

Total Knee Replacement

Patient Guide

vhchealth.org

02/24

Review this booklet with your support person. Bring it with you to appointments and on the day of your surgery

Welcome

We are pleased that you have selected the Center for Joint Replacement at VHC Health for your healthcare needs. The mission of our center is simple: to be the best total joint replacement center. Our Joint Replacement Center is the recipient of the Gold Seal of Approval™ from The Joint Commission. The Center of Excellence designation signifies adherence to strict national protocols in nursing care, pain management and rehabilitation. It is recognition that every member of our team has special training in total joint replacement. We are very proud of our Total Joint Program and we are confident that you will be satisfied with the care you receive.

It is with great pleasure that VHC Health and the Center for Joint Replacement provide you with an overview of your upcoming experience. **This booklet is meant to be a general guide to your care; however, your individual care will be directed by your physician.** Keep this booklet as a handy reference as you prepare for your surgery. We urge you to read and refer to this booklet frequently. Bring the booklet to all appointments, the Pre-operative Joint Replacement Class and to the Hospital on the day of your surgery.

On behalf of the Joint Replacement Program's Team Members, we hope this educational booklet and resources provided answer many of your questions and prepare you for your procedure. Please feel free to contact the Total Joint Line at 703-558-6621, extension 1, if you have questions that require additional information.

Additional education materials are available on our website at www.vhchealth.org/TJR

IMPORTANT CONTACTS (INTERPRETER SERVICES AVAILABLE UPON REQUEST)

Total Joint Patient Line	703-558-6621
Pre-Operative Screening	703-558-6159
Case Management	703-558-6659
Anesthesia	703-558-6173
Inpatient Orthopedic Department Nurse's Station	703-558-6482
Outpatient Orthopedic Department Nurse's Station	703-558-6155
Physical and Occupational Therapy	703-558-6507
Outpatient Pharmacy	703-717-7750
Senior Health Department	703-558-6859
Billing and Financial Office for Cost Estimates	703-558-5954
Patient Registration	703-558-6114

Getting Started

1. **Determine who your caregiver will be. This person should be able to participate in all planning processes and be able to stay with you for at least 4 days after surgery. A caregiver can be a family member, friend, or hired help and should be able to physically assist you if needed.**

2. **Register for a Pre-Operative Joint Replacement Class (Required)**

Attend the class with your caregiver at least four to six weeks before your surgery to ensure you are able to get the most out of all aspects of your care. You DO NOT need a surgery date to attend class. You will need internet access to register. We offer a variety of class formats to suit your needs:

- a) Pre-Recorded Class – watch at your convenience on a computer or mobile device. This is also a great option for caregivers who cannot attend a live version of the class. Watch the pre-recorded class by visiting the following website:
<https://www.cognitoforms.com/VHC3/JointReplacementClassOnline>
- b) Live Class – You can view dates and register for classes by visiting the following website:
<https://www.vhchealth.org/medical-services/orthopedics/joint-replacement/prepare/register/>

*****In order to receive credit for attending the Pre-Operative Joint Replacement Class you must complete the course evaluation by visiting the website below*****

<https://www.cognitoforms.com/VHC3/JointReplacementClassOnline>

3. **Create a MyVHC Account (perform after your case is scheduled)**

The MyVHC Patient Portal will allow you complete important questionnaires required for your procedure. It also allows you to access your visit summary and test results, schedule or change appointments, pay your bill and more.

In order to create an account, you will need an activation link. When your surgery is scheduled, an activation link will be sent to your e-mail from “Donotreply-MyVHC.” **If you do not have an activation link or access to the internet, please call the Total Joint Line at 703-558-6621 for assistance.** Once you have an active MyVHC, you can access your account in the following ways:

- 1) Login online by visiting the website below:
<https://myvhc.virginiahospitalcenter.com/MyChartPRD/Authentication/Login>
- 2) Download the “VHC” application by visiting the following website:
<https://www.vhchealth.org/patients-visitors/vhc-app/>

Contents

Preparation Checklist	4
Total Knee Replacement	6
Before You Come to the Hospital	7
Medications	8
Registration for Your Surgery	9
Antiseptic Wipes Instructions	9
Pre-operative Screening Telephone Appointment	10
Pre-Operative Knee Exercises	11
Breathing Exercises	12
Nutrition	13
Pain Management	14
Home Preparation	15
Discharge Planning	16
Medical Equipment	18
Completing Your Health Questionnaires	19
General Surgical Information	21
What to Bring to the Hospital	22
Day of Surgery	23
Post-Operative Care	25
Discharge	26
Additional Resources	29

Preparation Checklist

When planning for surgery there are many preparatory steps that must be completed to ensure you are healthy and safe to proceed with surgery. Planning for surgery also involves thinking ahead. You will need to make arrangements for after your surgery to ensure your recovery process is smooth and seamless. Use the following checklists to ensure you are on track. It can be helpful to remove or refer back to this page as you prepare. Remember: this booklet is a guide. Your surgeon will have a tailored plan to fit individual needs. Please follow your surgeon's instructions. Many planning items revolve around your surgical date. Please list your surgical date and time below:

Your surgery date and time: _____

About 6 weeks prior to surgery

- Determine who your caregiver will be after surgery. This person should be involved in all planning processes and able to stay with you for at least 4 days after surgery.
- Complete the pre-operative joint class with your caregiver. A surgery date is not required. **(Page 2)**
 - Date and time: _____
 - Remember – complete the post class evaluation to receive credit for attending.
- Schedule pre-operative appointments. **(page 7)**
 - Appointment with Primary Care Physician for medical clearance. (within 30 days of your surgery):
 - Date and time: _____
 - **If needed:** Appointment with Surgeon or Physician Assistant. (about 2 weeks prior to surgery):
 - Date and time: _____
 - Complete any necessary dental procedures before surgery.
- Schedule your post-operative follow up appointment with your surgeon. **(page7)**
 - Date and time: _____
- Schedule Physical Therapy appointments. **(page 16)**
 - Date and time of first appointment: _____
- Begin pre-operative knee and deep breathing exercises. **(pages 11, 12)**
- Begin nutrition management. **(page 13)**
- Stop smoking, decrease alcohol consumption. **(page 13)**
- Begin using the pain scale. **(page 14)**

Preparation Checklist Continued

About 30 days prior to surgery

- Complete medical clearance appointment with primary care physician within 30 days of your procedure. **(page 7)**
- Begin home preparation and make necessary modifications. **(page 15)**
- Create a MyVHC Account. **(page 2)**
- Complete pre-operative health questionnaires in MyVHC -only available 30 to 0 days before your surgery date. **(pages 19, 20)**

About 2 weeks prior to surgery

- Complete your pre-operative appointment with surgeon **if needed.** **(page 7)**
- Purchase a two wheeled walker and cane. **(Page 18)**
- Begin preparing meals and stock your refrigerator and pantry. **(page 15)**
- Clean home environment and arrange for pet care if needed.

About 1 week prior to surgery

- Complete pre-operative registration and pick up antiseptic wipes at VHC. **(page 9)**
- Complete pre-operative screening telephone interview. **We will call you.** **(page 10)**
- Purchase 20oz Gatorade product. Read instructions to determine which product is appropriate for you. **(page 13)**
- Review all general surgical information. **(page 21)**
- Pack an overnight bag. **(page 22)**
- Freeze EIGHT 16.9oz water bottles (remove labels). **(page 24)**

The Night Before and Morning of Surgery

- Use Antiseptic wipes the night before and morning of surgery. **(page 9)**
- Drink 20oz Gatorade product THREE (3) hours before surgery time. **(page 13)**
- Arrive to VHC two (2) hours before your scheduled surgery time. **(pages 21)**
- Bring the following items with you. **(page 22)**
 - Photo ID and insurance cards.
 - Two wheeled walker and cane (bring both into the hospital with you).
 - Cash or credit/debit card to pay for prescriptions.
 - Overnight bag

Total Knee Replacement

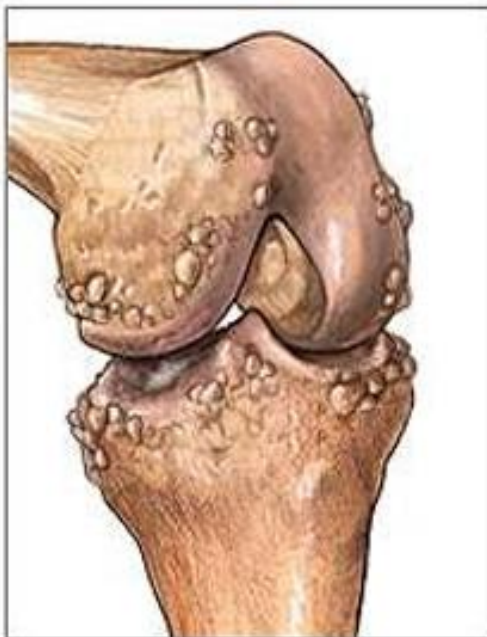
Total knee replacement is a surgery to replace a badly damaged knee joint in order to relieve pain and improve your ability to move. Damaged parts of your knee will be replaced with artificial parts, called a prosthesis. The prosthesis is made of metals, ceramics and/or plastics.

The most common cause of knee damage is osteoarthritis, which is a degenerative disease of the bones that causes the surfaces of the knee joint to break down. Damage to the joint cannot be reversed but can be managed with conservative treatments like weight loss, physical therapy or injections. Total knee replacement surgery may be recommended for those who do not respond to conservative treatments and continue to have knee pain and stiffness that interferes with their ability to do daily tasks.

During a total knee replacement, part of the prosthesis fits over the end of your upper leg bone (femur) and the other fits over the top of your lower leg bone (tibia). The underside of the kneecap (patella) may or may not be replaced. As you recover, you should experience less pain and improved function over time.

Risks involved with total knee replacement include, but are not limited to: bleeding, blood clots, infection, respiratory issues, reactions to anesthesia, dislocation of the joint, damage to nearby structures (blood vessels, nerves, bone), and leg length difference. Please discuss questions regarding risks with your surgeon to help decide if a total knee replacement is right for you.

Before



After



Before You Come to the Hospital

What appointments and tests do I need before surgery?

In order to ensure you are healthy for surgery you will need to see your doctor(s) and complete some tests:

- Schedule an appointment with your primary care physician about 30 days before your surgery to complete a history and physical and obtain medical clearance.
- Tests and labs like blood work, urinalysis, EKG and/or chest x-ray may be performed.
- Appointments with a specialist may be needed if you have health problems like cardiac or lung disease, or diabetes. Ask your surgeon if this is necessary.
- Schedule a pre-operative appointment with your surgeon (This is not required for all patients, discuss this with your surgeon).
- Discuss your dental health with your surgeon. Dental procedures can allow bacteria to enter your bloodstream and, while uncommon, can increase your risk for infection:
 - Any necessary dental procedures should be completed before surgery.
 - Your surgeon may ask you to delay routine cleanings of your teeth for a period of time after surgery
- Discussing substance use with your surgeon:
 - What do I need to do if I smoke?
 - Smoking can cause breathing problems. It can also slow healing and increase your risk of infection. Stop Smoking. Discuss ways to quit with your primary care physician.
 - What do I need to do if I drink alcohol or use drugs?
 - Be honest about alcohol and drug use. Discuss this with your surgeon. This will help plan for care you need after surgery.

Other important appointments and tasks to be aware of:

- **Arrange for someone to stay with you for at least 4 days after surgery. A caregiver can be a family member, friend, or hired help.**
- Complete the Pre-Operative Joint Replacement Class with your caregiver.
- Schedule your post-operative follow up appointment with your surgeon for about 2 weeks after surgery.
- Arrange post-operative physical therapy as needed – discuss this with your surgeon.
- Complete your pre-operative functional and general health questionnaires on MyVHC.
- The Pre-operative Screening (POS) Department **will call you a few days** before your surgery to obtain your medical history, medication list, and provide pre-surgical information.
- Register for surgery and pick up your antiseptic wipes up to one week before your surgery.

Medications

It is important for your doctors to know what medications you are taking. Some medications may be taken up until your surgery while others may need to be stopped. Be sure to discuss this with your surgeon or primary care physician.

Certain medications, vitamins and supplements can cause serious bleeding during an operation. **If you are taking a blood thinner (Coumadin, Lovenox, Plavix, etc.) prescribed by your physician, ask the prescribing physician when you should stop taking the medication prior to your surgery.**

STOP TAKING THESE MEDICATIONS TEN DAYS BEFORE SURGERY



Aspirin and aspirin containing medications



All NSAIDs (Non-Steroidal Anti-Inflammatory Drugs), including NSAID creams and gels



Vitamin E (200 International Units or more)



ALL herbal supplements. Below is a list of common herbal supplements:

- All Omega Oils
- Chondroitin
- Fish Oil
- Flaxseed
- Garlic Tablets
- Ginkgo Biloba
- Ginseng
- Glucosamine
- Green Tea Tablets
- St. John's Wort

NOTE: It is safe to use Celebrex, acetaminophen (Tylenol) and acetaminophen preparations for pain relief.

If necessary, please contact your surgeon and/or primary care physician for possible substitutions for pain medication prior to surgery. **It is important for you to get relief from pain so that you can do the pre-operative exercises and get a good night's sleep as you prepare for this surgery.** A narcotic may be prescribed for bedtime use.

Do not bring medications into the hospital, unless instructed by POS nurse during the phone interview. If you have any concerns, please discuss with the POS nurse.

Registration for Your Surgery

Registration: Pre-register for your surgery up to one week prior to your surgery date. You will be given your antiseptic wipes at registration if not provided at your surgeon's office. Tip: if you already have your wipes, you can complete this virtually in MyVHC beginning 7 days before your procedure. You do not need an appointment. **Bring your photo identification and insurance cards and a copies of your Advance Directive (living will) and/or Durable Power of Attorney) if you have them.**

Where to Go: Pre-Operative Screening Department in the **Zone A** Lobby
1625 North George Mason Drive, Arlington, VA 22205, **Parking Garage A.** Parking is \$7 per visit
<https://www.vhchealth.org/patients-visitors/campus-map-and-parking/>

Hours: Monday –Friday, 8:30AM to 4:00PM

Phone Number: 703-558-6159

Antiseptic Wipes Instructions



Antiseptic wipes remove harmful bacteria from the skin before surgery in order to reduce the risk of infection. Wipes are given at registration(see above.) Please carefully follow the skin preparation instructions below:

- **Remember: use wipes the night before surgery and in the morning before you come to the hospital.**
 - If you wish to SHAVE any part of your body, do so at least twelve (12) hours before you prep your skin. After that time, NO SHAVING.
- If you wish to shower, bathe or shampoo your hair, do so one (1) hour before using wipes.
 - Do NOT heat wipes in the microwave.
 - Discard wipes in the trash. Do NOT flush in your toilet.
1. Place clean linens on your bed. Do not allow any pets on clean linens.
 2. Do a skin test. Applying a small amount of product on the back of your hand and wait for one (1) minute. If there are no skin changes (redness, itching, burning, etc.) continue.
 3. Use one cloth to prep each area of the body, in order, as shown in steps 1-8 on the back of the package. Use all cloths in the packages.
 4. Thoroughly wipe each area in a back and forth motion. Do NOT scrub.
 5. Assistance may be required to reach all areas of your body.
 6. Allow your skin to air dry. Do NOT rinse or dry your skin with a towel.
 7. Do NOT apply any lotions, moisturizers, makeup or deodorant after using wipes.
 8. After application dress in clean clothes.

Pre-operative Screening Telephone Appointment

A few days prior to your procedure, the POS department **will call you to schedule** a telephone interview with one of our nurses. The interview is important for the nurses and anesthesia team who will be taking care of you on the day of your surgery. It is a requirement for your surgery and will take about 30-60 minutes to complete. Please use the form below if you feel it will help you for the interview. Also, if you complete your history in MyVHC, this will help the nurse complete your interview more quickly. **Have a photo ID and the following information available for your interview.**

Height: _____ **Weight:** _____

Previous Surgeries and Hospitalizations:

Physician names and phone numbers:

Primary Care Physician:

Specialty Care Physicians:

Allergies/Reactions (includes medications, foods, latex, contrast dye, adhesives, etc):

Medical History (chronic conditions, previous injuries, recent illnesses, and family history of cancer or heart disease):

Current Medications (include prescriptions medications, over-the-counter medications, and any vitamins, herbs and supplements)			
Name	Dose	Route/Frequency	Date & Time of Last Dose
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Pre-Operative Knee Exercises

Begin these exercises as soon as possible. Perform each exercise for 10 repetitions 2-3 times daily on both sides, as appropriate. Please read the instructions below before you get started:

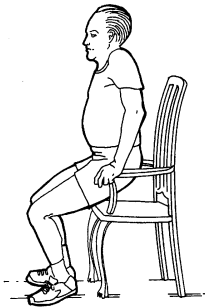
1. Perform exercises 3 through 7 in bed. Do not perform these on the floor.
2. Perform exercises to comfort in your available range. Exercises should not cause pain.
3. Remember to breathe in order to provide oxygen to your muscles and help you relax. Try counting your repetitions and holds aloud to avoid holding your breath.
4. **If you have difficulty performing these exercises, call the Physical Therapy Department at 703-558-6191.** A physical therapist can help you modify exercises to suit your needs.

To watch a video of these exercises, visit:

<https://www.vhchealth.org/medical-services/orthopedics/joint-replacement/prepare/>

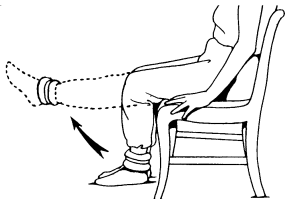
1. Arm Chair Push-up

Put hands on arms of chair and push body up out of chair.



2. Long Arc Quad

Straighten your leg and hold for 10 seconds. Slowly bend knee to return. Repeat with other leg.



3. Heel Slide

Bend knee and pull heel towards buttocks. Hold for 10 seconds. Return. Repeat with other leg.



4. Gluteal Set

Tightly squeeze the buttock muscles and hold for 10 seconds.



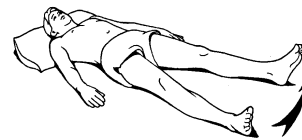
5. Quad Set

Slowly tighten muscles on thigh of straight leg, this will press the back of your knee down onto your bed. Hold for 10 seconds.



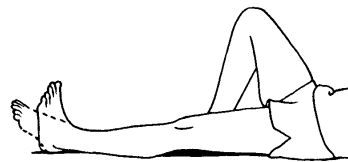
6. Hip Abduction

Slide one leg out to the side. Keep kneecap pointing toward the ceiling. Gently bring leg back to midline. Repeat with other leg.



7. Ankle Pumps

Bend ankles up and down alternating feet.



Breathing Exercises

Deep breathing has many benefits before and after surgery. It will help reduce complications after surgery like pneumonia and poor lung volume by expanding your lungs. Deep breathing is also a good way to reduce stress and manage pain. Practice deep breathing a few times a day before surgery using the following diaphragmatic or “belly breathing” technique:

1. Sit upright or lie in bed with your knees bent
2. Place one hand on your chest and the other on your belly, just below your rib cage.
3. Slowly inhale through your nose, allowing air in deeply. Allow the hand on your belly to rise, while the hand on your chest to stays still.
4. Exhale slowly through pursed lips, allowing your hand on your belly to return to its original position.

If you have Obstructive Sleep Apnea (OSA): your length of stay in the Post Anesthesia Care Unit (PACU) may be prolonged. Bring your CPAP machine into the hospital on the day of surgery (bring all supplies including mask, tubing, distilled water, etc.) Our Biomedical Engineering Department will perform a safety check on your machine. It will be ready for use in the recovery area and in your room.

While you are in the hospital and during your recovery, you **may be** asked to use an incentive spirometer to help you take deeper breaths (see below) and stimulate coughing. If this is needed, a member of the healthcare team will instruct you in the use of this device. You can also go to <https://www.vhchealth.org/medical-services/orthopedics/joint-replacement/after/> for video instructions.



Nutrition

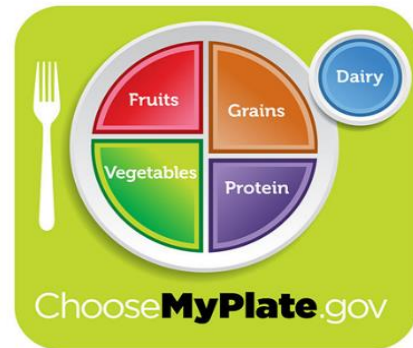
On the day of Surgery:

- Do **NOT** eat or drink after midnight except for the following:
 - Drink 20 ounces of Gatorade **THREE (3) hours** before your surgery time. **If you are diabetic, drink Gatorade Zero.**
 - **AVOID** Gatorade colors **RED** and **PURPLE** as it can look like blood if vomited.
 - **Kaiser Patients:** drink ClearFast **TWO (2) hours** before your surgery time.
 - These drinks contain nutrients and electrolytes to help you recover from anesthesia.
 - Do **NOT** drink any other liquids or we may have to cancel your surgery.
- Do **NOT** use alcohol, tobacco products or drugs for at least **24 hours** before your surgery.

Leading up to surgery:

Eat a light meal on evening prior to surgery. Avoid foods that do not digest well like red meat, beans, nuts, fresh vegetables and whole grain products. This will reduce the amount of waste that moves through your intestine. You should also decrease caffeine intake, as caffeine increases urination and can contribute to dehydration. When preparing for surgery, eating a healthy diet can improve your body's ability to heal and fight infection. It will also help you maintain a healthy weight, which will reduce stress on your new joint.

Eating a variety of foods from each food group helps provide adequate nutrition. **Make sure you are eating enough lean protein;** this will help you heal and build muscle during recovery. Also, **consider foods that are high in iron, vitamin C, calcium and vitamin D.** Iron is important for blood production and allows your body to carry oxygen, which helps your body heal. Vitamin C allows your body to absorb iron. Similarly, vitamin D allows your body to absorb Calcium, which is important for building strong bones before and after your surgery. Be sure to limit caffeine at meal times, as it interferes with your body's ability to absorb nutrients. If you take an iron supplement, drink plenty of water to stay well hydrated as iron supplements can be constipating. **For nutrition tips based on the U.S. Dietary Guidelines, please visit www.myplate.gov**

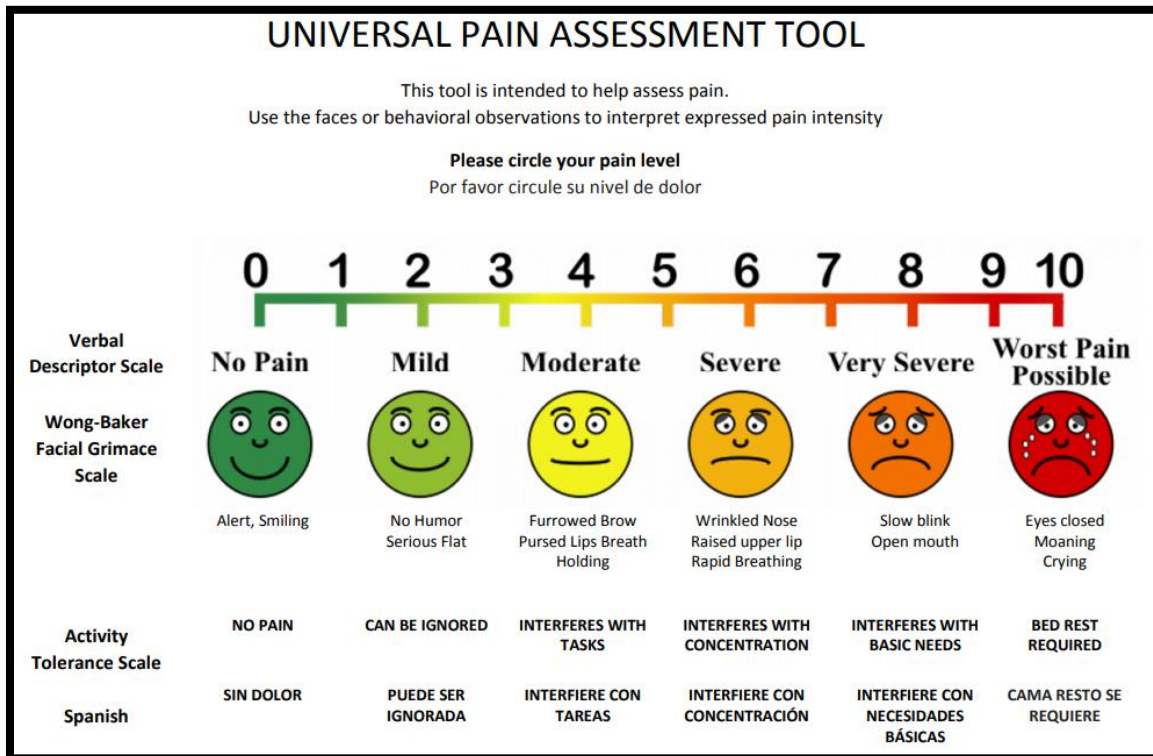


Staying hydrated has a variety of benefits when it comes to preparing for surgery. It will help you recover from anesthesia, help prevent constipation, reduce likelihood for infection, and improve your body's ability to heal. **Be sure to drink at least 8 full cups (8 oz. each) of water each day for three days prior to surgery.** Increasing your daily fiber intake can also help prevent constipation. Taking over the counter stool softeners or laxatives can be helpful before and after surgery allow for regular bowel movements. **Be sure to inform your surgeon if you have not had a bowel movement in 3 or more days after your surgery.**

Pain Management

You will experience surgical pain after your joint replacement. Pain is evaluated on a numeric scale. While everyone experiences pain differently, these descriptions will help you determine your level of pain on the scale. **Please begin to use the pain scale (see below) before surgery by assigning a number to your pain or discomfort as you move throughout the day.** This will allow you to become familiar with using a number to describe your pain and will be helpful to you and the Total Joint Team in managing your surgical pain during your recovery. You will be asked to rate your pain on this scale while you are at the hospital.

Important: pain management begins with you. Please describe your pain intensity, location and quality to your surgeon or nursing staff. Also, be sure to let them know if you experience any changes in your pain. With your cooperation, it is possible to safely and effectively manage surgical pain. Reducing your pain will allow you to move more and limit the chances of complications. This will speed up your recovery.



0 = No pain.

2 = Discomfort or mild pain that can be ignored.

5 = Pain that interferes with tasks. You cannot ignore the pain but you can work through some activities.

8 = Pain that interferes with basic needs. You can converse with effort.

10 = Worst imaginable pain. Pain so bad it will cause you to pass out.

Zero to four is considered a reasonable range for post-operative pain.

Home Preparation

For your safety, it is important to make some changes to your home environment. Do this before surgery. Review the following checklist and make any necessary changes:

Bedroom and Bathroom:

- Make sure you have lighting from your bed to your bathroom. Consider installing night-lights or getting a bedside commode.
- Use a raised toilet seat if your toilet is lower than the level of your knee.
- Select and prepare the shower you plan to use:
 - Consider installing grab bars in your stall or tub shower.
 - Stall showers will make it easier to get in and out.
 - Use a shower chair or stool. (TIP: if you have a tub shower consider a “tub transfer bench”).
 - Use a non-slip shower mat
 - Consider installing a handheld shower hose.
 - Consider a long handled sponge to wash your feet and legs.

Clothing:

- Set out loose fitting clothes. You will have swelling after surgery.
- Shoes should be supportive, secure and slip resistant. Slip on footwear is not appropriate.

General/Living Area:

- Move frequently used items in the kitchen, bathroom and bedroom to tabletop height.
- Clear clutter and arrange furniture so that pathways are wide enough for your walker.
- Remove throw rugs and other objects on the floor (like electrical and phone cords).
- Have a firm chair with armrests that is no lower than the level of your knee. Chairs that are low, roll and/or swivel are unsafe.

Kitchen/Meals:

- Pre-cook meals for ease of food preparation after surgery.
- Stock your refrigerator and pantry with frozen or convenient foods.

Stairs:

- Ensure all railings are secure (interior and exterior). Consider installing a rail if needed.
- If you live in a multiple-level home, consider arranging a sleeping area on your ground floor.

Transportation:

- Decide which car you will go home in. Four door sedans are preferred. You can move your seat back, recline, or place a pad on your seat to allow extra legroom.
- Consider your route to enter the house and make arrangements (do you have a long walk, is there a curb, will you have to walk on grass or gravel, etc.).

Discharge Planning

Plan ahead of surgery. The more you plan, the better your experience will be. **Please carefully read the following bullet points:**

- **Arrange for a caregiver. It is essential to have someone with you for the first 4 days after you get home.**
- If you do not have a friend or family member that is able to stay and assist you, you may have to arrange for helping hands at home. This is an additional resource that may incur out of pocket expenses (see next page).
- Discuss your rehabilitation plan with your surgeon, including when you should begin.
 - **Outpatient Physical Therapy:** As soon as you get your surgery date, secure your outpatient therapy – it can take weeks to get an appointment. Have your surgeon's office fax your outpatient therapy prescription to the facility of your choice. Please collaborate with your surgeon and surgeon's office.
 - **Home Physical Therapy and Home Occupational Therapy:** If you plan to receive home therapy after surgery choose an agency of your choice and have your surgeon's office fax your prescription to them. You will not be able to schedule until you are discharged, but it is important to establish a relationship to ensure you can start therapy in an appropriate timeframe after surgery.
- Make your post-operative follow-up appointments for about 2 weeks after your surgery or as directed by your surgeon.
- **Patients going home same day as surgery -- all discharge plans should a be in place prior to surgery.**
- **Kaiser Members:** you will receive outpatient physical therapy at a Kaiser Facility of your choice.

Return Home with Peace of Mind

As a service to our patients, VHC Health offers the **Safe Transition Program**. Through this program, all patients can get a medical alert system for two months after discharge at no cost. Contact the Senior Health Department at 703-558-6859 or seniorhealth@vhchealth.org

- After surgery, you will experience limited mobility. The medical alert system allows you to call for immediate help if you experience a fall or have any health concern.
- The system operates 24 hours/day, 7 days a week. When you push the wearable button, you will be connected to a Response Associate who will get you the help you need.
- Hospital staff will set up the unit in your home and show you how it works.
- After two months, keep the service at a discounted monthly rate or return the equipment, there is no commitment.
- Setup can be arranged prior to surgery. Call us to discuss what arrangements work for you.

Discharge Planning

If you need to arrange additional help at home, there are some resources available to you:

Home Health Services:

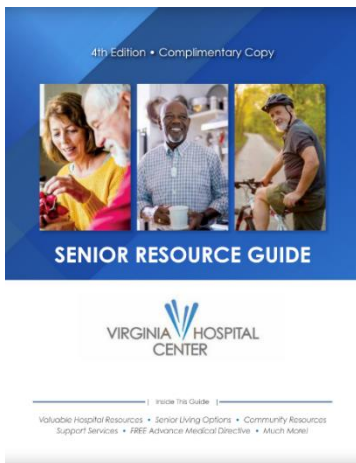
Insurance will cover for 2-3 visits per week for **1 hour only** (for ALL insurances)

- Home Physical Therapy
- Home Occupational Therapy
- Home nurse (wounds, IV medication, lab draws), Home Health Aid (bathing, light housework)

Any additional services beyond this are an out-of-pocket cost; please see agencies below, that patients have reported positive feedback.

Private Duty Home Aides: assist with meals, light housework, laundry, well, bathing, toileting. Typically can start services same day or next day. Companies do have a 4-hour minimum for shifts. Costs vary between \$20+ per hour; some agencies accept long-term care insurance. For additional options, please see “additional community resources” below.

- **Synergy Home Care:** 703-558-3435
- **The Key (Life Matters):** 703-794-5885/ Jessica Silva 571-541-0784
- **Griswold Homecare Agency:** 703-739-2273
- **Comfort Keepers in-home Care;** Jamie Wells – 703-591-7117 (office)/ 703-965-8716 (cell)
- **Georgetown Home Care;** 571-765-6046/ Jennifer Fitzgerald 703-328-5465
- **His and Hers Home Care:** 703-832-6828
- **Bright Star Aides** (Specialize in seniors & dementia): 703-267-2380
- **Pavilion Medical Home Care:** 703-299-9898 / 703-571-8059
- **Home Instead:** 703-873-7336
- **Tribute Home Care:** (Does NOT have any shift minimum): 571-279-6788
- **Virginia Home Care Services:** 703-822-5252



Additional Community Resources: For a comprehensive guide to community resources and services in the greater Arlington area please view the senior resource guide at the following website: <https://www.vhchealth.org/classes-events/healthy-aging/>. This guide contains contact information for variety of services that may be helpful to you as you recover such as meal and food delivery, safe and accessible home design, transportation home care, and more. Visit the Positive Aging Sourcebook website for additional resources in other geographic areas:

<https://www.retirementlivingsourcebook.com/digital>.

Discharge Planning

Transportation Services

As a disclaimer, transportation services such as a wheelchair van or stretcher, is an out of pocket expense. A wheelchair van cost can range from \$100 to \$175. A stretcher transportation cost can range from \$250 to \$300.

For disability parking placards:

Virginia: https://www.dmv.virginia.gov/drivers/#disability/apply_assist.asp

DC: <https://dmv.dc.gov/service/apply-for-disability-parking-placards-and-permits>

Maryland: <https://mva.maryland.gov/vehicles/Pages/Disability-Parking.aspx>

Medical Equipment

During your recovery, you will need to use an assistive device to help you walk. **We recommend using a two-wheeled walker**, as they are the most supportive device that will allow you to walk with a normal pattern. After using a walker you will progress to a cane when your surgeon or physical therapist gives you clearance. A cane can also be helpful on stairs. You will need to get your cane and walker before your surgery. Contact your insurance company about your coverage. A variety of medical equipment can be purchased at our outpatient pharmacy. Please see available equipment and cost estimates below.



Note: insurance companies do not cover medical equipment that is used for personal care. This includes but is not limited to bedside commodes, toilet seat risers and shower chairs.



1701 N. George Mason Drive • Arlington, VA 22205 • 703-717-7750 • 1st floor next to cafeteria • 8:00am-8:00pm

Adaptive Equipment Price List (subject to change)

Adjustable walkers with 2 wheels:	\$50
Walker Skis	\$6/pair
Walker Wheels 5"	\$24/pair
Walker Basket	\$15.99
Walker Flip tray	\$29.99
Walker Cup and Cane Holder	\$20
Canes (adjustable, foldable, quad):	\$12-29
Gait Belt	\$18.99
Hip kits:	\$25.99
Reachers:	\$18.99
Sock aid:	\$9.99
Leg lifters:	\$21.99
Toilet Seat Riser with armrests:	\$44

Completing Your Health Questionnaires

Health assessments are a critical component in tracking your progress. We want to ensure your voice is being heard and that treatments you receive are providing value to you. All patients are required to complete two brief questionnaires before and after surgery. **Pre-surgical questionnaires can be completed from 30-0 days before surgery. Post-surgical questionnaires can be completed from 30-150 days after surgery. In order to complete the questionnaires you will need a MyVHC account. See page 2 for instructions on activating your account. See sample questionnaires below and on the following page. Call the Total Joint Patient Line if you do not have access to the internet or need assistance.**

Knee Questionnaire (KOOS, Jr)

Instructions: This survey asks for your view about your knee. This information will help us keep track of how you feel about your knee and how well you are able to do your usual activities. Answer every question by ticking the appropriate box, only one box for each question. If you are unsure about how to answer a question, please give the best answer you can.

Stiffness

The following question concerns the amount of joint stiffness you have experienced during the **last week** in your knee. Stiffness is a sensation of restriction or slowness in the ease of which you move your knee joint.

- | | <u>None</u> | <u>Mild</u> | <u>Moderate</u> | <u>Severe</u> | <u>Extreme</u> |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. How severe is your knee stiffness after first wakening in the morning? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Pain

What amount of knee pain have you experienced in the **last week** during the following activities?

- | | <u>None</u> | <u>Mild</u> | <u>Moderate</u> | <u>Severe</u> | <u>Extreme</u> |
|-----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 2. Twisting/pivoting on your knee | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Straightening knee fully | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Going up or down stairs | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Standing upright | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Function, daily living

The following questions concern your physical function. By this we mean your ability to move around and to look after yourself. For each of the following activities please indicate the degree of difficulty you have experienced in the **last week** due to your knee.

- | | <u>None</u> | <u>Mild</u> | <u>Moderate</u> | <u>Severe</u> | <u>Extreme</u> |
|---------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 6. Rising from sitting | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Bending to floor/pick up an object | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PROMIS Global Health Scale

Instructions: Please respond to each item by marking one box per row.

- | | <u>Excellent</u> | <u>Very Good</u> | <u>Good</u> | <u>Fair</u> | <u>Poor</u> |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. In general, would you say your health is: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. In general, would you say your quality of life is: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. In general, how would you rate your physical health? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. In general, how would you rate your mental health, including your mood and your ability to think? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. In general, how would you rate your satisfaction with your social activities and relationships? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. In general, please rate how well you carry out your usual social activities and roles. (This includes activities at home, at work and in your community, and responsibilities as a parent, child, spouse, employee, friend, etc.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

- | | <u>Completely</u> | <u>Mostly</u> | <u>Moderately</u> | <u>A little</u> | <u>Not at all</u> |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 7. To what extent are you able to carry out your everyday physical activities such as walking, climbing stairs, carrying groceries, or moving a chair? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

- | <u>In the past 7 days...</u> | <u>Never</u> | <u>Rarely</u> | <u>Sometimes</u> | <u>Often</u> | <u>Always</u> |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 8. How often have you been bothered by emotional problems such as feeling anxious, depressed or irritable? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

- | | <u>None</u> | <u>Mild</u> | <u>Moderate</u> | <u>Severe</u> | <u>Very Severe</u> |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 9. How would you rate your fatigue on average? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

- | | <u>0</u> | <u>1</u> | <u>2</u> | <u>3</u> | <u>4</u> | <u>5</u> | <u>6</u> | <u>7</u> | <u>8</u> | <u>9</u> | <u>10</u> |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 10. How would you rate your pain on average? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

No Pain

Worst
imaginable
pain

General Surgical Information

- **Arrive 2 hours prior to your scheduled surgery time.**
- **Where to Go:** Outpatient Surgery Center on the second floor of **Zone A**. 1625 North George Mason Drive, Arlington, VA 22205, **Parking Garage A**. Parking is \$7 per visit. For a map of our campus, visit the following website: <https://www.vhchealth.org/patients-visitors/campus-map-and-parking/>
- **Bring your two wheeled walker and cane into the hospital with you. You will need them after surgery to start rehabilitation.**
- **Only one family member/caregiver may accompany you** to the surgery center. Please adhere to the visitation policy.
- Wear comfortable clothes. Upon arrival, you will change into a hospital gown, robe and socks. Your clothes can be kept in a locker. Plan to leave your other belongings with your family member.
- Jewelry CANNOT be worn during surgery (this includes wedding bands). Absolutely no jewelry or metal objects. Leave valuables at home.
- Contacts CANNOT be worn during surgery. Consider wearing eyeglasses to the hospital. Bring a case to keep your glasses safe and leave them with a family member while you are in surgery.
- Hearing aids CANNOT be worn during surgery. You will be asked to remove them just prior to going to the operating room. Bring a container to keep your hearing aids safe and leave them with a family member while you are in surgery.
- Remove nail polish on fingers and toes before surgery. Remove any eye make-up.
- To reduce the potential risk of infection:
 - Have all types of artificial nails removed before surgery.
 - Have tooth and gum problems treated before surgery. See your dentist prior to surgery to have a cleaning and to ensure you have no cavities or mouth infections.

What to Bring to the Hospital

Please pack lightly. VHC health staff cannot store multiple bags. Items should fit in a small bag. Your belongings will be secured in a locker during your surgery. Please read the following list of items to bring with you and leave at home.

Bring the following:

- Photo ID and insurance Cards
- Two wheeled walker and cane
- Cash or credit/debit card to pay for prescriptions
- Overnight bag
 - This booklet (with medications page completed).
 - Means to purchase prescriptions (small amount of cash or cards).
 - Shorts or pants that are loose fitting (a size larger than you would normally wear).
 - Nonslip, flat, closed toe shoes (athletic or walking shoes work best)
 - Cases for eye glasses, hearing aids, or dentures.
 - Any sleep apnea equipment (i.e. CPAP machine, tubing, mask, distilled water).
 - Personal toiletries (basic toiletries provided)
 - Cell phone charger

Do **NOT** Bring:

- **Medications (unless directed by the pre-operative screening nurse)**
- **Valuables like jewelry or sentimental items**

Day of Surgery

Arrival

- When you arrive to the Surgery Center, check-in with the receptionist.
- Your caregiver will be given a unique number to track your progress throughout the day. Your caregiver can also provide a phone number to receive text message updates.
- Your nurse will bring you to a private room. One support person can come with you.
- The nursing team will have you change into a hospital gown, assess your vital signs, and begin preparing you for surgery.
- An intravenous line (IV) will be placed to provide hydration and medication.
- Your surgical team will reassess your condition and medical history and finalize your pre-surgical preparations.
- For your safety, your surgeon will confirm your identity, review the plan and sign your surgical site. They will then review your surgical consent and have you sign paper work.

Anesthesia

- You will meet your anesthesiologist before surgery area to discuss the anesthesia plan.
- The most common form of anesthesia for joint replacement procedures is “regional anesthesia,” which consists of three parts: a spinal anesthetic, sedation, and a local nerve block.
- Risks of and side effects of spinal anesthesia include, but are not limited to, infection, bleeding, nerve injury, spinal headache, drop in blood pressure, urinary retention, numbness, and/or itching.
- Risks and side effects of nerve blocks include infection, bleeding, and nerve injury.
- If you are not a candidate for spinal anesthesia, you may still be able to have a nerve block, however, you will receive general anesthesia during your procedure.
- Regardless of the type of anesthesia, **you will be asleep during your surgery.**
- When your plan is finalized your anesthesiologist will review the anesthesia consent and have you sign paperwork
- Questions about anesthesia? Contact the Anesthesia Department at 703-558-6173.

Surgery

- During surgery, your visitor is welcome to stay in the waiting area outside of the surgical center on the 2nd floor.
- The operating room team will place you on equipment to monitor your heart, blood pressure and oxygen level throughout your surgery.
- Prophylactic (preventative) antibiotics will be given to reduce the risk of infection.

Day of Surgery

Recovery

- After your surgery, you will move to the Post-Anesthesia Care Unit (PACU).
- You will be given oxygen and your vital signs will be monitored.
- You may be given pain medication to control your pain so that you are comfortable.
- As you recover, you will begin to regain movement and sensation. It is normal to feel warmth, heaviness in the legs, and a mild "pins and needles" as your sensation returns. These symptoms are temporary and will resolve as the anesthesia wears off.
- To track your progress, your PACU nurse will assess your sensation and movement frequently. For your safety, be honest with your nurse about your level of sensation and ability to move.

Post-operative Phase

- When you meet criteria to leave the PACU, you will be moved to a private room in either the Outpatient Surgery Unit (2nd floor of the hospital) or the Total Joint Replacement Unit (5th Floor of the hospital).
- At this time, your caregiver may visit during visitation hours.
- Your IV line, placed before surgery, will continue to run until you are taking adequate amounts of oral fluid. The infusion will then be discontinued; however, the IV will remain in place until you are discharged.
- After surgery, your knee will be covered with a surgical dressing, wrapped in a compressive bandage and covered with an ice therapy machine called a Polar Care (see below).
- The Polar Care is yours to keep, and will go home with you to manage pain and swelling. **To prepare for home use, freeze EIGHT 16.9oz plastic water bottles (labels removed) before coming to the hospital. (See page 29 for additional ice therapy instructions).**
- You will have compression stockings on both of your legs to help prevent blood clots from forming.
- The orthopedic nursing staff will continue to monitor you closely. Throughout your stay, the nurses will coordinate your care, provide pain management, and assist in your daily activities.



Post-Operative Care

Day of surgery through Discharge Day

In collaboration with you and your support system, your multi-disciplinary team will plan, provide and monitor your care. Your needs are important to us, we will review your goals with you and frequently check to ensure your needs are met.

Soon after surgery, you will get out of bed with a member of your healthcare team (this could be a member of the nursing or rehabilitation team). For your safety, it is essential to perform a full assessment before you mobilize. **Do NOT get out of bed alone or with your caregiver while you are in the hospital.** Depending on your tolerance, your activity will gradually be increased until you are deemed safe for discharge.

Nursing:

- Your vital signs will be monitored regularly.
- You may have labs or other tests after surgery.
- Your diet will be progressed as you tolerate food.
- You will receive pain medications as needed. Please let your nursing team know if you have any concerns or if your pain is not controlled.
- Will manage your ice therapy machine
- Will place air pumps on your lower leg to help prevent blood clots.
- Will monitor your ability to empty your bladder. In rare cases a catheter, or small tube, may need to be used to empty your bladder after surgery.

Physical and Occupational Therapy:

- You will be taught exercises to begin building strength, improve your range of motion and help prevent blood clots.
- You will practice walking and transfers using **your** walker– your therapist will adjust it as needed. (Please remember to bring your walker into the hospital with you).
- You will practice going up and down stairs and curb steps using **your** cane– your therapist will adjust it as needed. (Please remember to bring your cane into the hospital with you).
- You will practice getting dressed.
- You will be taught safe techniques for bathing and using the bathroom.

Discharge

Once you meet your physical therapy (PT) goals and are medically stable, you will be discharged. **It is our goal for you to go home the same day as your surgery.** However, some patients will go home the next day after their morning physical therapy session.

- **If you stay overnight, discharge begins at 11:00 AM. Encourage your caregiver to stay overnight with you or have them arrive early the day of discharge.**
- Your nurse will inform you of your discharge time.
- Prior to discharge, your nurse will provide education and discharge instructions. Please have your caregiver available to receive discharge instructions with you.
- Go to <https://www.vhchealth.org/medical-services/orthopedics/joint-replacement/after/> for access to our discharge instructions video.

Case Management

For patients staying overnight, a case manager is available to ensure your discharge plan are arranged. **For patients going home same day, all discharge plans should already be in place.** If you have questions or concerns please request to speak with the Case Manager at 703-558-6659.

Bedside Pharmacy Program

As a service to our patients on discharge day, the Outpatient Pharmacy can coordinate discharge medications with your physician and deliver them directly to your room. This provides an additional opportunity for education on medication use and limits the potential for drug use errors, duplication and interactions.

- **Let your surgeon and pre-operative team know if you would like to take advantage of this program during your per-operative screening call or in the pre-operative area to ensure your medications are prepared in time.**
- **You will need to have your insurance card and cash or credit card to pay your pharmacy co-pay.** The pharmacist cannot accept checks.
- The bedside delivery program is available Monday – Friday from 10:30 AM - 4:30 PM.

DISCHARGE INSTRUCTIONS QUICK GUIDE

Please refer to your discharge packet for more detailed instructions



SAFETY

For your safety, have help at home for at least 4 days. This can be family, a friend or hired assistance.

Who will be helping you at home? _____



DIET

Resume your normal diet. Eat healthy foods and increase your protein intake. Increase your fiber and water intake to avoid constipation. Take a laxative if no bowel movement within 3 days after surgery. See the nutrition guide in your folder for food recommendations.



ACTIVITY

Do your post-operative exercises as directed from PT. Balance rest and activity. You will be tired! Get up and walk every 45 minutes. Do not drive until your surgeon gives you permission.



FOLLOW UP

Make sure you have a post-operative appointment with your surgeon 2 weeks after surgery.



INCISION CARE

Wash your hands before touching your dressing. Keep your dressing clean and in place and follow surgeon instructions for removal. Do not bathe or swim until your surgeon permits. You may shower. Report signs of infection to your surgeon. See "Top Things to Monitor After Surgery" on the next page for signs of infection.



ICE AND ELEVATE

Ice therapy and Elevation are important to prevent swelling and pain. See the Ice therapy Quick Guide in your booklet for instructions. While sitting or lying, elevate your leg above your hip (or higher, if tolerated). Use pillows or cushions under your **ankle** only, NOT under your knee.



COMPRESSION STOCKINGS

Compression stockings help to prevent blood clots. Wear your white stockings during the day for 2 weeks. Take the stockings off at night. You may hand wash them and hang to dry.



INCENTIVE SPIROMETER

Deep breathing helps to prevent pneumonia. Use your incentive spirometer twice a day for 2 weeks while at home.



Top Things to Monitor after Surgery

Review this chart to become familiar with common and expected symptoms after surgery as well as symptoms to discuss with your surgeon.

*****If you have chest pain, unrelieved shortness of breath, or are experiencing an emergency call 911 or report to the nearest emergency room. *****

	COMMON AND EXPECTED	CALL YOUR SURGEON
PAIN	<ul style="list-style-type: none"> • Tolerable pain – able to sleep and perform activities 	<ul style="list-style-type: none"> • Uncontrolled pain – unable to sleep or perform any activity with pain medications
RECOVERY/ANESTHESIA	<ul style="list-style-type: none"> • On and off dizziness/sleepiness for 24-48 hours • Sore throat 	<ul style="list-style-type: none"> • Worsening dizziness/sleepiness after 24 hours • Worsening weakness/tiredness after two days
NAUSEA/VOMITING	<ul style="list-style-type: none"> • Mild nausea with or without vomiting 	<ul style="list-style-type: none"> • Persistent nausea and vomiting with/without nausea medications
BLEEDING	<ul style="list-style-type: none"> • Small amount of drainage or bleeding from incision 	<ul style="list-style-type: none"> • Continuous heavy bleeding (soaking a dressing/pad) • Bright red blood
INFECTION	<ul style="list-style-type: none"> • Low grade temperature: 100.0-101.4 F • Incision clean (no redness, warmth, odor, pus or yellowish drainage) 	<ul style="list-style-type: none"> • Elevated temperature > or = 101.5 F • Pus or yellowish drainage • Foul odor • Increased redness around incision • Marked increased in pain
SWELLING	<ul style="list-style-type: none"> • Swelling of the operative leg that improves with elevation (above the heart) and ice therapy • It is common to have bruising of the entire operative leg 	<ul style="list-style-type: none"> • Increased calf swelling or localized calf pain • Increased swelling in your lower leg that does not improve with elevation and ice
CONSTIPATION AND URINATION	<ul style="list-style-type: none"> • Mild constipation 	<ul style="list-style-type: none"> • No bowel movement in 3 days • Severe loss of appetite • Inability to urinate
REMEMBER!	<ul style="list-style-type: none"> • Take your medications exactly as prescribed, with food or a snack • Balance rest and activity. Walk every 45 minutes while you are awake! • Drink at least 8-10 glasses of water per day 	

Additional Resources

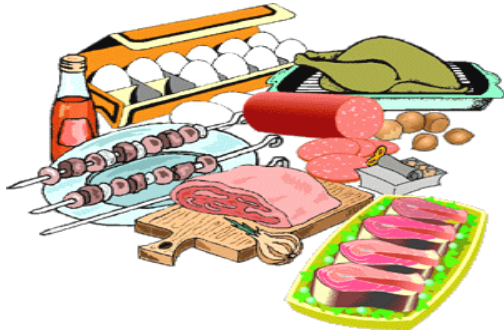
ICE THERAPY QUICK GUIDE		COMPRESSION STOCKINGS (if prescribed)
1	FOLLOW OPERATING INSTRUCTIONS ON THE SIDE OF THE CUBE	PUT THE STOCKINGS ON CLEAN, DRY LEGS
2	IF YOU ARE USING FROZEN WATER BOTTLES, USE FOUR 16.9 OZ BOTTLES (LABELS REMOVED) AND FILL POLAR CARE DEVICE TO THE FILL LINE	WEAR STOCKINGS DURING THE DAY FOR 2 WEEKS
3	PROTECT SKIN WITH A DRY CLOTH BARRIER BETWEEN YOUR SKIN AND THE BLUE PAD AROUND YOUR KNEE (ACE WRAP, WASHCLOTH, THIN PANTS, ETC.)	TAKE STOCKINGS OFF AT NIGHT
4	CHECK YOUR SKIN EVERY 1-2 HOURS. LOOK FOR SIGNS OF REDNESS OR FIRM/WAXY SKIN (SIGNS OF FROSTBITE)	YOU MAY HAND WASH THE STOCKINGS AND HANG DRY
5	USE ICE THERAPY AS NEEDED FOR PAIN AND SWELLING. THERAPY CAN LAST UP TO 5-6 HOURS	WALK EVERY 45 MINUTES, WHILE AWAKE, AND DO YOUR ANKLE PUMPS!
6	ONLY USE DURING AWAKE HOURS. AVOID TRIPPING OVER THE CORDS.	IF YOU NEED HELP WITH THE STOCKINGS, SEE THE VIDEO AT VHHEALTH.ORG/TJR

Community Health:

VHC Health offers a variety of fitness classes that can contribute to your recovery plan. Classes focus on improving strength, range of motion, balance and flexibility. There are classes held at VHC or area churches, as well as an array of virtual fitness classes to take from the comfort of your home. Talk to your surgeon about when it might be a good time to begin community fitness classes. For the full schedule and more details, visit www.vhchealth.org/healthy or contact the Health Promotion Department: 703-558-6740



**JOINT REPLACEMENT SURGERY
POST-OPERATIVE NUTRITION RECOMMENDATIONS**



PROTEIN

20-30 GRAMS EACH MEAL
10-15 GRAMS EACH SNACK

Focus on high quality PROTEINS

20-25 GRAMS

Cooked Chicken
Lean meat or fish (size of a deck of cards)

8 GRAMS

1 cup low-fat milk or yogurt

6-7 GRAMS

1 Egg
1 Tbsp. Peanut Butter
1 oz. cheese

**Vegetarians can get quality protein from soy-based foods.

ZINC helps the immune system work properly and may help wounds heal.

- Lean meat
- Poultry
- Seafood
- Milk
- Whole Grain
- Beans
- Nuts



FIBER

25 GRAMS/DAY FOR WOMEN
38 GRAMS/DAY FOR MEN

- Can help prevent constipation and has a natural laxative effect.
- Prunes or Prune Juice (along with plenty of water)
- Beans
- Fruit
- Whole Grains,
- Peas (fresh and dried)
- Vegetables
- Nuts
- Seeds

DRINK AT LEAST 8-10 CUPS (8 oz. each) OF **WATER** DAILY

VEGETABLES– 2 1/2 CUPS A DAY

FRUIT– 2 CUPS A DAY

Helps to make collagen and is needed for repairing tendons, ligaments and surgical wounds.

- Citrus Fruits
- Strawberries
- Kiwi
- Baked Potato
- Broccoli
- Bell Peppers

VITAMIN D AND CALCIUM

Nutrients associated with healthy bones.
Low-fat dairy foods

