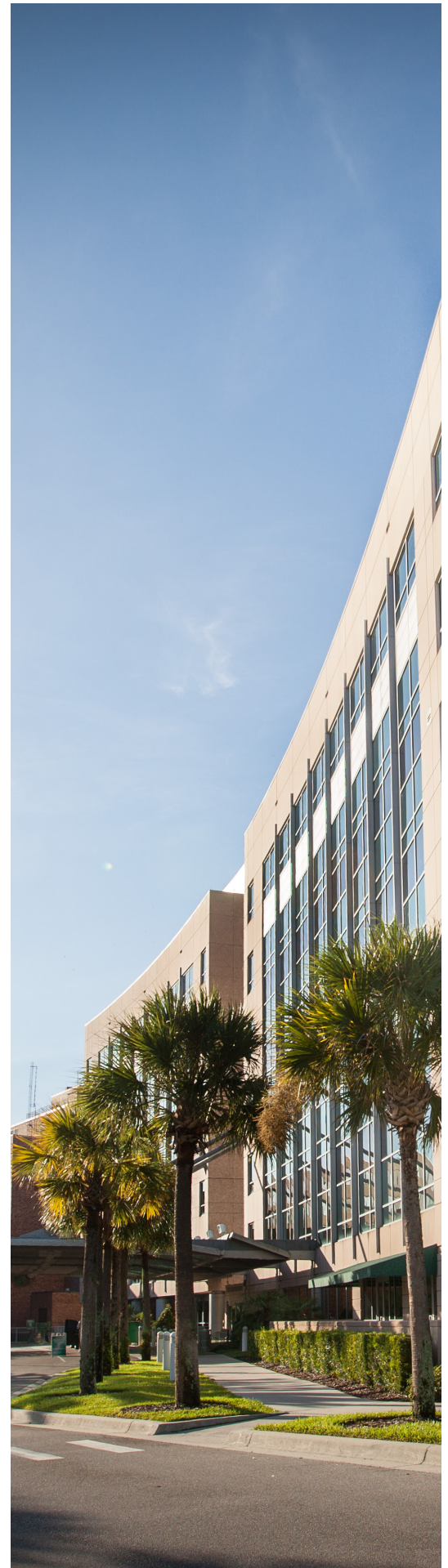
Parking

Parking is available in our hospital parking garage and at our valet service at no charge. Valet service is available 8:00 a.m. until 6:00 p.m., Monday through Friday at the B-Wing entrance and 24 hours a day at the Emergency Room entrance. (Additional parking is available outside of the A-Wing entrance.)



Admission

The Admissions Office is located at the B-Wing entrance. Most insurance plans include a patient responsibility portion. In accordance with your insurance plan, we expect payment in full from you at the time of service unless you have made other payment arrangements.





PRE-OP

You will be taken to a room where you will be asked to change into a hospital gown. The nurse will explain what to expect and will perform a brief physical exam.

You may be asked some of the same questions several times before surgery and right up until surgery.

SURGERY - WHAT TO EXPECT

Tests

Blood work, X-rays, and an EKG (a tracing of your heart rhythm) may be done on the morning of surgery if it has not been done before. We may swab the inside of your nose before surgery to check for specific germs, such as *Staphylococcus aureus* (Staph) or other bacteria. As a precaution, and if necessary, we will treat the inside of your nose with mupirocin (an antibiotic cream) during your stay.

Skin Preparation

You may have your skin prepped by washing with special soap or by clipping to remove hair. If you are having surgery on one leg only, we will use a special pen to mark the correct leg with the word “Yes” prior to going into the OR.

Surgical Consents

You will be asked to sign a surgical consent if you haven’t already signed one. If you have any questions about the consent, be sure to ask your doctor before surgery.

Special Preparation

- The anesthesiologist will speak to you before the surgery, if he or she has not already.
- You will have an IV (a special line put into one of your veins in which fluids and medications can be given).
- You may have a urinary catheter (a small tube that drains urine from your bladder).
- You may be given special stockings to wear to increase circulation in your legs.
- We may give you medication to decrease stomach irritation.

Operating Room

- You will be connected to monitors and anesthesia will begin.
- The surgery may take 2-3 hours or longer including prep and recovery.
- Please limit your visitors to 2 in the pre-op area and 1 in the holding room.
- Your nurse should be able to keep you updated on the surgery time.
- Visitors are limited to two (2) persons in the 2nd floor Surgery Waiting room.
- An electronic tracking board in the Surgery Waiting Room keeps your family updated about when the surgery begins, ends, and when you are moved to recovery.

AFTER SURGERY

Immediately After Surgery

- You will be taken to the PACU (recovery room) and monitored for at least one hour.
- You may have an X-ray of your new joint.
- You will be given pain medicine as needed during your time in recovery.
- If you had a hip replacement, you may have a special wedge pillow between your legs.
- Once you are awake and stable, you will be taken in your bed to your room on the orthopedic unit.

Pain Control

Pain management is an important part of recovery from surgery. Our goal is to keep you as comfortable as possible. We will ask you about your pain and ask you to rate your pain from 0 (no pain) to 10 (extreme pain). Please let us know if you are hurting so we can treat your pain.

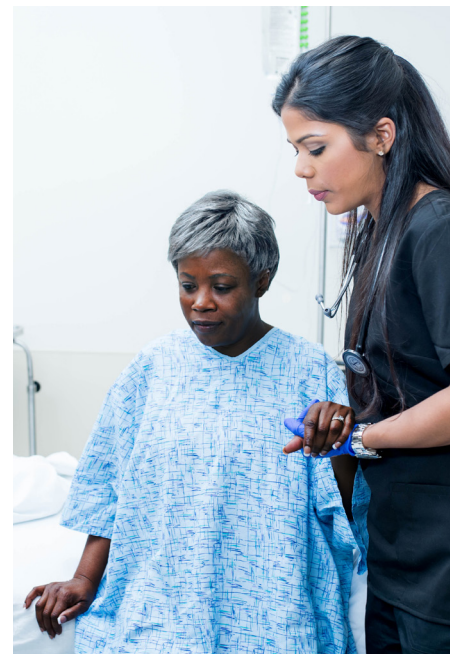
Types of Pain Control

Different doctors use different methods to manage pain. Some choices include:

- **PCA pump** – This machine allows you to safely control the amount of pain medicine you need. Your nurse will provide more information.
- **IV Medications** – Your nurse will administer your pain medication through your IV at the appropriate times.
- **Oral Medicines** – When you can tolerate foods, you will be switched to oral pain relievers. You will be sent home with a prescription for oral pain medications.

In Your Hospital Room

- Early walking (with staff assistance) will help you recover faster and avoid complications.
- Members of your care team will begin working with you to encourage proper movement and will make your safety a priority.
- You will be asked to do breathing exercises using a device called an incentive spirometer. This helps to exercise your lungs. **It is a simple process, but very important.**
- Your diet will advance slowly from ice chips to clear liquids to soft regular foods.
- Any drains will be removed the first or second day after surgery.
- Daily dressing changes begin after the second post-op day.



DO NOT GET OUT OF BED ALONE.

You are a **HIGH fall risk**. Your care and safety are important to us. Please use your call button if you wish to get up for any reason. Your nurse or care provider will be happy to assist you.

HOW TO PREVENT FALLS IN THE HOSPITAL

We want you to be safe while you are with us. Being in a new place, taking new medicines, and not feeling your best can raise your risk of falling.

Tips for Patients:

- **Use your call button to call for help before getting up for any reason.**
- Make sure important items are within reach.
- Sit at the side of the bed for a few minutes before standing and stand up slowly.
- Be mindful of any equipment or tubing that may be attached.
- We may provide a bed alarm that will sound to remind you to call for help when you need to get out of bed.
- Make sure to wear nonskid socks or shoes when walking.
- Avoid distractions.
- Notify the nurse about spills or wet areas on the floor so they may be cleaned quickly.

Tips for Family Members or Visitors:

- Let the nurse know when you are leaving.
- Let the nurse know if you notice any change in the patient's alertness.
- For added safety, arrange to have someone stay with the patient.



WHAT IS DELIRIUM?

Delirium (sudden confusion) may happen when someone is sick or has had surgery. Severe illness, dehydration, memory problems, and/or vision or hearing troubles can increase the risk of delirium. It is important to recognize the signs and symptoms of delirium. If you notice that your loved one is acting differently or in unusual ways, please let your care team know so they can make a proper assessment.

Symptoms

- Restlessness and/or sleepiness.
- Slurred speech.
- Seeing and hearing imaginary things.
- Confusion between night and day.
- Forgetfulness.
- Difficulty concentrating.
- Confused speech.

Causes

- Medications.
- Infection.
- Simply being in the hospital.

Treatment

- Determine the cause through tests and asking questions.
- Medications.

Expected Course

Delirium usually resolves in a few days or sometimes weeks. Others may not completely return to their normal state. Your healthcare provider will be able to answer any questions you may have about delirium.

How to Help

Families and caregivers can be a great help to patients with delirium. One way to provide assistance is to have someone stay with the patient as much as possible.



Other ways to help include:

Rest Periods:

- Reduce noise and distractions.
- Lower light levels.
- Provide comforting blankets and pillows.
- Offer warm drinks or back rubs for relaxation.

Physical Activity:

- Help with sitting and walking.
- Learn the proper way to assist with exercises and other activities.

Food and Drink:

- Help with eating during meals.
- Encourage fluids (follow doctor orders for proper fluid intake).

Hearing and Vision:

- Make sure the patient's hearing aids or amplifiers are available and working.
- Make sure the patient's eyeglasses are available; clean them often.
- Use enough lighting.
- Offer the use of a magnifying glass.

Mental Stimulation:

- Look at family photos or have familiar people visit.
- Talk about current events.
- Read aloud or provide large print books.

Conversation:

- Use a calm reassuring voice.
- Remind the patient where he or she is often.
- Give one instruction at a time to not overstimulate the patient.

DISCHARGE CHECKLIST

Before you go home, make sure you have what you need.

- Someone to help me at home.
- Important phone numbers (doctor, physical therapy, home health, etc.).
- Non-slip shoes.
- Keys to my house.
- Clean comfortable clothes to wear home.
- All of my personal property (cell phone/charger, dentures, hearing aid, cane, books, etc.).
- Proper equipment ordered to keep me safe, if needed (walker and three-in-one commode).
- Enough food for a couple of weeks or someone to shop for me.

ABOUT YOUR DISCHARGE

Following surgery, your discharge plan will be based on your needs, options covered by your insurance and your choice. Your care team consisting of nurses, physical therapists and social workers will discuss your discharge plans.

You will be given information about:

- how to care for your wound or dressings.
- how to move around in the right way.
- how to take your medications.
- your follow-up visits.

Discharge Medications

For your convenience, we have a Publix Pharmacy on the second floor of the B-Wing near the front lobby. Our in-house Publix Pharmacy now offers free delivery of discharge medications to your room. Please let your nurse know if you are interested in this service. Payment by cash or credit card for your medications will be required on day of discharge.

Discharge Options Include:

Home with Outpatient Physical Therapy*

- Typically 3 appointments a week at an outpatient rehabilitation center.

Home with Physical Therapy and Possible Nursing Services*

- Physical therapist typically comes to your home 3 times a week.

Rehabilitation Services at a Skilled Nursing Facility (SNF)

- Physical therapy provided in the facility, typically 1-2 sessions per day.
- If you plan to go to a skilled nursing facility (SNF) for rehabilitation services, you will have 24-hour care.

** If you plan to return home for your recovery, you will need someone to stay with you 24/7 until you are cleared by your doctor for self-care.*

You will need assistance with:

- *getting in and out of bed.*
- *getting back and forth to the bathroom.*
- *meal preparation.*
- *fetch and carry duties.*

Social Workers

Social workers are here to assist with your discharge plans and to help arrange for your care after you leave us. They are available during the week, Monday through Friday from 8:00 a.m. to 4:30 p.m. Weekend social workers are available on a more limited basis. **For discharge needs prior to coming to the hospital, please call 863.284.1593.**

SKILLED NURSING FACILITIES IN LAKELAND

Patients benefit when their hospitals and other health care providers (e.g., physicians, home health agencies, and nursing facilities) work together more closely to coordinate their care. This leads to improved results, a better experience and fewer complications such as preventable readmissions, infections or prolonged rehabilitation and recovery.

Medicare has created a program for total hip and knee replacements called Comprehensive Care for Joint Replacement Model. As a Medicare beneficiary, you keep the right to choose your providers. However, certain Skilled Nursing Facilities (SNFs) and Home Care agencies have chosen to work with Lakeland Regional Health in this Model. They are using proven best practices that your surgeon wants for higher quality rehabilitation of total hips and knees. These agencies have already received awards for their quality, and you are strongly urged to consider selecting them for your continuing care.

Comprehensive Care for Joint Replacement Model Preferred Skilled Nursing Facilities*

Opis Highlands Lake Center

4240 Lakeland Highlands Rd + Lakeland FL 33813 + 863.646.8699

Lakeland Nursing and Rehabilitation (formerly Palm Terrace/Lakeland)

1919 Lakeland Hills Blvd + Lakeland FL 33805 + 863.688.5612

Porter McGrath Health Center / Florida Presbyterian Homes (now open to the community)

16 Lake Hunter Dr + Lakeland FL 33803 + 863.688.5521

Valencia Hills

1350 Sleepy Hill Road + Lakeland FL 33810 + 863.858.4402

Rohr Home

2120 Marshall Edwards Dr + Bartow FL 33830 + 863.519.7579

The Estates at Carpenters

1001 Carpenters Way + Lakeland FL 33809 + 863.858.3847 ext. 138

Lakeland Hills Center

610 East Bella Vista Dr + Lakeland FL 33805 + 863.688.8591

Other Facilities

Oakbridge Healthcare Center

3110 Oakbridge Blvd E. + Lakeland FL 33803 + 863.648.4800

Wedgewood Health Care

1010 Carpenter's Way + Lakeland FL 33809 + 863.815.0488

Consulate Health Care of Lakeland

5245 N. Socrum Loop Rd + Lakeland FL 33809 + 863.859.1446

Consulate Health Care at Lake Parker

2020 W. Lake Parker Dr + Lakeland FL 33805 + 863.682.7580

Your social worker can also provide you with information about facilities outside of Lakeland.

* Patients are not required to choose solely from the listed providers.





DURABLE MEDICAL EQUIPMENT

You will need a walker. If you need other equipment, we will discuss that with you. Insurance coverage varies by insurance carrier and will be verified.

HOME HEALTH CARE

Home health care is an option for some patients after they leave the hospital. If home health care is a part of your discharge plans, your social worker will assist you with the process. The following agencies are some of the home health care agencies available in our local area:

Comprehensive Care for Joint Replacement Model Preferred Home Health Agencies*

Amedisys

1125 Bartow Rd, Suite 300
Lakeland, FL 33801
863.680.3531

Baycare

20 Lake Wire Dr
Lakeland, FL 33815
863.665.8866

Kindred at Home

3671 Innovation Dr
Lakeland, FL 33812
863.648.9118 Fax: 863.687.7717

Other Home Health Care Agencies

There are several home health care agencies in addition to these three preferred agencies. Your social worker can provide you with a list of home health care agencies should you wish to choose another provider.

TRANSPORTATION

The cost of discharge transportation is not covered by insurance and will require payment at the time of service. However, certain skilled nursing facilities do provide transportation without charge to the patient. Your social worker will be able to provide you with more information.

* Patients are not required to choose solely from the listed providers.

CARE AND SAFETY

Your care team will give you detailed information about after surgery care. The following is general care information.

Medications

- Do not take any anti-inflammatory medicines unless told to do so by your doctor.
- If you have questions about any medication, ask your doctor or nurse.
- Don't stop taking your ordered medications unless told to do so by your doctor.

Blood Clots

Continue to follow your doctor's instructions to reduce the chance of blood clots. Should any of the following warning signs occur, please contact your doctor immediately:

- Swelling in your calf, ankle or foot.
- Pain in your calf.
- Pain and redness in and around your knee.

Caring For Your Incisions

- Wash your hands before and after touching your incision(s).
- Wash your hands often to prevent the spread of infection. Handwashing is the number one way to prevent infection.
- Keep your mouth clean with frequent teeth brushing.
- Keep smoke and pets away from your incision(s). If you have a child in diapers, make sure to wash your hands thoroughly after every diaper change.
- Avoid contact with people who may have respiratory issues like colds or flu.
- Cover upholstered furniture with a clean sheet.
- Shower according to your doctor's instruction. NO TUB BATHS, HOT TUBS or POOLS, until approved by your surgeon.
- During your shower, do not use direct water pressure on your incision.
- Use a clean washcloth and clean towel each time you shower.
- Thoroughly pat dry your incision(s) with a clean towel after each shower.

Handwashing - When to Clean Your Hands:

- After using the bathroom.
- Before and after eating.
- After coughing or sneezing.
- After using a tissue.
- After touching or changing a dressing or bandage.
- After touching any object or surface that may be contaminated.

Tips for Good Handwashing:

- Use warm water and plenty of soap. Work up a good lather.
- Clean the whole hand: under the nails, between the fingers and up the wrists.
- Wash for at least 15 seconds. Don't just wipe, scrub well.
- Rinse, letting the water run down your fingers, not up your wrists.
- Dry your hands well. Use a paper towel to turn off the faucet and open the door in public restrooms.

How to Prevent Falls at Home:

- Wear shoes with rubber soles that do not have an opening for your toes.
- Keep clutter off of the floor.
- Clean up any floor spills.
- Do not place electrical cords across pathways.
- Do not climb on stools or stepladders.
- Do not wax your floors.
- Keep items you use often within reach.
- Be aware of pets that can get under your feet and cause a fall.
- Remove throw rugs or secure them to the floor using carpet tape.

RECOGNIZE DANGER SIGNALS

Call your doctor if you have any of the following symptoms:

- Inability to tolerate foods or fluids.
- Persistent nausea or vomiting.
- Swelling or pain in either leg or calf.
- Signs of surgical site infection: increased redness, increased drainage or swelling, and worsening pain.
- If you feel warm or chilled, check your temperature. Call the doctor for a temperature greater than 100.4°F (38°C).

PHYSICAL THERAPY

EXERCISES

The following exercises may be ordered by your health provider or physical therapist. These exercises are included in this booklet as an informational supplement only. Your surgeon and physical therapy team can create an individual treatment plan designed just for you.

PLEASE DO NOT BEGIN ANY EXERCISE WITHOUT CONSULTING YOUR DOCTOR OR PHYSICAL THERAPY TEAM.

PHYSICAL THERAPY - SHOULDER SURGERY

Your surgeon or physical therapist will guide you regarding physical therapy, including upper extremity range of motion and isometrics.

HIP REPLACEMENT PRECAUTIONS (POSTERIOR APPROACH)

DO NOT bend over more than 90 degrees at your hip. This includes:

- Do not bend over or reach while sitting or while in bed.
- Do not sit in a soft chair, toilet, or car seat. Use an elevated seat or seat extension.
- Do not lean forward to assume a standing position.
- When sitting in a chair, be sure your knee is below the level of your hip.

DO NOT cross your legs. Keep a pillow between your legs when laying on your side or back.

DO NOT turn toes inward. Keep your toes pointed forward when standing, sitting or lying down.

DO NOT pivot on your operated leg when turning.

Your physical therapist may assign additional exercises during your pre-surgery rehab appointment. Please use the area below for any added instructions:

PHYSICAL THERAPY FOR THE HIP

Based on the type of approach your surgeon used during your surgery, some hip exercises may or may not be recommended for you, and you may be instructed to follow certain precautions. Please check with your doctor or physical therapist before beginning any hip exercises following surgery.

Quad Sets

Slowly tighten muscles on thigh of straight leg while counting to 10 out loud. **Repeat 10 times, 3 times a day.**



Gluteal Squeezes

Squeeze buttocks muscles as tightly as possible while counting out loud for 10 seconds. **Repeat 10 times, 3 times a day.**



Hamstring Sets

With one leg bent slightly, push heel into bed without bending knee further. Counting out loud, hold for a count of 10. Alternate legs. **Repeat 10 times, 3 times a day.**



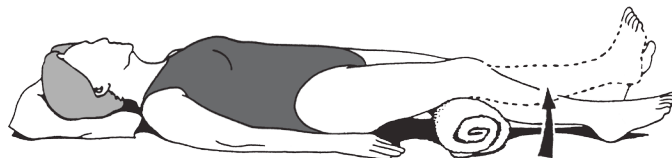
Ankle Pumps

Bend ankles up and down, alternating feet. **Repeat 10 times, 3 times a day.**



Short Arc Quads

Place a large can or rolled towel under leg. Straighten knee and leg. Hold one second. **Repeat 10 times, 3 times a day.**



Abduction

Slide one leg out to the side. Keep kneecap pointing toward ceiling. Gently bring leg back to pillow. Repeat with other leg. **Repeat 10 times, 3 times a day.**



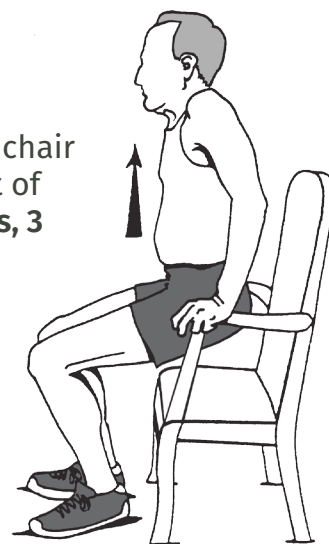
Heel Slide

Bend knee and pull heel toward buttocks. Hold one second. Return. Repeat with other knee. **Repeat 10 times, 3 times a day.**



Arm Chair Push

Put hands on arms of chair and push body up out of chair. **Repeat 10 times, 3 times a day.**



PHYSICAL THERAPY FOR THE KNEE

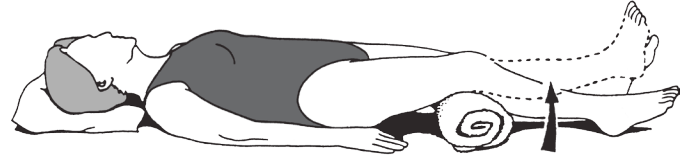
Straight Leg Raise

Bend one leg. Raise other leg 6-8 inches with knee locked. Exhale and tighten thigh muscles while raising leg. Repeat using other leg. **Repeat 10 times, 3 times a day.**



Short Arc Quads

Place a large can or rolled towel under leg. Straighten knee and leg. Hold one second. **Repeat 10 times, 3 times a day.**



Quad Sets

Slowly tighten muscles on thigh of straight leg while counting to 10 out loud. **Repeat 10 times, 3 times a day.**



Abduction

Slide one leg out to the side. Keep kneecap pointing toward ceiling. Gently bring leg back to pillow. Repeat with other leg. **Repeat 10 times, 3 times a day.**



Gluteal Squeezes

Squeeze buttocks muscles as tightly as possible while counting out loud for 10 seconds. **Repeat 10 times, 3 times a day.**



Heel Slide

Bend knee and pull heel toward buttocks. Hold one second. Return. Repeat with other knee. **Repeat 10 times, 3 times a day.**



Hamstring Sets

With one leg bent slightly, push heel into bed without bending knee further. Counting out loud, hold for a count of 10. Alternate legs. **Repeat 10 times, 3 times a day.**



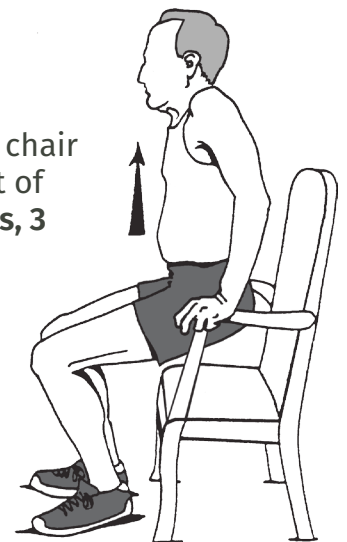
Ankle Pumps

Bend ankles up and down, alternating feet. **Repeat 10 times, 3 times a day.**



Arm Chair Push

Put hands on arms of chair and push body up out of chair. **Repeat 10 times, 3 times a day.**



MY APPOINTMENTS

Individual Prehab Physical Therapy Evaluation

Date _____ Time _____

Location _____

Pre-Admit Visit

Date _____ Time _____

Location _____

2 Week Postsurgical Visit

Date _____ Time _____

Location _____

6 Week Postsurgical Visit

Date _____ Time _____

Location _____

OTHER NOTES

Other Therapy

Date _____ Time _____

Home Health Agency

Name _____

Phone _____

My Physical Therapist

Name _____

Phone _____

Skilled Nursing Facility

Name _____

Phone _____

Rehabilitation Services

Name _____

Phone _____

HAVE QUESTIONS?

Call our Care Coordinators

LRH patients: 863.284.6712

Watson Clinic patients: 863.680.7155



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