

Bone & Joint Surgery Center



Total Joint Education

Introduction

- ▶ We are honored you chose the Bone & Joint Surgery Center for your joint replacement surgery. Our goal is to provide you with exceptional care and the best possible experience.
- ▶ Your commitment to preparation for surgery and post operative care are critical to your recovery and a successful outcome.
- ▶ We offer overnight stay and same day discharge options. Your plan will be discussed with your care team at the time of scheduling.



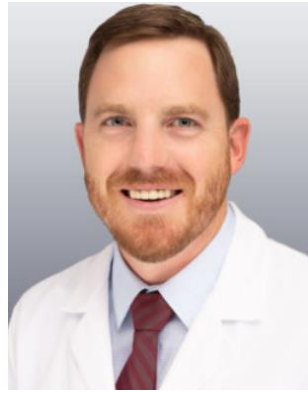
Meet our Team



Adam L. Halverson, DO
Orthopedic Surgeon,
Foot & Ankle Specialist



Douglas J. Keele, DO
Orthopedic & Sports
Medicine Surgeon



Casey L. Lagan, MD
Orthopedic & Sports
Medicine Surgeon



Jeffrey M.K. Martin, DO
Orthopedic & Sports
Medicine Surgeon



Eric J. Thiel, MD
Orthopedic & Sports
Medicine Surgeon



Joseph J. Steiner, PA-C



Stephanie Kniech, PA-C



Christian Tomski, PA-C



C. Kevin Martin, PA-C



Aaron C. Wanish, PA-C

Tour Our Facility



- ▶ **Bone & Joint Outpatient Surgery Center**
 - (715) 359-7592
 - Rib Mountain location at 225000 Hummingbird Rd.
 - Surgery Center entrance is located on the backside of the building on the 2nd level.

- ▶ **Virtual Tour Link**
[Surgery Center Virtual Tour](#)



Understanding Your Procedure

- ▶ **Total Knee Replacement**

[Total Knee Replacement Video](#)

- ▶ **Unicompartmental/Partial Knee Replacement**

[Partial Knee Replacement Video](#)

- ▶ **Total Hip Replacement**

[Total Hip Replacement Video](#)

- ▶ **Total Shoulder Replacement**

[Total Shoulder Replacement Video](#)

- ▶ **Total Ankle Replacement**



MAKO ROBOTICS

Bone & Joint's Surgical Center is the first orthopedic center in North Central Wisconsin to offer Stryker's Mako Robotic-Arm Assisted Technology for total knee and total hip joint replacement procedures.

Studies have shown patients may benefit from a faster recovery, and less pain. Ask your surgeon if you are a candidate for Mako robotic surgery.

For more information, click the link below:

bonejoint.net/orthopedic-surgery/#Mako



Mako Total Hip



Mako Total Knee

Dental Care

Before Surgery

- ▶ Dental Clearance is required prior to being scheduled for your joint replacement.
- ▶ No dental work or cleanings 4 weeks prior to surgery.
- ▶ Please let us know if you have any dental concerns (infections, cracked teeth etc.) prior to your surgery

After surgery

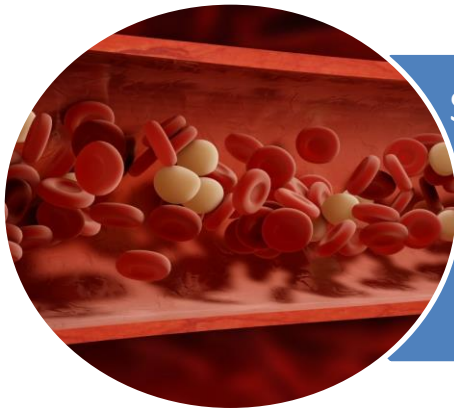
- ▶ No Dental Work for 6 Months After Surgery
- ▶ For a Lifetime – Antibiotics Prior To Any Dental Work



Smoking Cessation



Your surgeon may require you to stop smoking before surgery. Smoking harms oxygen circulation to your healing joint. Oxygen circulation is vital to the healing process.



Smoking can be the cause of lung cancer or other lung diseases, heart disease, and increase risk of stroke. Did you know that smoking also decreases wound healing, bone healing, and increase the chance of blood clots?



Preparing for Surgery

- ▶ Drink nutritional shakes/protein supplements twice daily for 2 weeks before and 2 weeks after surgery to optimize healing. For example—Ensure, Boost or Glucerna.
- ▶ Do not shave your legs three days prior to surgery
- ▶ No Manicures or Pedicures within a week of surgery. Remove all nail polish.
- ▶ Use the **Chlorhexidine 4%** soap as instructed
- ▶ Use the **Mupirocin Ointment** as directed
- ▶ Schedule post operative therapy appointments at your location of choice.
- ▶ **Do Not Donate Blood** within one month of surgery



Preparing for Surgery (continued)

- ▶ If you develop a fever, cold, rash, abrasions, cuts or other physical conditions that might concern you please contact your surgeon.
- ▶ If you have had any changes in your health history or medications since your last office visit with your surgeon (example– diabetic, cardiac medications or blood thinners) please contact your surgeon.
- ▶ Please notify our office if you've had any changes in your insurance coverage



Medication Instructions

Stop Medications That May Increase Bleeding

- * **Aspirin/Prescription Blood Thinners**—as directed by your prescribing doctor or surgeon
- * **Anti-Inflammatory Medications**—hold 5 days prior
Examples: Advil/Ibuprofen, Aleve/Naproxen, Celebrex, Meloxicam or Diclofenac
- * **Vitamins and Supplements** hold 7 days prior
Examples: Vitamin E, Omega 3 Fish Oil, Garlic, Ginkgo, Saw Palmetto, Glucosamine and Chondroitin



Acetaminophen (Tylenol) is okay to take up until surgery.



What to Bring

- ▶ Walker or crutches
- ▶ Home cold therapy unit if purchased (only for knees and shoulders)
- ▶ Overnight items (toothbrush/toothpaste)
- ▶ CPAP
- ▶ Inhalers or eyedrops (no other home medications will be allowed)
- ▶ Loose comfortable clothing to wear after surgery and for sleeping.
- ▶ Well-fitting, comfortable shoes



Mupirocin Nasal Ointment

Why am I using this product?

- ❖ Mupirocin nasal ointment is used to treat bacteria which can live in your nose and may spread to other people. It is used in particular to treat bacteria called methicillin-resistant *Staphylococcus aureus* (MRSA), which can cause skin infections. Although you may have MRSA in your nose and be otherwise well, it can easily spread to your new joint.



Applying Mupirocin Ointment

- ▶ Wash your hands before and after you use the ointment. Use a cotton swab to apply a small amount (pea size) to the inside of each nostril. Press the sides of your nose together for a short while to allow the ointment to spread around the inside of your nostrils. Refrain from blowing or wiping your nose following the application.
- ▶ Please use twice daily starting five days before your surgery and the morning of your surgery.



Getting Your Skin Ready

You are scheduled to have surgery that involves cutting through the skin. Because germs live on everyone's skin, there is a greater chance for getting an infection. To lessen your chance of getting an infection, you need to take special care of your skin before the surgery.

▶ Please follow these instructions:

1. You will need to pick up 8oz. bottle of special soap 4% CHG (Chlorhexidine Gluconate)
2. Do not shave near the site where your doctor will be making the incision for your surgery for **AT LEAST 72 HOURS** prior to your surgery.
3. Any needed "clipping" or shaving will be done at the surgery center.
4. You will need to shower with the CHG soap three times before your surgery. For example: If your surgery is scheduled for Tuesday then you would shower with the CHG soap on Saturday, Sunday, and Monday.
5. Do not shower the morning of your surgery.



Cleaning Your Skin

- ▶ Start by washing your hair as usual with your regular shampoo and wash your body with your regular soap. Rinse well.
- ▶ Put 1 /3rd of the amount from bottle of CHG soap on a clean, wet washcloth. Do NOT scrub too hard. Turn the water off during washing.
- ▶ Wash from your neck down. Do not wash your face as the CHG can burn if it gets into your eyes and ears
- ▶ Wash your body gently for (5) minutes, paying special attention to your surgical body part. Be sure to wash the back of neck, under arms, your naval (belly button), private parts and your legs down to your toes.
- ▶ Turn the shower back on and rinse well.
- ▶ Pat yourself dry with a clean, dry towel
- ▶ Do no use any lotions, moisturizer, make-up or any other products on the skin near your surgical body part
- ▶ Put on clean clothes



The Day Before Your Surgery

- ▶ Call the surgery center at (715) 359-7592 to get your arrival time after 8 a.m.
- ▶ Avoid alcohol, tobacco or illicit drugs for 24 hours prior to surgery.
- ▶ Nothing to eat after midnight the night before your surgery, this includes gum chewing or candy. You will be allowed a small amount of water or Gatorade only up until 3 hours prior to your arrival.
- ▶ Please make sure you wear clean pajamas and have clean sheets on the bed the night prior to your surgery. Please also be sure no pets are in your bed the night prior to surgery.



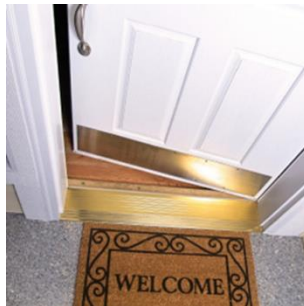
Scopolamine Patch

- ▶ You may have received a prescription for a scopolamine patch. This is used for some patients to help prevent post op nausea and vomiting.
- ▶ You should apply this patch behind your ear the night before surgery. Be sure to wash your hands well after applying the patch. The patch may stay on for 3 days.
- ▶ **The patch is not indicated for patients 65 and older, patients who have benign prostatic hypertrophy or certain types of glaucoma.**



Preparing Your Home: After Surgery

- ▶ Clear The Hallways
- ▶ Consider creating a temporary bedroom on the first floor (if able).
- ▶ Remove throw rugs and area rugs
- ▶ Secure all power and phone cords
- ▶ Consider shower and bathroom safety
- ▶ Add nightlights



Anesthesia

- ▶ Your chart will be reviewed by an Anesthesiologist prior to your surgery.
- ▶ You may receive a call from the anesthesiologist if there are questions regarding your medical history or problems with anesthesia in the past.
- ▶ You will meet the anesthesia team on arrival to the surgery center. They will discuss the options for anesthesia with you including spinal, general and regional nerve blocks.



Types of Anesthesia

Spinal Anesthesia

- One time injection into the back
- Temporary loss of feeling and movement from approximately waist down
- IV sedation for surgery
- Pain Control



General Anesthesia

- Breathe oxygen through a mask
- Medication will be administered through IV to put you to sleep
- Placement of a breathing tube
- Medications for pain and/or nausea



Pain Control After Surgery

- ▶ Anticipate pain when your block/local anesthesia wears off
- ▶ Types of Pain Medication
 - Oral Pain Medication (pills).
 - A combination of short acting and long-acting narcotic pain medication may be used.
 - Examples include Tramadol, Oxycodone, Hydrocodone, Oxycontin, MS Contin
 - Other Options
 - Anti-inflammatory medications such as Naproxen may be used after surgery.



Additional Comfort Measures

- ▶ Position Changes & Elevation of Extremity
- ▶ Control Swelling – Wear Compression Socks
- ▶ Cold Therapy
 - Home Cold Therapy Unit
 - Ice Packs
- ▶ Get up & walk



Overcoming Sleep Pattern Disturbances

Getting a Good Night's Sleep

Insomnia is a sleep disorder that makes it difficult to sleep or stay asleep. Many people experience sleep disruptions after total joint replacement surgery due to discomfort.

Insomnia can be relieved with medical treatments and home remedies. With your doctors permission you may be able to take over-the-counter sleep aids, such as melatonin or diphenhydramine (Benadryl).

Other steps you can take to get better sleep after surgery include:

- Avoiding stimulants before bedtime such as caffeine, heavy meals, and nicotine
- Doing something relaxing before bed such as reading, writing in a journal, or listening to soft music
- Creating an environment that promotes sleep by dimming lights, turning off electronics, and keeping the room dark



After Discharge Wound Care

- Follow the surgeons' guidelines for wound care at discharge.
- You may go home with a waterproof dressing called a Mepilex Dressing (for knees, hips and shoulders).
 - You may be asked to change dressing at 5 days post op –one will be provided at time of discharge. Wash your hands prior to any dressing changes.
 - With the waterproof dressing typically, you can shower 24 hours after surgery or 24 hours after removal of a drain.
- For total ankle replacements you will not be allowed to remove the splint/dressing until seen by your surgeon and will need to keep the splint clean, dry and intact.



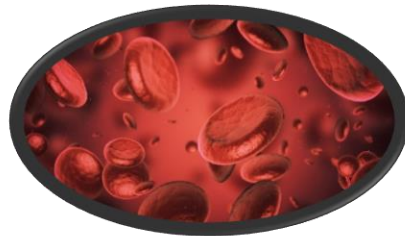
Potential Complications

- ▶ Blood Clots
- ▶ Pulmonary Embolism
- ▶ Infection
- ▶ Pneumonia
- ▶ Constipation



Potential Complication – Blood Clots /DVT

- ▶ Swelling in calf, thigh, or ankle that does not go down with elevation
- ▶ Pain or tenderness in calf
- ▶ Can be either leg (operative or non operative)
- ▶ Notify Physician immediately if symptoms begin



Potential Complications – Pulmonary Embolism

- ▶ Sudden chest pains
- ▶ Difficulty or rapid breathing
- ▶ Shortness of breath
- ▶ Sweating
- ▶ Confusion
- ▶ **CALL 911**



Preventing Blood Clots

- ▶ Ankle Pumps
- ▶ Early & Frequent Ambulation
- ▶ Compression Stockings (TED Hose)
- ▶ One Of These Blood Thinners Will Be Ordered

~Aspirin

~Xarelto

~Eliquis



Infection Prevention

Watch for signs and symptoms of infection. Contact your surgeon if any of the following are present.

- ▶ **Swelling, Redness or Warmth:** An incision and the surrounding tissue that increases in swelling, redness or warmth over time, or one that has red streaks radiating from it to the surrounding skin, may be infected.
- ▶ **Drainage from the Incision:** Foul-smelling drainage or pus may start to appear on an infected incision.
- ▶ **Increased Pain:** Your pain should slowly and steadily diminish as you heal. If your pain level at the surgical site increases for no apparent reason, you may be developing an infection.
- ▶ **Fever and chills:** Temperature >101



Potential Complication – Pneumonia

- ▶ Cough
- ▶ Shortness of Breath
- ▶ Fever



Preventing Pneumonia

- ▶ Deep Breathing & Coughing
- ▶ Frequent Walks
- ▶ Use of your Incentive Spirometer (10 times every hour while awake)

DEEP BREATHS
are like little love
notes to your body



Preventing Pneumonia

- ▶ After surgery, your breathing will be shallow due to medications, pain and immobility
- ▶ Not taking deep breaths will decrease the air flow into your lungs and can lead to pooling of secretions
- ▶ This pooling can contribute to bacteria growth that can cause pneumonia



Incentive Spirometer

Sit up as straight as possible.
Hold the incentive spirometer in an upright position.

- Put the mouthpiece in your mouth and close your lips tightly around it. Do not block the mouthpiece with your tongue.
- Inhale slowly and deeply through the mouthpiece to raise the indicator. Try to make the indicator rise up to the level of the goal marker.
- When you cannot inhale any longer, remove the mouthpiece and hold your breath for at least 3 seconds. Work up to 6 seconds...Then Exhale normally
- Repeat these steps 10 times every hour when you are awake



Constipation

Constipation is a common occurrence after surgery caused by immobility, dehydration and pain medication.

- Increase your walking.
- Increase the amount of liquid you drink. Try fruit juices or water. Coffee and caffeinated sodas should be limited as they dehydrate rather than hydrate.
- Add fiber to your diet by eating whole wheat bread, bran cereals, fruit, fruit juices, vegetables.
- Stool softeners (Colace®) or fiber supplements (Metamucil® or Miralax®) can add bulk to your diet and can be purchased without a prescription. You may want to purchase this prior to surgery so you have it on hand and easily available as you should continue a stool softener while on post-op pain medications.

Sometimes, despite trying the above measures, you still may become constipated. If you feel constipated, or have not had a bowel movement for three (3) days, you can try one of the following:

- A mild laxative such as Milk of Magnesia® or Ex-Lax®.
 - A laxative suppository can be purchased at a pharmacy without a prescription.
 - A small enema can be purchased at a drug store under the name “Fleets” enema.
- **If you do not have a bowel movement after trying these measures, call and notify your surgeon.**



Disability/Family Medical Leave

Please contact our Patient Document Specialist for any questions regarding Short Term Disability or FMLA paperwork.

- ▶ Phone number (715) 359-6442 ext. 1601
- ▶ Fax number (715) 393-0390



Questions??

Your Ortho Nurse Coordinator is available *Preoperatively* to guide and assist you with any questions or concerns

Postoperatively – Please always call and speak with a triage nurse by dialing extension 5000 with any concerns or questions!

Thank You
For Choosing Bone & Joint

