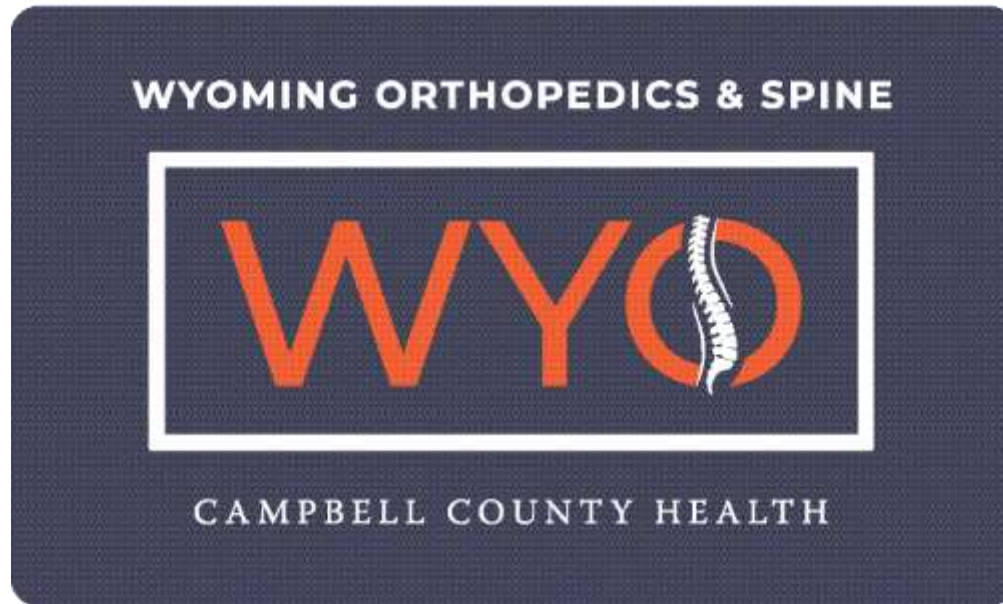


# Wyoming Orthopedics & Spine

Joint Journey Class



# Our Surgeons

Dr. Stanford Israelsen



Dr. Scott Sorenson



# Our goals and objectives

- To provide quality joint replacement by outstanding surgeons to relieve pain and give you a more active lifestyle.
- To provide safe, comfortable and compassionate care to our patients and their families.
- To provide our patients with the necessary knowledge and support to produce the best recovery outcomes.
- To allow patients and families a forum to ask questions.
- To discuss preparation and expectations of surgery

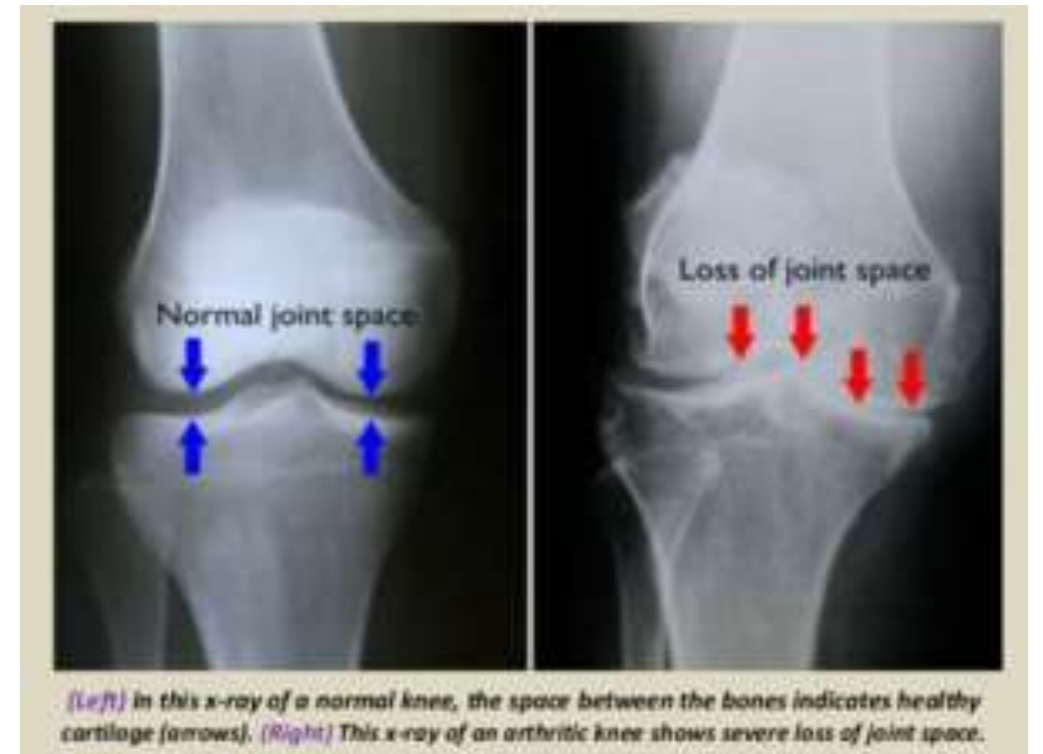
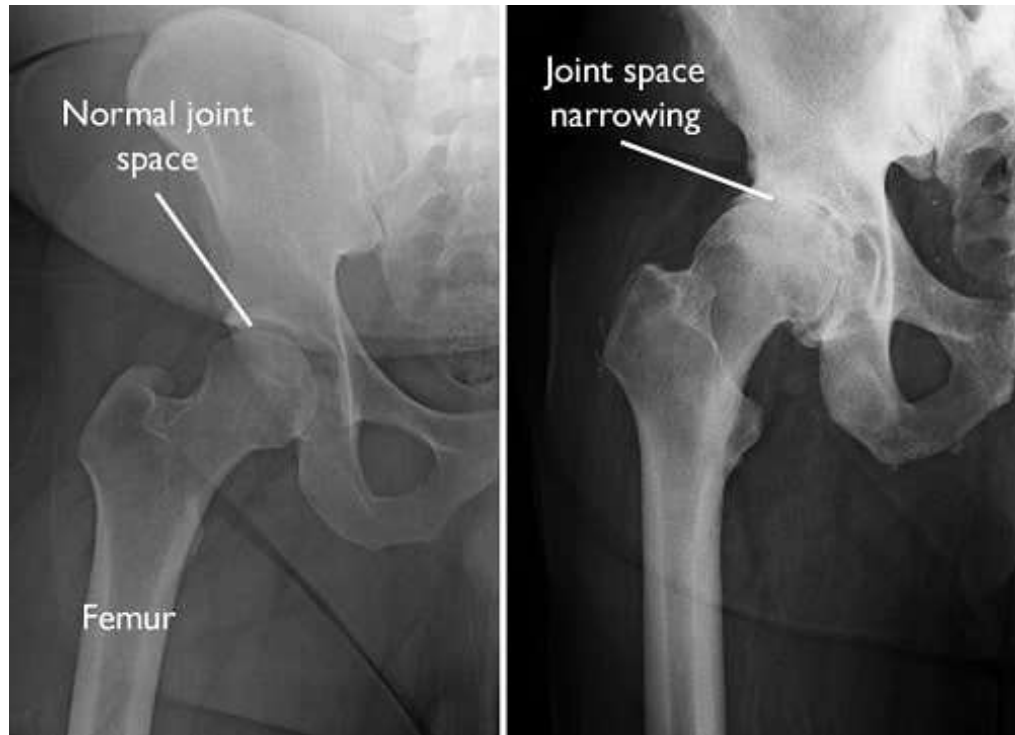


# Your team:

- Your team
  - **You** and your coach
  - Your surgeon
  - Your coordinator- Roxi
  - Your navigator/Pre anesthesia nurse
  - Clinic team
  - Anesthesia team
  - Surgical team
  - Surgery Center nursing care team
  - In patient nursing care team
  - Care management team
  - Rehabilitation team
    - Rehab
    - Physical and occupational therapy



# Osteoarthritis

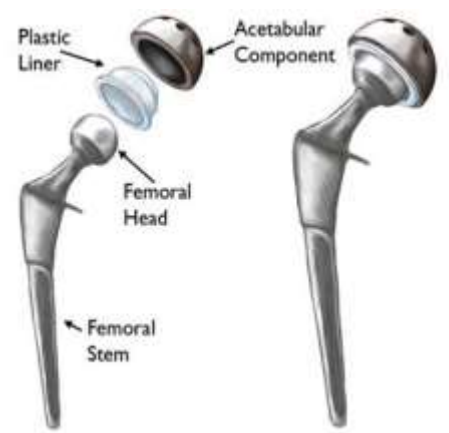


# Shoulder Osteoarthritis





# Joint Replacement



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# Total Shoulder Replacement

**Total Shoulder Replacement**



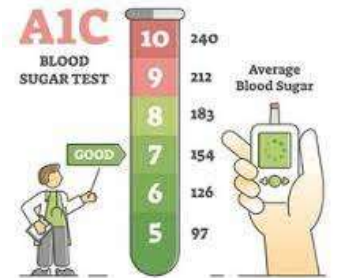
**Reverse Total Shoulder Replacement**





# What do I need to do now?

- Stop smoking
- Stop illicit drugs, marijuana or CBD products, including Kratom
- Start walking or exercising
- Get your diabetes under control
- Get your sleep apnea treated
- Get dental work done 6 weeks prior to surgery
- Improve your nutrition
- Avoid and watch for any skin sores or rashes
- CT for the shoulder replacement
- Start thinking about plans for care after surgery
  - Rehab
  - Who will care for you after surgery



# Why do I need to stop smoking?



- Smoking causes breathing problems and increases the risk of medical complications and slows recovery.
- Smoking increases risk of blood clots and infection after surgery and increases time to heal.
- Studies have shown that joint replacement patients who continue to smoke before and after surgery are *10 times more likely to need a joint revision surgery* than non-smokers.
- Nicotine patches/gum are preferable.

# Is there a reason the doctor asks about my alcohol drinking?

- Alcohol use that is frequent or heavy, can delay recovery and increase risk of complications such as:
  - Pneumonia
  - Infections
  - Delay in wound healing
- Studies find that abstainers have greater health improvement after surgery than even moderate drinkers.
- Be honest and tell them how many drinks you have per day or week.
- Tell them if you have **withdrawal** symptoms when you stop drinking.



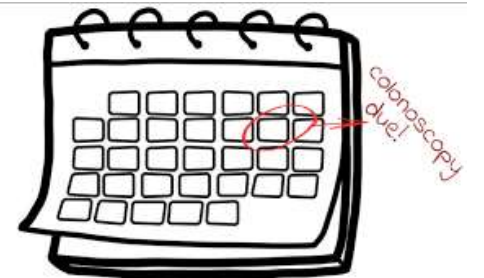
# Why dental work?



- If you have any dental problems, such as loose or painful teeth, please let us know as these need to be treated before surgery.
  - Will have to wait six weeks after the procedure and have a clearance from your dentist
- If you are scheduled for urgent dental work have this done 6 weeks prior to your surgery.
- After surgery, no dental work, even cleanings, for six weeks.
- For the first year after your joint replacement for any dental work, even cleanings, you will need an antibiotic.

# Is there any other procedure I need to postpone prior to my replacement?

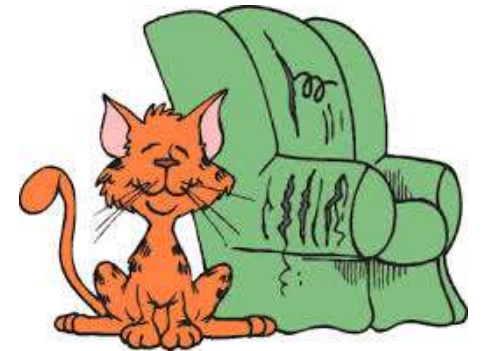
- Delay a routine colonoscopy until 6 weeks after surgery or delay the replacement if colonoscopy is urgent
- Other surgical procedures should be done at least 6 weeks prior to the replacement
  - You can delay the procedure or
  - The replacement surgery can be delayed
- If questions, talk with Dr. Israelsen, Dr. Sorenson or Roxi.



# Why worry about sores or scratches?

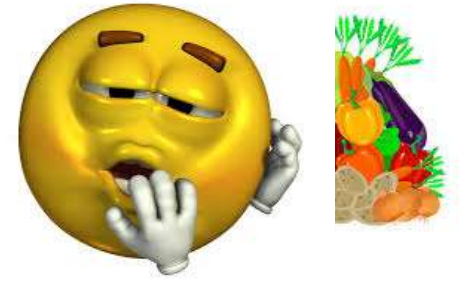


- These type of wounds can increase your risk of surgical site infection or medical complication by 2 times.
- Please notify your surgeon if you have any sores, rashes, boils or skin changes as soon as you notice them.





# How do I improve my nutrition?



- Eat food rich in iron, vitamin C, and calcium and Vitamin D
- Get enough protein (no less than 60gm per day)
- Eat more fiber
- Healthy eating and proper nutrition before surgery aids the healing process.
- Drink at least 8 glasses (64 oz) of water per day.

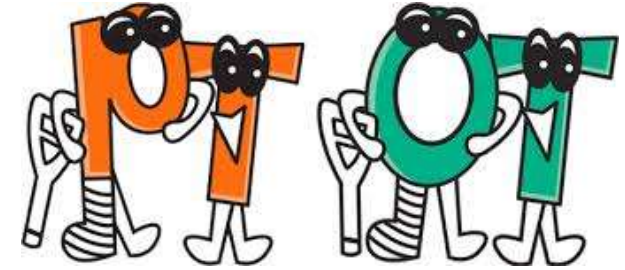


# Why do I need to exercise before surgery?

- Exercising up to the day of surgery, helps improve your strength, range of motion, and endurance.
- Prehab (exercise before surgery) can stabilize your pain levels before surgery and gets you back on your feet faster after surgery.
- A walking or water exercise program increases endurance, flexibility, and overall strength.
- What type of exercise is not as important as being consistent with your exercise.
- You can practice your after surgery exercises
  - Some are in the booklet



# What will they do at therapy?



- Physical Therapy (PT): work on movement and function
- Occupational therapy (OT): work on activities of daily living and independence
- Prehab: see your PT 2-4 weeks prior to surgery for evaluation and instruction on exercises and work with the walker
- Rehab: you will see your PT/OT two to three times a week to work on your movement and function. Therapy has set protocols and assessment protocols that are approved by your surgeons.

# What can I do to improve my recovery?

- Take pain medication about 30 minutes prior to your PT appointment.
- Eat and drink prior to your PT appointment.
- Ask questions and voice concerns.
- Do your daily exercises: twice daily.
- Ace bandage.
- Ice/ice.
- Knees: Work on getting the knee straight.
- Balance rest with activity.



# What can I do after shoulder replacement?

## Activity After Surgery

1. No shoulder active range of motion.
2. No reaching behind the back
3. No moving the arm inward or outward
4. No lifting
5. No supporting body weight with hands
6. Place a pillow or folded towel under the elbow while lying on back to avoid the shoulder falling forward
7. Avoid shoulder elevation or hike
8. Physical/Occupation therapy will review all exercises to elbow and wrist. Do not do these exercises without instruction.



# mymobility



- Personalized support throughout your journey
- Available for knees and hips
- Timely education, checklists, and reminder notifications
- Video-guided exercises
- Data collection: activity levels, pain, care plan progress that you and your surgeon and care team can monitor.
- Ability to text and send pictures





# What do I do one month before surgery?

- Make sure you have a coach
  - Should come to all appointments
  - Take you to and from hospital/surgery center/ PT
- See your surgeon for a pre operative visit
  - Meeting with Roxi
- Attend this class
- Make a plan for care after surgery
- Prepare your home
- Stop vitamins and herbal supplements (two weeks)
- Visit with PT for a pre-rehab visit
- Have a plan for icing, such as a Game ready machine or reusable ice pack
- Get your equipment: front wheeled walker, toilet riser, shower chair



# What if I get sick before surgery?

- If you are experiencing a moderate to severe illness two weeks before surgery or a minor illness in the week before surgery notify your surgeon immediately.
- Call if you have symptoms of:
  - Chest cold
  - Urinary tract infection
  - GI Infection
  - Fever, chills or not feeling well
  - Vomiting
  - Breathing problems, such as severe cough, wheezing.



# What happens at the pre-anesthesia phone visit?

- A pre-anesthesia nurse will call you about 2 weeks before surgery. The goal is to review any health risks before anesthesia.
  - Health history of you and your family, such as problems with anesthesia, blood clots or bleeding disorders
  - Before surgery instructions
- Additional tests may need to be ordered
- May refer to a specialist if needed.
- Anticipate at least one hour for the phone appointment
- Have a list of your medications, including herbal, OTC and supplements
- Have list of your allergies



# What do I need to do one week before surgery?



- Stop medication as directed by pre anesthesia nurse
- Stop anti-inflammatory medications
- Talk with care manager about post surgical arrangements if needed
- Make sure you have supplies (walker, shower chair, toilet riser, etc.)
- Call Roxi for any questions
- If you have advanced directives, get a copy to hospital or surgery center



# What some other tasks I need to do?

- Antibiotic to nose, if ordered
  - May need to wash with special soap for 5 days.
- Do you have your wash kit or soap?
- Pack your bag
- Pick up medical equipment if needed
- Make final preparations of your home
- Get your medications for after surgery. It is best to get the prescription the day before surgery to avoid problems.
  - There is no outpatient pharmacy at the hospital
  - Roxi will call to pharmacy Friday before or day before
  - If special concerns about getting prescriptions, call Roxi
- Do not shave your surgery extremity 5 days prior to surgery



# What do I do the night before surgery?



- Call from OR or surgery center on what time to be there in the morning. (Monday surgeries this will be Friday)
- Shower with cleanser as instructed
- Drink 500 ml (2 cups or 8 oz) of Gatorade or an electrolyte drink
- Take medications as directed
- Stop eating solid at midnight





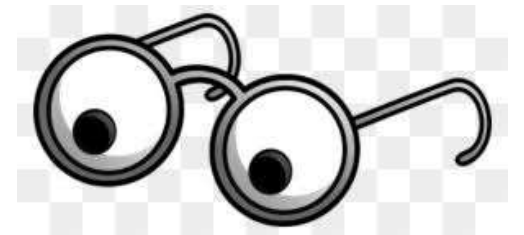
# It is the morning of surgery, what do I do?



- Take medications as directed with a small amount of clear liquid.
- Drink 1 cup or 8 ounces of Gatorade or electrolyte drink 3 hours prior to surgery. For **shoulders drink this 4** hours prior to surgery.
- Nothing to eat or drink (NPO) for the final **2 hours** prior to surgery
- No chewing gum, chewing tobacco, or hard candies
- Please be on time!

# What should I bring to the hospital?

- List of medications or the medications and list of allergies (do not bring medications)
  - You may be asked to bring specific medications with you, in the prescription bottles
  - Bring your Inhalers
- Rubber-soled shoes or full foot slippers
- Glasses with case
- Hearing aide cases and chargers
- Denture case
- Grooming items
- Comfortable clothes for the trip home (loose)
- Walker
- Phone charger
- Please label your belongings especially your walker
- CPAP machine if you use one. Please clean the machine.
- Game ready or Icing machine if using one
- Chap stick



# What do I bring to the surgery center?

- List of medications (name, doses, timing) and allergies
- Walker
- Wear loose clothing and slip on shoes or full footed slippers with non slip soles
- Glasses and hearing aids and cases for storage
- Denture case
- Game ready or icing machine if you are using one.
- Inhalers



# What supplies do I bring for shoulder surgery?

- A large/loose-fitting button-up shirt.
- Easy to pull-up undergarments/shorts/pants (i.e. athletic wear or pajamas).
- Good non-slip walking shoes with a back
- A cane, if used for mobility prior to surgery. (You will not be able to use a walker).
- Game ready or icing machine if have one



# What happens at the OR?

- Check in to hospital OR or surgery center
- You will get a gown, bonnet, head to toe assessment and IV
- Surgical site will be prepared
- Anesthesia will visit with you about your anesthesia
  - General
  - Spinal with sedation
  - Nerve block: these are usually done in the pre operative area.



# What do they do in the operating room?

- You are taken to the OR room
- The OR is cold, so warm blankets are given
- You will be asked to move over to the operating table
- Monitors will be attached, anesthesia will begin
- Tourniquet for knee replacement



# Where do my family/friends go?



- Your coach/family member may stay with you in the pre operative area prior to you moving to the operating room.
- Hospital: Family members to wait in the waiting room by the coffee shop
- Surgery Center: Family members will wait in the waiting room
- Surgeon will speak with your family after the surgery is completed. **PLEASE** answer the phone.
- We ask that family leave contact information prior to leaving the facility.

# I am having surgery at the hospital, what happens when surgery is completed?

- You will go to recovery for about 1-2 hours
  - No visitors
- Then you will go up to your hospital room on the 2nd Floor
  - Family can visit
- You ***must call for assistance***
  - Every time you get out of bed
- Please use your walker for ambulation at all times
  - You are weight bearing as tolerated on your surgical leg
  - The nurses or therapists will use a gait belt for safety
- You are expected to walk after surgery





# What will happen during my hospital stay?

- Diet: will start with clear liquids and ice chips and then start your regular diet when ready.
- Pain management
- Physical therapy and occupational therapy will see you after surgery on that day of surgery
- Keep active
  - Prevent pneumonia
  - Prevent blood clots
  - Helps you to feel better and decreases stiffness and pain



# My surgery is at the surgery center, how do I prepare to go home?

- Once you are awake and you have sensation and strength, PT or nurse will help you with walking with the walker.
- You *must call for assistance* every time you get up
- Your family will be able to be with you in recovery
- Once you are safe, you will be discharged to home.
  - Usually about 4 hours

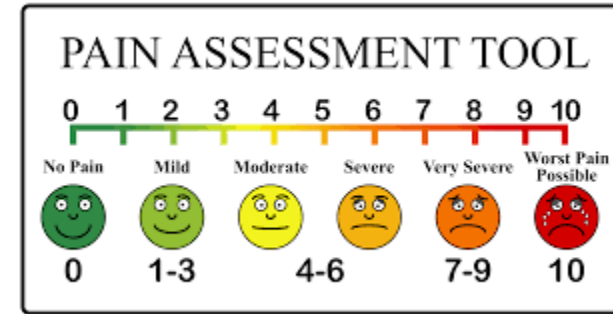


# I had surgery at the surgery center. What do I do the next day?

- Stay with clear liquids until you are ready to start your regular diet.
- Deep breathe and cough to expand and clear your lungs. Pain management. See the pain management booklet.
- Be careful: Use walker at all times
- Ask for help!!
- Start PT within 48 hours after surgery
- Keep active
- Ice, ice, ice
- Rest

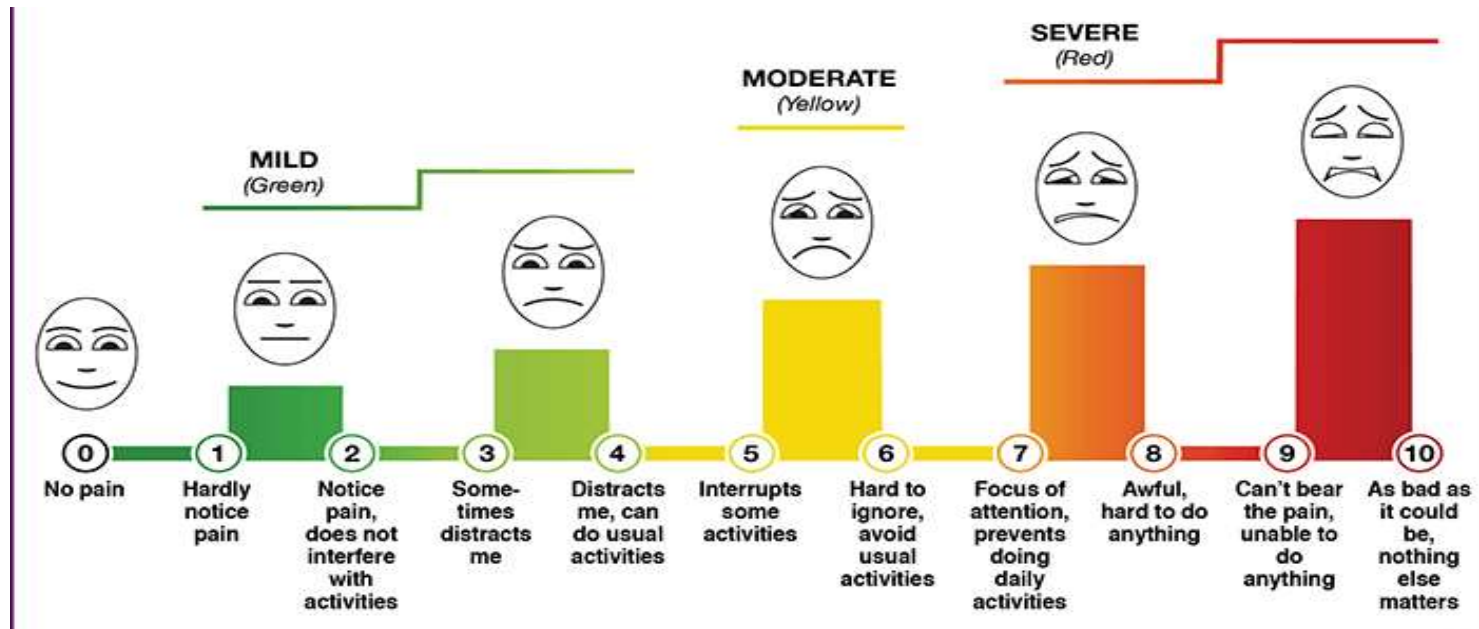


# What about pain?



- Pain management is an important part of your care and recovery. Keeping your pain under control will help you participate in healing activities, deep breathing and PT/OT so you heal faster.
- Pain is normal even with medications. Zero pain is not safely possible.
- Our goal for pain management is to keep your pain at or below your comfort-function goal.
  - Comfort-function goal is the amount of pain you can comfortably tolerate and move in bed, get up for PT, deep breathe/cough and do your exercises.

# Functional Pain Scale



- Our goal for pain management is to keep your pain at or below your comfort-function goal.
- Comfort-function goal is the amount of pain you can comfortably tolerate and move in bed, get up for PT, deep breathe/cough and do your exercises

# What is the plan to help me with my pain?

- Peripheral nerve block
  - Done at time of surgery
  - Usually wears off in 24 hours
- Oral medications
- Non pharmacological
  - Ice, slow deep breathing, music, TV, family visits
- Movement: to help prevent stiffness that can increase the pain
- Use pain medication or interventions when pain increases
- Ice and elevate the surgical site
- If using a game ready or icing machine, program for 30 minutes  
Icing, 30 minutes off, medium compression.



# aCough: for pneumonia prevention

- Get active
  - Improves lung function, pain control, circulation, muscle strength, gut function, mental health
- Cough: take 3 deep breaths and then cough as you exhale
- Oral health: toothpaste and mouthwash 2x daily
- Understand your surgery
- Get out of bed
- Head of bed elevated (45 degrees)



# How do I prevent blood clots?

- Aspirin or anticoagulant (blood thinner) to take daily as ordered by the surgeon
- Ace wrap (Knees)
  - Wear day and night for the first three days after surgery
  - Use ace from foot to thigh if have swelling
- Compression hose may be used on the non surgical leg.
  - You may use on both legs for swelling
- Compression devices (at the hospital)
- Foot pumps and exercises when resting
- **Move:** walk or use your post operative exercises





# Is there a risk of falling after surgery?

- Causes of falls after surgery
  - Fluid and/or electrolyte imbalance
  - Muscle weakness
  - Using stairs that are too steep or narrow or without handrails
  - Lack of light
  - Excessive clutter, stray electrical cords, oxygen tubing, throw rugs
  - Unstable furniture
  - Uneven surfaces, ice, water
- Incidence of falls in the first year after a hip replacement is 25-32%
- 50% of falls occur in the bathroom, be sure to have someone help you in the bathroom. Watch for water on the floor.
- Risk of fracture with falling



# What do I need to do at home?

- PT
- 2 week appointment at WYOS
- Medication
  - Pain medication
  - Anti inflammatory
  - Aspirin or anticoagulant
  - Stool softener
- Call for refills at least 24 hours (before Friday) before needing them.
- Be active. Walk and do your after surgery exercises. Go to physical therapy.



# How do I prevent falls?

- Wear supportive and non slip shoes at all times.
- Use your walker at all times.
- Go to PT and do your home exercises.
- Watch for water in bathroom and kitchen.
- ASK for help, especially at night.
- Don't stand to get dressed.
- Non slip mat or pad in the shower, keep shower floor clean.



# What is normal after surgery?

- Pain
- Swelling
- Stiffness
- Bleeding or dried blood on the bandage
- Bruising
  - Upper thigh with knee replacement
  - Bruising moves with gravity
- Constipation
- Nausea



# It is normal to have:



- Good days and bad days
- **Slight** redness and/or heat around the wound
- Fatigue
- Frustration

This is a journey.

- Rushing is not the answer. The pain is temporary. The end goal is to have relief that lasts a life time
- There is a light at the end of the tunnel
- Every replacement and every person recovers differently



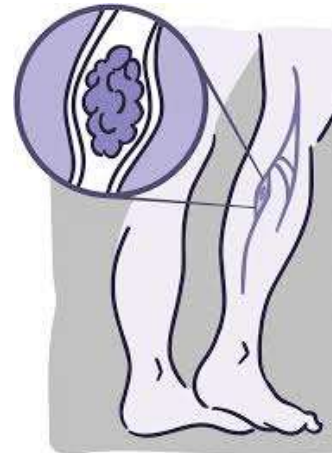
# What are some effects from anesthesia?

- General anesthesia
  - Common to have some “brain fogginess”, disorientation, problems remembering things. Usually goes away in a week or two.
  - Dry mouth, sore throat, mild hoarseness
  - Dizziness, shivering, nausea and muscle aches
- Spinal anesthesia
  - Temporary loss of sensation or a “pins and needles” sensation
  - Muscle weakness
  - Headache
  - Urinary retention (unable to urinate)



# What are some rare complications?

- Wound issues
  - Dehiscence
  - Stitch abscess
- Blood clot
- Severe bleeding
- Infection
- Extreme stiffness
- Nerve injury
- Prosthetic loosening or dislocation





# How do I prevent an infection?

- Hand washing for you, family and care givers.
- Do not pick or put your hands on the wound
- No tub baths, hot tubs, pools. Do not submerge yourself in water
- Be careful around pets (keep them off the surgical side)
- Keep the wound clean. Keep dry for showers until instructed that you can shower without covering.
- Call WYOS or Roxi if you notice redness, drainage, or have fever or chills.



# When and where do I call if I have questions?

- Your thigh or calf becomes more painful, red and swollen
  - Pain when you flex your ankle
- Your incision has increased drainage, getting more red or is opening up
- You develop a fever over 101° F or persistent low grade fevers
- After hours, call the ER and they will have your surgeon call you back
- If you have chest pain, shortness of breath or difficulty breathing, **call 911 or go immediately to the ER**
- Call WYOS at 307-686-1413 or Roxi at 307-688-8674



# Frustrated? Unhappy? Fearful?



- **Please remain realistic during your recovery**
- Do not set yourself up for disappointment as this is a long process
- The pain can be intense initially
- Make sure you have a coach, such as a family member or friend, who will be with you throughout your surgical experience
- Recovery is a day to day process. Some days are better than others.
- Recovery takes dedication
- Slowly you will find daily activities are getting easier
- Everyone heals and recovers differently
- It is normal to feel anxious, depressed, frustrated, angry and fearful throughout the healing process. Talk about it and express your frustration.
- You will have to rely on others for a time, which can be stressful for you and for the care giver. Find times for each of you to take a break.
- Please call us if you need to talk about the recovery process

# Contact names and phone numbers

- Roxi Peters: 307-688-8674 or WYOS 307-686-1413
- Becki Peterson: 307-688-8661
- Pre anesthesia (hospital): 688-1825
- Surgery center: 696-5643
- Care Management: 699-3030



# Outside sources

- American Association of Hip and Knee Surgeons: AAHKS
  - <https://hipknee.aahks.org/>
  - Up to date and extensive articles about hip and knee replacement, preparing for surgery, your health, exercises, after surgery, non surgery options, podcasts, material in Spanish, and testimonials
- American Academy of Orthopaedic Surgeons: AAOS
  - <https://orthoinfo.org/>
- Zimmer Biomet
  - <https://www.zimmerbiomet.com/en/patients-caregivers.html>