



Providence Joint Replacement Handbook

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Welcome to the Providence Joint Replacement Program. We are here with you throughout your joint replacement experience. Our experienced orthopedic team will guide and partner with you all along the way. We are committed to providing you with the highest quality care and best experience around your joint replacement surgery.

This handbook guides you through the most important things to know to prepare for your successful joint replacement surgery. It includes:

- ❖ How to prepare for your upcoming surgery
- ❖ What to expect during your hospital stay
- ❖ How to continue your successful recovery at home

This information is important, so please make sure to read it carefully. The more prepared you are before your surgery, the better your recovery can be. If you or your caregiver have questions along the way, please ask any of the orthopedic team members caring for you.

Bring this handbook with you to each pre-surgery and education appointment as well as with you to the hospital on the day of your surgery.

Surgery date: _____

Surgery time: _____

Please arrive for surgery at (time): _____

Upcoming appointments for your surgery: _____

Your orthopedic team may add to or change the recommendations in this handbook. Always use their recommendations first and be sure to ask questions if any information or instructions are not clear.

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Meet your Providence Orthopedic Team

Many of these orthopedic team members will guide and partner with you throughout your joint replacement journey.

- Orthopedic Surgeon – Performs your surgery and directs your medical care.
- Anesthesia provider – Gives you medications to keep you comfortable and safe during surgery; will meet with you before surgery to discuss your anesthesia options.
- Physician Assistant (PA) / Nurse Practitioner (NP) / Orthopedic Resident Physician – Assists during surgery, helps monitor your recovery, and works with your surgeon to provide care.
- Registered Nurse – Coordinates and provides your care; collaborates with the joint replacement team.
- Physical and/or Occupational Therapy – Help you move safely.
 - Physical therapy helps you safely move around and manage comfort, and learn important exercises for your recovery.
 - Occupational therapy helps you perform activities of daily living, such as getting dressed and using the bathroom.
- Case Manager/Discharge Planner – Helps coordinate hospital discharge plans if needed.
- Spiritual care – You may be offered a spiritual care visit, or you may request a visit from a non-denominational chaplain.
- Your Primary Care Provider (PCP) – An ongoing health partner before and after your joint replacement surgery.

Before surgery: First steps toward your successful joint replacement

Selecting a Caregiver

Please select a caregiver to support you throughout your joint replacement experience. This person can be a family member or good friend – someone you can count on to be there to help you. Your caregiver will:

- Help you get ready for surgery.
- Attend pre-surgery joint replacement education with you.
- Go with you to physical and/or occupational therapy sessions in the hospital.
- Help you keep track of information given by your orthopedic team.
- Most importantly, your caregiver will help you return home from the hospital and be with you for at least the first 72 hours after you leave the hospital.

It is essential to have someone who will support you during this time. If you are unable to select a caregiver, please let your surgeon know as soon as possible.

Joint Replacement Education

Providence provides informative educational opportunities to help you get ready for your upcoming joint replacement surgery. We highly recommend you attend with your caregiver. This education helps you prepare for and understand what will happen during your surgery, hospital stay, and recovery at home. It will also help you recognize and prevent potential complications. Please ask your orthopedic team if there is an in-person class available to attend.

If you are unable to attend an in-person joint replacement class, you can view our online class series by scanning this QR code with your smartphone or tablet's camera →

or by visiting us online at:

www.providence.org/treatments/joint-replacement-surgery/patient-education-oregon



Preparing for Surgery Checklist

Complete this checklist over the weeks leading up to your joint replacement surgery. This checklist will help you complete essential steps to prepare for surgery and for a safe recovery at home.

Joint replacement checklist											
First step											
Shared decision for surgery	You and your surgeon decide together that joint replacement surgery is right for you Surgeon name: _____ Surgeon phone number: _____										
In the months before surgery											
Optimize health	<ul style="list-style-type: none"> • Attend any recommended specialist appointments • Eat healthy • Get enough sleep • Exercise as you are able to • Stop smoking, alcohol, marijuana, and other non-medically prescribed drug use 										
Weeks before surgery											
Finalize plan for surgery and discharge (may change based on your individual situation)	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">Date of surgery: _____</td> <td style="width: 50%;">My hospital discharge plan is:</td> </tr> <tr> <td>My surgery plan is:</td> <td><input type="checkbox"/> Home</td> </tr> <tr> <td><input type="checkbox"/> Same day surgery, no overnight stay</td> <td>My ride home is: _____</td> </tr> <tr> <td><input type="checkbox"/> Overnight hospital stay (if needed)</td> <td><input type="checkbox"/> Other: _____</td> </tr> <tr> <td><input type="checkbox"/> Other: _____</td> <td></td> </tr> </table>	Date of surgery: _____	My hospital discharge plan is:	My surgery plan is:	<input type="checkbox"/> Home	<input type="checkbox"/> Same day surgery, no overnight stay	My ride home is: _____	<input type="checkbox"/> Overnight hospital stay (if needed)	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	
Date of surgery: _____	My hospital discharge plan is:										
My surgery plan is:	<input type="checkbox"/> Home										
<input type="checkbox"/> Same day surgery, no overnight stay	My ride home is: _____										
<input type="checkbox"/> Overnight hospital stay (if needed)	<input type="checkbox"/> Other: _____										
<input type="checkbox"/> Other: _____											
Choose a caregiver	This person should attend pre-surgery education and appointments with you, be able to drive you, be at the hospital the day of surgery, and help you in the weeks after surgery: Name: _____ Phone Number: _____										
Home safety	<input type="checkbox"/> Review and complete Home Safety Checklist on page 6										
Attend or view patient education (see page 3 for more information)	<input type="checkbox"/> In person class – and/or – <input type="checkbox"/> Online video series										
Pre-surgery testing	<input type="checkbox"/> Testing as instructed by pre-admit clinic, surgeon, or PCP such as labs, EKG, other tests										
Medical equipment	Get medical equipment (DME) as instructed by orthopedic team (see page 10)										
Schedule outpatient physical and/or occupational therapy	If your surgeon recommends physical or occupational therapy for after your surgery, call before your surgery to schedule your post-op appointments. <input type="checkbox"/> Appointments made for after surgery (if instructed)										
Primary care provider	<input type="checkbox"/> Schedule an appointment 3-4 weeks after your surgery										
Phone calls you may receive	Pre-admit clinic: Health review, education, and information before surgery										
	Hospital pre-registration: Verify information, surgery check-in date/time, insurance										
	Anesthesia: Review your medical history										
	Surgeon's office: Surgery date and time										

Joint replacement checklist (continued)

Days before surgery

<p>Pre-operative antimicrobial (CHG) showers</p>	<p>Write down dates and times for your showers as recommended by your team:</p> <p><input type="checkbox"/> 1st shower: _____</p> <p><input type="checkbox"/> 2nd shower: _____</p> <p><input type="checkbox"/> 3rd shower: _____</p> <p><input type="checkbox"/> Night before surgery shower: _____ + clean sheets</p> <p><input type="checkbox"/> Morning of surgery shower: _____ (Remove jewelry before last shower. No lotion, deodorant, aftershave, or perfume after last shower.)</p>
<p>Pack for surgery day</p>	<p><input type="checkbox"/> Insurance cards and photo ID</p> <p><input type="checkbox"/> This Providence Joint Replacement Handbook</p> <p><input type="checkbox"/> A list of any questions or new concerns you want to discuss with your orthopedic team</p> <p><input type="checkbox"/> Personal hygiene items (glasses, dentures, hearing aids, brush/comb, toothbrush)</p> <p><input type="checkbox"/> Loose fitting clothes, pants/shorts with elastic waistband, socks, and undergarments</p> <p style="padding-left: 20px;"><input type="checkbox"/> For a shoulder replacement, we recommend a button-down or loose-fitting shirt</p> <p><input type="checkbox"/> Non-slip shoes or slippers with closed toes and closed heels (no flip flops)</p> <p><input type="checkbox"/> Cell phone and charger</p> <p><input type="checkbox"/> Assistive device for walking after surgery if instructed (walker)</p> <p><input type="checkbox"/> Your CPAP/BiPAP machine (if instructed to bring to hospital)</p> <p><input type="checkbox"/> Credit card or check for copays and other expenses (if instructed)</p> <p><input type="checkbox"/> Copy of Advance Directive, living will, or power of attorney</p> <p>Do not pack:</p> <ul style="list-style-type: none"> • Jewelry or valuables (remove all jewelry) • Any medications (unless instructed to bring them), including CBD (cannabidiol) oil/balm

Night before surgery

<p>Stop eating and drinking</p>	<p>Stop solid foods at (time): _____</p> <p>Stop clear liquids at (time): _____</p>
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Day of surgery

<p>Jewelry</p>	<p><input type="checkbox"/> Must remove all jewelry and piercings</p>
<p>Surgery check in time:</p>	<p>Check in time for surgery: _____</p> <p>Surgeon name: _____</p> <p>Surgeon phone number: _____</p>
<p>After surgery, our orthopedic team will help you:</p>	<ul style="list-style-type: none"> <li style="width: 50%;">• Move safely <li style="width: 50%;">• Manage pain, nausea, and medications <li style="width: 50%;">• Start walking within just a few hours of surgery <li style="width: 50%;">• Care for your incision and bandage <li style="width: 50%;">• Sit up in a chair for meals <li style="width: 50%;">• Finalize your plan for discharge and understand instructions for recovery

After surgery

<p>Surgeon follow up</p>	<p>Date: _____ Time: _____</p>
<p>Primary care provider</p>	<p>Date: _____ Time: _____</p>
<p>Outpatient physical and/or occupational therapy</p>	<p>Date: _____ Time: _____</p>

Home Safety Checklist

This checklist will help you plan and prepare for a safe recovery at home. Please complete before surgery.

Home Safety Checklist			
Home environment			
Where do you currently live?	<input type="checkbox"/> House <input type="checkbox"/> Apartment	<input type="checkbox"/> Trailer / RV / Mobile home <input type="checkbox"/> Other: _____	
Number of stories	<input type="checkbox"/> 1 story home <input type="checkbox"/> 2 or more stories	<input type="checkbox"/> Total number of stairs inside your home: _____	
Home entry	<input type="checkbox"/> Do you have stairs at home entrances (front, back, garage)? _____ <input type="checkbox"/> If yes, number of stairs to get into your home: _____ <input type="checkbox"/> Walkway distance from passenger side of car to front door (paces): _____ <input type="checkbox"/> Type of walkway: _____ (paved, gravel, sidewalk, etc.)		
Who currently lives with you?	<input type="checkbox"/> Spouse / Partner <input type="checkbox"/> Alone <input type="checkbox"/> Extended family / friend(s)	<input type="checkbox"/> Children, adult <input type="checkbox"/> Children, dependent <input type="checkbox"/> Parents / elderly family	<input type="checkbox"/> Caregiver <input type="checkbox"/> Other: _____
Are you responsible for the care of others?	<input type="checkbox"/> No <input type="checkbox"/> Yes, children/dependent(s) <input type="checkbox"/> Yes, adult/elderly	<input type="checkbox"/> Yes, pets <input type="checkbox"/> Yes, other: _____	<input type="checkbox"/> If yes to any of these, plan for care for after surgery: _____
Have you fallen in the last year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, how many times? _____ Cause of falls? _____	
Home safety			
General considerations			
<input type="checkbox"/> Keep frequently used items within easy reach <input type="checkbox"/> Try to always keep a cell phone within reach <input type="checkbox"/> Consider using a small bag or caddy to carry frequently used items (phone, remote, glasses, etc.) <input type="checkbox"/> Remove clutter from floors <input type="checkbox"/> Ensure ease of walkways and stairs <input type="checkbox"/> Ensure railings are secure <input type="checkbox"/> Ensure walker and slings can fit through doorways, hallways, and tight spaces <input type="checkbox"/> Remove rugs or apply non-slip backing <input type="checkbox"/> Coil or tape power cords on floor to avoid trip hazard <input type="checkbox"/> Replace any light bulbs that are burned out <input type="checkbox"/> Put nightlights around frequently used paths at night <input type="checkbox"/> Fix any loose or broken steps <input type="checkbox"/> Consider arranging for services for the first week or two of recovering at home (for example: meal preparation/delivery, house cleaning, mail delivery, laundry, pet care, etc.)			
Living Room		Kitchen	
<input type="checkbox"/> Ensure clutter and pet supplies are out of the way		<input type="checkbox"/> Clean grease from floors <input type="checkbox"/> Ensure clutter and pet supplies are out of the way	
Bedroom		Bathroom	
<input type="checkbox"/> If possible, consider staying in a bedroom in the main living area, with a bathroom on the same level for the first 3-7 days <input type="checkbox"/> Keep frequently used items within easy reach <input type="checkbox"/> Place lamp/nightlight within reach of bed <input type="checkbox"/> Measure your bed height: _____ (inches)		<input type="checkbox"/> Keep frequently used items within easy reach <input type="checkbox"/> If your toilet is low, consider a seat riser (see page 10) <input type="checkbox"/> Put nonslip rubber mat or strips in tub/shower <input type="checkbox"/> Do not use towel racks for support <input type="checkbox"/> Consider installing grab bars in shower and near toilet (see page 10)	



CDC

Additional home safety resources can be found on page 9 and online at the CDC and the American Physical Therapy Association. Scan these QR codes for more information.



APTA

Before Surgery

In the weeks and months leading up to your surgery, there are many things you can do to help ensure the best possible outcome. This includes optimizing your health, including eating well, getting the right amount of exercise, getting enough sleep, and taking care of your medical needs.

Before a big surgery it can be tempting to want to take care of things that you will not be able to do for a while after surgery. For example, it might seem like a good time to finish big household or yard tasks. However, it is best to go into surgery with your joint as healthy as possible. Doing things that increase pain and inflammation can make recovery more difficult. If possible, postpone those large tasks or get help with completing them. The best strategy is to stay comfortably active. If you have exercises and activities that have been working for you, continue to do them up until your surgery.

Exercise

Regular exercise before your surgery helps improve your strength, range of motion, endurance, and balance. This helps lead to a successful outcome and recovery. Talk with your surgeon before your surgery date about a referral to physical therapy if you have specific concerns about mobility, strength, walking, or balance.

Why is exercise important for your recovery?

- Strengthening exercises for your core and legs ease recovery and helps support your joints.
- Upper body exercises will help you to use a walker, crutches, cane, or other aids after surgery.
- A walking or water exercise program increases endurance.
- Gentle stretching helps maintain muscle and joint flexibility.
- Balance exercises can reduce your risk to fall.

Diet and Nutrition

Healthy eating and proper nutrition helps you heal.

Drink plenty of fluids to stay hydrated.

- Eat enough fiber to help avoid constipation such as whole grains, beans and lentils, vegetables, fruits, and nuts.
- Eat foods rich in iron, such as lean red meat, beans, seafood, dark green leafy vegetables, raisins, and prunes.
- Eat foods high in vitamin C to help your body absorb iron. Foods that are high in vitamin C include oranges, leafy greens, melons, peppers, strawberries, and tomatoes.
- Make sure you are getting enough calcium, to keep your bones strong. Foods that are high in calcium include milk, cheese, yogurt, dark leafy greens, sardines, and fortified foods.
- Vitamin D is important for building and maintaining healthy bones. Foods that have Vitamin D include egg yolk, mushrooms, fortified milk, orange juice, cereal, and fatty fish such as salmon, mackerel, and sardines. Your body also makes vitamin D when direct sunlight converts a chemical in your skin into an active form of the vitamin (calciferol).
- Make sure you are eating enough protein. Generally, take your weight and divide it in half – that number is about how many grams of protein you should eat each day. High protein foods include dairy products, eggs, lean meat, fish, poultry, cooked or canned beans, and nuts.

For more information about nutrition, Providence has clinical dietitians who can help you on the path to optimal health. You can find more information by scanning this QR code with your smartphone or tablet's camera or by visiting us online at:

www.providence.org/services/nutritional-counseling



Medications

This is a good time to create or update your current medication list with the names, doses, and the times you take your prescribed medications, supplements, and over the counter medications. We recommend refilling your regular medications so that you have enough to last for your first few weeks of recovery.

Blood-thinners: Some medications thin your blood, increase the risk of bleeding after surgery, or interfere with healing. These medications may need to be stopped before surgery. If you take medications that contain aspirin, anti-inflammatories (such as ibuprofen, [Motrin®, Advil®], naproxen [Aleve®]), blood thinners (such as warfarin, [Coumadin®]) or arthritis medications, ask your surgeon or the pre-admit clinic what to do with these medications. Blood-thinning medications affect clotting and bleeding. These medications (plus all your other medications) will be reviewed with you either at your pre-admit clinic visit or by your surgical team. If you have any questions about these or any of your other medications, please contact your surgeon's office.

Diabetes and Blood Sugar Management

Managing your blood sugar is always important, but it is extremely important before surgery. In fact, managing your blood sugar before surgery can help reduce the risk of problems after surgery, such as infection. Surgery can affect your blood sugar control in many ways. Stress before and after surgery can cause your body to release hormones that may make it more difficult to manage blood sugar levels. Surgery can also affect your normal diet and may temporarily change your usual medication routine. Your diabetes will be managed throughout the entire surgical process, starting with a thorough review of your history and current medicine(s) during the pre-admit appointment and continuing through your recovery in the hospital.

Smoking, Alcohol, and Drug Use

Smoking: Smoking causes breathing problems, increases the risk of medical complications, and slows healing. Smoking also increases the risk of infection and blood clots after surgery. If you smoke, we encourage you to quit at least a few weeks before surgery. Here is some information to help you quit:

- American Cancer Society: 1-866-QUIT-4-LIFE
- American Lung Association: www.lung.org/quit-smoking/i-want-to-quit
(or scan this QR code with your smartphone or tablet's camera)



Alcohol, marijuana, and other drug use: Before surgery, it is important to provide information to your health care providers about alcohol consumption and drug use as they can affect healing and comfort. Tell your health care provider what products you use and how much you have per day (or per week). This information helps determine if you are at risk for related complications that could affect your recovery. We encourage quitting or greatly reducing alcohol and other drug use at least a few weeks before surgery. Please stop taking any marijuana products (including THC/CBD) at least 3 days before surgery.

Dental Work

It is important to tell your surgeon if you had any recent dental work, or if you plan to have dental work done before surgery. Please let your dentist know of your joint replacement for at least the first year after your joint replacement surgery. Your surgeon may give you recommendations around having dental work done in the months before and after surgery.

Home Safety Preparation

Setting up your home for your return before you have surgery will help keep you safe and help with your recovery. Listed below are suggestions for preparing your home for a safe recovery.

- **Moving around your home:** Move obstacles such as throw rugs, extension cords, and footstools out of your walkway. Create a wide, clear path from your bedroom to your bathroom and kitchen so you can easily move about.
- **Bathroom:** Ask your team how to adapt your bathroom to meet your needs during recovery. You may need an elevated toilet seat or commode and a shower chair. (Read more about bathroom equipment in the Adaptive and Durable Medical Equipment section on page 10).
- **Sitting:** For hip and knee replacement, sit in chairs that keep your knees lower than your hips. Choose a firm, straight-back chair with armrests, such as a dining room chair. Add a foam cushion or folded blanket if you need to raise yourself up. Avoid sitting on a soft pillow, couch, rolling chair, or recliner.
- **Children and Pets:** Small children and pets can pose a safety hazard. Small children may need to be taught how to interact with you in ways that keep you safe. If you have pets, make arrangements to keep pets in another area of the house when you arrive home and for the next few weeks. Do not allow your pets to sleep in bed with you the night before your surgery and after your surgery until your incision is completely healed and you are able to move around well.
- **Access to items:** To avoid reaching or bending, keep frequently used items within easy reach, especially in the kitchen, bathroom, and bedroom; including food, dishes, toiletries, medications, phone, television remotes, and phone chargers. For safety, always carry a cell phone or portable phone with you during your recovery.
- **Stairs:** You will likely need help with climbing stairs when you first get home. Consider installing handrails or ensuring existing handrails are secure. Physical therapy will teach you how to safely go up and down stairs before you leave the hospital.
- **Laundry and cleaning:** If possible, arrange for help with cleaning and laundry. Try to have a few weeks of clean clothes and linens available.
- **Mail:** Arrange for somebody to collect mail and newspapers or place delivery on hold.
- **Meals:** Arrange for help with your meals and perishable foods (milk, salad, fruits, and vegetables). Freeze pre-made dinners before your surgery. Stock up on non-perishable foods (boxed, canned, and frozen) to make it easier to prepare meals after surgery.
- **Driving:** Arrange for someone to drive you to your appointments after surgery. Do not drive until your surgeon tells you it is okay. Do not drive while taking narcotic medications. Do not drive until you have regained the range of motion, strength, and reaction time needed to drive safely.

Adaptive or Durable Medical Equipment (DME)

Your orthopedic team may recommend different types of medical equipment to support your safe and successful recovery, depending on your procedure and individual needs.

A front-wheeled walker (with 5-inch wheels) is standard equipment used by patients recovering from hip or knee replacement surgery. Four-wheeled walkers with brakes and seats are not safe or recommended after hip or knee replacement surgery.



*Front-wheeled walker
(with 5-inch wheels)*



For patients with hip replacements, an elevated toilet seat or bedside commode may be needed for safety. Both provide increased height, while the bedside commode also has arms and can usually fit directly over your home toilet. It may also fit in the shower, and can be used as a shower chair.



Elevated toilet seat



Bedside commode

Additional bathroom safety and convenience items include a handheld shower head and grab bars. Grab bars can help you safely move around your bathroom and shower. We recommend securely installed grab bars, not grab bars with suction cups.



Handheld shower head



Installed grab bars

Your orthopedic team may suggest other items to help you move around and help with activities of daily living after your surgery. Most of the items can be found at a medical supply store, pharmacies, home improvement stores, or thrift stores. These items should be purchased before your surgery; however, before buying, we suggest you talk to your surgeon or your orthopedic care team. We highly recommend that you contact your insurance company to find out what is covered under your policy.

The Day Before Surgery

Some important things to note:

- ✓ Review your checklist on pages 4-6
- ✓ Ensure your caregiver is available to bring you to the hospital for surgery and home after surgery
- ✓ Review your arrival time and location for your joint replacement surgery
- ✓ Review your eating and drinking instructions
- ✓ Review your medication instructions:
 - o Which medications should you take on the morning of your surgery?
 - o Which medications should you NOT take on the morning of your surgery?
- ✓ Night before surgery:
 - Remove all jewelry and piercings
 - Antimicrobial shower
 - Clean sleeping clothes
 - Clean sheets
 - No pets in bed
- ✓ Pack for hospital stay (less is better, see packing list on page 5)

You and your surgeon should already have a plan for how long you will stay in the hospital after your surgery. Many people can go home on the same day as their joint replacement surgery, some might stay in the hospital a little longer before they go home. Please ensure you know what the plan is and that your ride home is available to pick you up when you are ready to go home after your surgery.

Day of Surgery & Hospital Stay

Morning of surgery:

- Antimicrobial shower – do not use lotion, makeup, deodorant, perfume, or aftershave
- Clean, comfortable loose-fitting clothes to wear to hospital
- Follow instructions for your medications and when to stop eating and drinking
- Ensure all jewelry and piercings are removed
- Wear glasses instead of contacts

Before Surgery

Arrive at the hospital at your designated time and location to check in for surgery. Check with your facility on current visitor policies and where your caregiver can wait for you during your surgery.

We will keep you informed regarding your surgery time, but sometimes delays are unavoidable.

When ready, the surgical team will prepare you for surgery.

Here is what you can expect:

- You will change into a hospital gown and remove your glasses, contacts and hearing aids, which your caregiver will keep until after surgery.
- Your nurse will answer any questions, start an IV, check your blood pressure, oxygen level, temperature, and heart rate, and may need to remove hair from your surgical site with clippers.
 - It is important that you do not shave your surgical area for 3 days before surgery. Our surgical team will use special clippers for any hair removal.
- To minimize risk, surgical site infection prevention may include wiping your body with chlorhexidine wipes, clipping hair around your joint, using an oral rinse, and nasal swab.
- Your surgeon will visit you to ensure your surgical consent is signed and to confirm your surgical site.
- Your anesthesia provider will consult with you to discuss the plan for your anesthesia and pain management.

During Surgery

Your time in surgery is usually 1-2 hours, but the actual time from the operating room to the recovery room where you will wake up from anesthesia is usually 3-4 hours. When it is time for you to go to the operating room, your caregiver will be directed to the waiting area until you are out of surgery.

Understanding Anesthesia

Before and during surgery, your anesthesia provider will give you medications to keep you comfortable during surgery. The exact type of anesthesia you receive will depend on many factors, including the type of surgery you are having and your overall health. You will talk with your anesthesia provider before your surgery and have any questions answered.

General Anesthesia – This type of anesthesia affects your whole body and puts you in a deep sleep. It is delivered intravenously, by inhaling, or by injection. After it takes effect and you are asleep, your anesthesia provider will insert a breathing tube that will deliver oxygen and help your breathing during surgery.

Regional Anesthesia – This type of anesthesia involves injection of a local anesthetic to provide numbness, loss of pain, or loss of sensation to a part of the body. This technique includes spinal blocks, epidural blocks, and arm and leg nerve blocks.

Your anesthesia provider will discuss risks and benefits associated with the different anesthetic options as well as side effects that can occur with each type of anesthetic.

After Surgery

After surgery you will be transferred from the operating room to the recovery room, and then to a room where you will be for the duration of your stay. Your caregiver will be notified when you are ready for them to visit you in your room.

During Your Stay – What to Expect

- Your nursing team will check on you regularly. You will also be visited by your surgeon, physician assistant, nurse practitioner, or resident.
- Your nurse will assess your needs, create and review your individualized care plan, help you out of bed, regularly take your vital signs, and monitor your incision and dressing.
- Your pain level will be monitored, and your pain management plan adjusted as needed to achieve your pain goal. Pain after surgery is expected and manageable.
- Walking soon after surgery is one of the best ways to ensure the best outcomes and reduce the risk of complications. Your nursing and therapy teams partner together to support your comfort, safety, and teaching when you are first out of bed.
- You will be given ice chips and a liquid diet until your nurse assesses that you are ready for solid food.
- You may have supportive stockings and/or sequential compression devices (SCDs) on your lower legs or feet to reduce the risk of blood clots.
- Cold therapy will be applied to your joint as recommended throughout your stay.
- A physical and/or occupational therapist will meet with you, help you to move, walk, and perform activities of daily living.
- Your team will review all your after-surgery instructions with you and your caregiver. Please ask any questions to ensure you understand what to do for a safe and successful recovery.

Goals to be ready to go home:

- ✓ Walking safely
- ✓ Eating without nausea
- ✓ Successfully urinate
- ✓ Pain is manageable
- ✓ Understand care and after surgery instructions, including incision and bandage care

After your surgery, there is a greater potential for falling due to medications, unfamiliar environment, and your surgical procedure. Your orthopedic team is ready to help you get out of bed to safely build your strength. We will assist you to move from your bed and chair, while you walk, get up to the bathroom, and do physical therapy.

***You must always get up with a staff member with you
– please always use the call button for assistance and
wait for a team member to assist you.***

Going Home

Caring for yourself at home

During your first week at home, you will adapt what you have learned at the hospital to your own setting. You will play a huge role in your recovery, and it is important that you be proactive and participate.

A few key reminders for when you first return home:

- You must protect yourself from falling and keep your new joint in safe positions while you heal.
- You might need to use adaptive equipment to help you with tasks.
- It is normal to be tired. Healing takes a lot of energy.
- You should have someone to stay with you for several days when you first go home.
- You will not be able to drive until your surgeon says it is okay and your ability to move allows, so you will need someone to take you to your first follow-up appointments and physical therapy.
- You will not be able to care for other people or your pets the first few weeks after your joint replacement. Make sure you have arranged for someone to care for your pets and anyone who might rely on you for care for the 2 weeks right after your surgery.
- Do not take tub baths or submerge yourself in a hot tub, pool, ocean, or lake until approved by your surgeon.

Preventing constipation

Reduced activity and pain medications can increase your risk of constipation. It is important to stay hydrated, move around, and keep your bowel movements regular.

- **Let your surgeon know if you have not had a bowel movement for 3 days.**
- Stay hydrated - drink plenty of water (6-8 glasses per day).
- Use natural laxatives, over the counter laxatives, and/or stool softeners as recommended or needed.

Natural laxatives

Prunes
Fruits
Fruit juice
Vegetables
Beans and legumes
Natural grains – flax, chia, bran
Warm beverages, especially with caffeine

Over the counter laxatives

Miralax
Senokot
Dulcolax
Milk of Magnesia

Temporary changes after surgery

- Your appetite may be decreased for a short time.
- Drink plenty of fluids to prevent dehydration.
- It is important that you eat enough protein. In the first 2 weeks after surgery your body needs more protein to help heal. During this time, we encourage you to eat approximately 100 grams of protein every day. Meat, fish, eggs, and peanut butter, as well as protein powders, drinks, and shakes are all good sources of protein. If your appetite for solids is poor, sipping a protein shake throughout the day is a great way to make sure you are getting enough protein.
- You may have difficulty sleeping. You may wake up due to pain or stiffness in the surgical area for a few months following total joint replacement, because of the healing process. It is okay to take short naps, but try not to nap too much, because sleeping during the day will make it even harder to get a full night's sleep. Over time your sleep will return to normal. If you are having too much trouble sleeping, talk to your physical therapist about ways to improve your sleep.
- Your energy level will be decreased for the first month. Save your energy for basic daily tasks and your post-op rehab exercises.
- Pain medication may include opioids, which can cause constipation. Try eating more fruits, such as prunes. If diet does not relieve your constipation, you can use stool softeners or laxatives if necessary.

Post-operative rehab

Physical therapy (PT) is an important part of recovery after most joint replacement surgeries. If your surgeon recommends PT, make sure to get your referral before surgery and schedule PT appointments ahead of time. Your PT will help you learn to manage pain, gradually resume your daily activities, restore flexibility, build strength and endurance, and optimize your balance. It is important to make time for your home exercises and do them as instructed. Long term, a regular exercise program will help your new joint work best.

Living with your new joint

Joint replacements can have a tremendous impact on your quality of life. Although there is an adjustment period, you can get about 80% of the benefit in the first 3 months. Keep in mind that it can take 1-2 years for your joint to reach its full potential. That potential will be greater if you do appropriate exercises regularly. After your joint replacement surgery, it is important to follow up with your orthopedic surgeon on a regular basis. Your surgeon will discuss with you how frequently you should have an appointment.

Travel after joint replacement

When traveling after joint replacement surgery, your new metal joint implant may set off metal detectors at security screening checkpoints.

- Inform the security officer that you have an artificial joint metal implant.
- Medical ID cards for your joint replacement implant are not required.
- Advanced imaging technology (full body scan) can facilitate your screening and reduces the likelihood of a pat-down.
- If you choose to not be screened through the advanced imaging technology or the walk-through metal detector alarms, you will undergo a hand wand or pat-down screening.

It is important while traveling to stay hydrated and move regularly.

When to Call for Medical Help

It is important that you know what to watch for as you recover and who to call if needed. If in doubt, call your surgeon's office.

When to call 9-1-1

- Difficulty breathing
- Shortness of breath
- Chest pain
- Black or bloody stool
- Bloody vomit

When to call your surgeon

- Fever of 101°F that does not get better after taking medicine
- Pain that gets worse or that you cannot manage with prescribed pain medicine, ice, rest, and elevation
- Separation of the edges of the incision or unusual bleeding
- Redness, swelling, heat, or drainage around the incision
- Blood, pus, or a foul odor coming from the incision
- Numbness, tingling, or weakness in your arms or legs – or where you do not expect it
- Persistent headache, blurred vision, dizziness, light-headedness, or fainting
- Skin rash
- No bowel movement within 3 days after surgery
- Nausea when eating and drinking

When to call your primary care provider

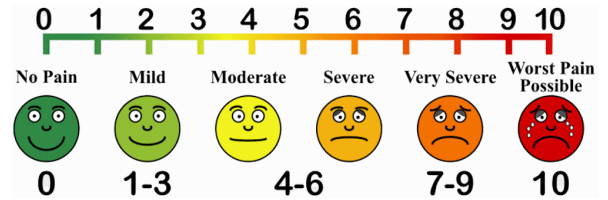
- Concerns about your regular medicines
- Symptoms of a urinary tract infection (burning, frequency, urgency)
- Trouble controlling your blood sugar (if you have diabetes)

Pain Management

Although pain after surgery is expected, it can be variable and unpredictable. You have many tools available to manage your pain and improve your comfort. If you are already cared for by a pain management specialist, tell your orthopedic team and have a plan in place for your pain management after surgery. The goal of pain management after surgery is to enable you to do the expected activities and minimize pain and stress.

Pain assessment tool

When you are in the hospital you will be asked to use a pain scale to determine your level of pain and the effectiveness of pain management interventions.



Pain management methods

After surgery, your surgeon will recommend one or more methods for pain relief. These methods can include pain medications (opioid and non-opioid), cold therapy, elevation, distraction, meditation, positioning, light walking, and music. Try different combinations of these pain management approaches to find what works to minimize your pain.

Cold therapy

Icing your joint will be very important after surgery. It helps to decrease pain and swelling. It will be important to ice your joint a few times per day for a few weeks after surgery.

- Use your cold therapy as recommended.
- Do not apply ice directly to the skin.
- Place the ice on top of the affected area. Do not lie directly on top of the ice application.
- Cold therapy can be used many times throughout the day and night but be sure to give your skin a break and remove the ice periodically.

Understanding pain medication

Taking medication for pain is a common part of a post-surgery care plan, especially in the beginning. If you are prescribed an opioid (narcotic) medication, ask if other pain-relieving medication would be helpful as well. It is important to keep in mind that pain medications will not take away all of your pain. You can expect changes in your pain level over time throughout the healing process.

Opioid medications may not provide optimal pain relief with continuous use over time. The amount of pain relief from opioids can become less as your body gets used to it. Reduce opioid pain medication as soon as you are able. Only take medications approved by your surgeon, including over the counter medication.

Safe storage and disposal of your medications

Pain medication that sits in your medicine cabinet is a risk to your family. Medications that are not kept secured and out of reach of others (children, visitors, etc.) can end up in the wrong hands. Keep your medication securely stored and dispose of it when you are finished using it.

Drug take-back: Check with your pharmacy for drop-off, mail-in, or inactivation options for any unused medications.

For more information on safe storage and disposal of medications, please scan this QR code for the Food & Drug Administration's website.



Preventing Complications After Your Joint Replacement

It is important to prevent complications after joint replacement surgery. If you believe you are experiencing signs and symptoms of any of these potential complications, please let your surgeon know right away.

If you are experiencing a medical emergency, please call 9-1-1

Preventing a surgical site infection	Preventing blood clots in your veins	Preventing pneumonia
<ul style="list-style-type: none"> • Leave dressing on as directed by your surgeon. • Remove dressing as directed by your surgeon. • Hand hygiene is especially important to help prevent infection. If you must touch your incision, be sure to wash your hands thoroughly before and after with soap and water. • Do not allow pets to touch your healing incision or dressing. • Signs and symptoms of a surgical site infection include unusual warmth, redness, increased pain or swelling around the incision with an increase in the amount of draining, which may be thick or foul-smelling, and/or fever over 101 degrees. 	<ul style="list-style-type: none"> • One of the risks after surgery is developing a blood clot. • To reduce the risk of blood clots, you are encouraged to take frequent, short walks to increase blood flow in your legs. • Blood thinning medication may be prescribed after surgery – take as prescribed. • Wear your compression stockings as instructed. • Stay hydrated. • Do ankle pump exercises. • Signs and symptoms of a blood clot: new swelling and tightness in the leg, new pain or tenderness in the calf, redness or warmth to touch, difficulty breathing, chest pain. 	<ul style="list-style-type: none"> • To prevent pneumonia you are encouraged to use an incentive spirometer (10 times each hour) if recommended by your surgeon. • Cough and take deep breaths. • Take frequent, short walks. • Signs and symptoms of pneumonia include cough with phlegm, fever with chills, and shortness of breath.
Preventing falls	Preventing constipation	
<ul style="list-style-type: none"> • Before your surgery you should have completed the Home Safety Checklist and taken appropriate steps to reduce potential hazards around your house. • If you get up at night, sit for a moment before standing and use a nightlight. • If you wear glasses and/or hearing aids, keep doing so. • Be aware of pets and small children who could be underfoot. • Wear supportive shoes at home. • Keep essential items nearby, things such as cell phone, television remote, reacher, etc. • Tell your doctor if you become dizzy or lightheaded with activity or medications. • If you feel unsteady or have already fallen, notify your doctor – they can assess your medications and/or refer you to physical therapy if needed. 	<ul style="list-style-type: none"> • It is normal for your bowels to slow down in response to anesthesia, pain medications, lower activity levels, and poor diet. • Stay well hydrated: Drink plenty of water (6-8 glasses per day). • Over-the-counter laxatives and stool softeners may be taken if needed. • Move around during the day: take frequent, short walks. • Foods to eat: pears, apples, berries, nuts, oatmeal, kiwi, beans, broccoli, peas, spinach, prunes, lentils, sweet potato, caffeine. • Foods to avoid: milk/dairy, alcohol, fried food, junk food, white bread, red meat, chocolate, carbonated drinks. • Call your surgeon if you have not had a bowel movement within 3 days of your surgery. 	

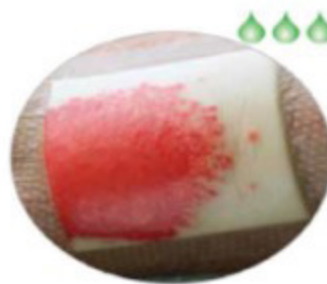
Incision and Dressing Care

This is your guide to dressing care and monitoring the surgical incision.

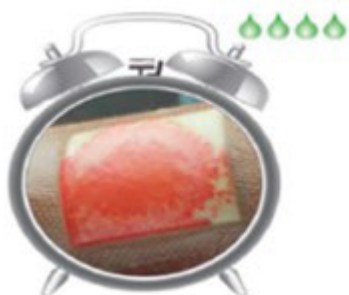
- Different types of dressings may be used to cover your surgical incision. Please follow any instructions given by your surgeon and orthopedic team.
- You may notice the incision looks a little puffy and red - that can be normal inflammation and healing.
- Bruising around your new joint and around your limb is normal and will go away over time.
- Some drainage on your dressing can be normal. See the examples below.
- Your surgeon will let you know when you may shower.
- Do not submerge your incision in a bath, hot tub, lake, or ocean until approved by your surgeon.
- Do not let your pet touch your incision or dressing.

Dressing care

- **Expected:** Some small to moderate drainage that may extend to touch 2 sides of the dressing can be expected and should not be concerning.



Drainage reaching 0-2 sides is expected. This is not concerning; dressing does not need to be changed. Do not need to notify surgeon.



- **Not Expected:** Large amount of drainage that reaches 3 or more sides of the dressing:
- This dressing is saturated when the drainage touches 3 (or more) of the dressing edges. Notify surgeon and/or change dressing according to your surgeon's instructions.



Call your surgeon if:

- There is a large amount of fluid coming from the incision that reaches 3 or more dressing borders, or begins to leak from underneath.
- The dressing will not stay in place – the edges are not sealed and/or you can see the incision.
- You experience unusual pain or odor, or the skin around the wound has redness that spreads outward and feels hot.
- There is continued bleeding or fluid leaking from the incision, or if there are areas where the incision edges are not healing together.

Postoperative Activity and Goals

This section will give you a better idea of what to expect as you recover over the next few months after your joint replacement surgery. Everyone is different, please talk with your surgeon if you have any questions or concerns.



Long Term Success

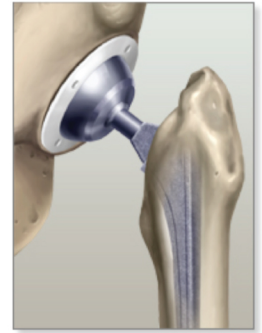
Your new joint will continue to need maintenance to be its best. Maintenance for a joint replacement includes staying active, doing specific exercises regularly, healthy nutrition, stress management, and a healthy lifestyle. Talk to your primary care provider or physical therapist if you need help.

- A lifelong exercise program that includes aerobic exercise, strengthening, flexibility, and balance will help reduce pain and improve how well your new joint works so that you can enjoy life.
 - o Exercise does not have to be painful or overly strenuous – in fact, it can feel good
 - o The recommendation is for at least 150 minutes of exercise per week
 - o Low impact exercise could include walking, water exercise, tai chi, or biking
- Healthy nutrition
- Stop/reduce smoking
- Stress management

Hip Replacement

What is arthritis? Why does my hip hurt?

Joint cartilage is a tough, smooth tissue that covers the ends of bones where joints are located. It helps cushion the bones during movement, and because it is smooth and slippery, it allows for motion with minimal friction. Osteoarthritis, the most common form of arthritis, is a wear and tear condition where the cartilage that cushions and protects the ends of your bones gradually wears away. Cartilage destruction can result in painful bone-on-bone contact, along with swelling and loss of motion. Osteoarthritis is an age-related condition and may affect one joint or many joints.



Prosthesis in place

Your hip joint works like a ball and socket, with the upper portion of your femur (thigh bone) as the ball portion and your pelvis (hip bone) as the socket. In the hip joint, there is a layer of smooth cartilage on the upper end of the femur and in the socket of the pelvis. This cartilage serves as a cushion and allows for smooth motion of the hip. Arthritis occurs when the smooth cartilage wears away, then the hip can become stiff, swollen, and painful. Eventually, the cartilage can wear down to the bone and the bones can rub against one another, causing pain.

What is a hip replacement?

A hip replacement is when the top part of the femur and the socket part of the pelvis are replaced. This is done by placing metal alloy on the top of the femur and in the socket part of the pelvis. A smooth piece of cup-shaped plastic is inserted between this new ball and socket, which allows the ball to move smoothly. Replacement of the worn cartilage with the metal and plastic implant creates a new smooth cushion and a functioning joint. A replaced hip can provide significant relief from arthritis pain. After hip replacement surgery most people have a marked decrease in their pain with substantial improvement in function, which allows them to remain active and enjoy activities that had been limited because of pain.

Activity after hip replacement

You may have received a MedBridgeGO home exercise program from our physical and/or occupational therapists personalized for your needs and your new hip. You can access this with the provided access code on their smartphone app or in a web browser at www.medbridgego.com



Hip precautions after surgery

Many hip replacement surgeries have precautions around type of movement to protect your new hip. Always follow your surgeon's directions, as they will have specific instructions about bending, sitting, twisting, and crossing your legs. This is very important to avoid dislocating your new hip joint.

Knee Replacement

What is arthritis? Why does my knee hurt?

Joint cartilage is a tough, smooth tissue that covers the ends of bones where joints are located. It helps cushion the bones during movement, and because it is smooth and slippery, it allows for motion with minimal friction. Osteoarthritis, the most common form of arthritis, is a wear and tear condition where the cartilage that cushions and protects the ends of your bones gradually wears away. This can occur quickly over months or may take years to occur. Cartilage destruction can result in painful bone-on-bone contact, along with swelling and loss of motion. Osteoarthritis usually occurs late in life and may affect one joint or many joints.



In the knee joint, there is a layer of smooth cartilage on the lower end of the femur and on the upper end of the tibia. This cartilage serves as a cushion and allows for smooth motion of the knee. Arthritis occurs when the smooth cartilage wears away, then the knee can become stiff, swollen, and painful. Eventually, the cartilage can wear down to the bone and the bones can rub against one another, causing pain.

What is a knee replacement?

A knee replacement is when the bottom surface of the femur, the upper surface of the tibia, and sometimes the undersurface of the patella (kneecap), are replaced with a metal alloy and medical-grade plastic implant that allows the new joint to move smoothly. Replacement of the worn cartilage with this type of implant creates a new smooth cushion and a functioning joint. A replaced knee can provide significant relief from arthritis pain. After knee replacement surgery most people have a marked decrease in their pain with substantial improvement in function, which allows them to remain active and enjoy activities that had been limited because of pain.

Activity after knee replacement

- Seated knee flexion
- Active knee flexion/extension
- Knee extension stretch

You may have received a MedBridgeGO home exercise program from our physical and/or occupational therapists personalized for your needs and your new knee. You can access this with the provided access code on their smartphone app or in a web browser at www.medbridgego.com



When you elevate your knee, be sure to not place a pillow directly under your knee – you want full extension when elevating. Doing otherwise could reduce the range of motion you can get from your new knee.

Shoulder Replacement

What is arthritis? Why does my shoulder hurt?

Joint cartilage is a tough, smooth tissue that covers the ends of bones where joints are located. It helps cushion the bones during movement, and because it is smooth and slippery, it allows for motion with minimal friction. Osteoarthritis, the most common form of arthritis, is a wear and tear condition where the cartilage that cushions and protects the ends of your bones gradually wears away. This can occur quickly over months or may take years to occur. Cartilage destruction can result in painful bone-on-bone contact, along with swelling and loss of motion. Osteoarthritis usually occurs late in life and may affect one or many joints.

In the shoulder joint, there is a layer of smooth cartilage on the upper end of the humerus and on the end of the scapula. This cartilage serves as a cushion and allows for smooth motion of the shoulder. Arthritis occurs when the smooth cartilage wears away, then the shoulder can become stiff, swollen, and painful. Eventually, the cartilage can wear down to the bone and the bones can rub against one another, causing pain.

What is a shoulder replacement?

A shoulder replacement is when the surface of the humerus and the surface of scapula are replaced with a metal alloy and medical-grade plastic implant which allows the joint to move smoothly. Replacement of the worn cartilage with this type of implant creates a new smooth cushion and a functioning joint. A replaced shoulder can provide significant relief from arthritis pain. After shoulder replacement surgery most people have a marked decrease in their pain with substantial improvement in function, which allows them to remain active and enjoy activities that had been limited because of pain.

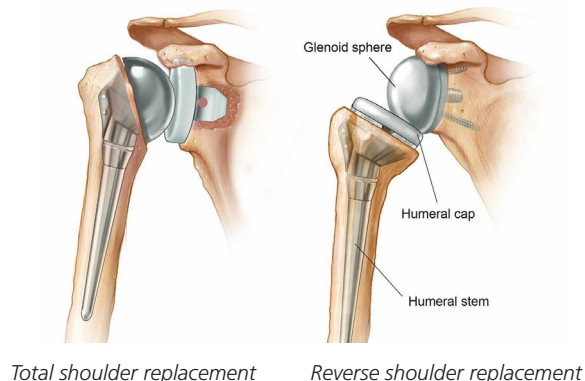
Shoulder arthritis may also occur in the setting of a large rotator cuff tear. If that is the case your surgeon may recommend a Reverse total shoulder replacement.

Activity after shoulder replacement

When you awake from surgery you will be wearing a sling that should remain on until you get home. This sling should remain on while you are sleeping and walking around. Sleep where you are most comfortable, just make sure to keep the sling on while you sleep.

You may take the sling off while seated and do elbow and wrist exercises. You may flex and extend your wrist and elbow only and without moving your shoulder.

You may have received a MedBridgeGO home exercise program from our physical and/or occupational therapists personalized for your needs and your new shoulder. You can access this with the provided access code on their smartphone app or in a web browser at www.medbridgego.com



Shoulder precautions after surgery

Shoulder replacement surgeries often have precautions around type of movement to protect your new shoulder. Always follow your surgeon's directions for recommended exercises and limitations for range of motion and weight bearing status as they will have specific instructions for moving your new shoulder. This is very important to avoid damaging your new shoulder joint.

Ankle Replacement

What is arthritis? Why does my ankle hurt?

Joint cartilage is a tough, smooth tissue that covers the ends of bones where joints are located. It helps cushion the bones during movement, and because it is smooth and slippery, it allows for motion with minimal friction. Osteoarthritis, the most common form of arthritis, is a wear and tear condition where the cartilage that cushions and protects the ends of your bones gradually wears away. This can occur quickly over months or may take years to occur. Cartilage destruction can result in painful bone-on-bone contact, along with swelling and loss of motion. Osteoarthritis usually occurs late in life and may affect one joint or many joints.



What is an ankle replacement?

An ankle replacement is when the ankle joint is replaced with a metal alloy implant and medical-grade plastic which allows the joint to move smoothly. Replacement of the worn cartilage with this type of implant creates a new smooth cushion and a functioning joint. A replaced ankle can provide significant relief from arthritis pain. After ankle replacement surgery most people have a marked decrease in their pain with substantial improvement in function, which allows them to remain active and enjoy activities that had been limited because of pain.

Activity after ankle replacement

Elevation and cold therapy (ice), especially for the first few days, are great ways to decrease pain and swelling in your ankle and foot.

It is normal to have swelling in your foot and ankle for the first six to nine months after surgery.

You will have a splint on your ankle – follow your surgeon’s instructions for splint use and care.

You will not be allowed to bear weight while walking on your new ankle for at least a few weeks – your surgeon will tell you when and how you may begin to bear weight on your ankle.

You may have received a MedBridgeGO home exercise program from our physical and/or occupational therapists personalized for your needs and your new ankle. You can access this with the provided access code on their smartphone app or in a web browser at www.medbridgego.com



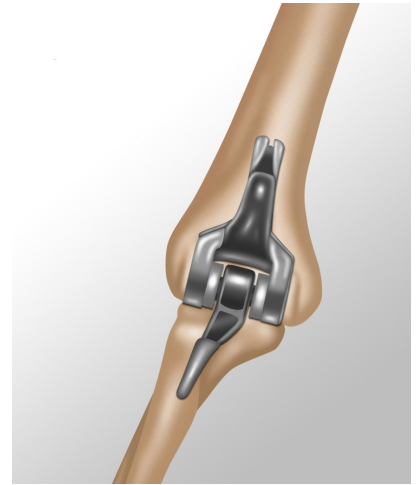
Ankle movement and precautions after surgery

Ankle replacement surgeries often have specific instructions for movement and weight-bearing after surgery to allow your new ankle joint to heal. Always follow your surgeon’s directions for bearing weight, walking, and recommended exercises and limitations for range of motion, as they will have specific instructions for moving your new ankle. This is very important to avoid damaging your new ankle joint.

Elbow Replacement

What is arthritis? Why does my elbow hurt?

Joint cartilage is a tough, smooth tissue that covers the ends of bones where joints are located. It helps cushion the bones during movement, and because it is smooth and slippery, it allows for motion with minimal friction. Osteoarthritis, the most common form of arthritis, is a wear and tear condition where the cartilage that cushions and protects the ends of your bones gradually wears away. This can occur quickly over months or may take years to occur. Cartilage destruction can result in painful bone-on-bone contact, along with swelling and loss of motion. Osteoarthritis usually occurs late in life and may affect one joint or many joints.



What is elbow replacement?

An elbow replacement is when the damaged parts of the humerus and ulna in the elbow joint are replaced with a metal alloy implant and medical-grade plastic which allows the joint to move smoothly. Replacement of the worn cartilage with this type of implant creates a new smooth cushion and a functioning joint. A replaced elbow can provide significant relief from arthritis pain. After elbow replacement surgery most people have a marked decrease in their pain with substantial improvement in function, which allows them to remain active and enjoy activities that had been limited because of pain.

Activity after elbow replacement

You may need to wear a splint or a sling for a few days or weeks after surgery.

You will be taught some exercises for your hand and wrist to avoid stiffness and help to control swelling.

Follow instructions for gentle range-of-motion exercises as the incision heals.

You will likely not be allowed to put any weight on your arm or push against resistance with your hand until about 6 weeks after your surgery. Please follow your surgeon's instructions.

You may have received a MedBridgeGO home exercise program from our physical and/or occupational therapists personalized for your needs and your new elbow. You can access this with the provided access code on their smartphone app or in a web browser at www.medbridgego.com

OUR MISSION

As expressions of God's healing love, witnessed through the ministry of Jesus, we are steadfast in serving all, especially those who are poor and vulnerable.

OUR VALUES

Compassion, Dignity, Justice, Excellence, Integrity

OUR VISION

Health for a better world.

OUR PROMISE

Know me, care for me, ease my way.

Providence Health & Services, a not-for-profit health system, is an equal opportunity organization in the provision of health care services and employment opportunities.