

Total Knee Replacement



 **South Florida
Baptist Hospital**
BayCare Health System

SouthFloridaBaptist.org

Welcome to South Florida Baptist Hospital

This booklet will provide guidelines to help prepare you for surgery at South Florida Baptist Hospital and let you know what to expect before, during and after your operation. Because every patient has special needs, you'll also receive detailed instructions from your doctor and health care team related to your individual health care needs.

Before Admission

- South Florida Baptist Hospital is tobacco-free. Smoking and/or tobacco use by team members, physicians, patients, volunteers or visitors isn't allowed anywhere on campus.
- Complete all tests and doctor visits as requested by your orthopedic surgeon.
- Attend the preoperative knee replacement education class.
- Complete checklist (see page 6).

**To schedule
an Education Class:
(813) 757-8034**

Getting Ready for Surgery

Take steps ahead of time to make your recovery at home as easy and safe as possible.

Remember that your mobility will be limited in the days and weeks after your surgery. You'll be using a walker at first. Take some time before surgery to make some easy changes to reduce your risk for falls and remove possible hazards that may get in your way.

Here are a few simple ideas:

Move furniture: You may need to move furniture to create wide traffic paths and remove walking hazards that may be in the way. Make it as easy and safe as possible to move around your home during your recovery.

Put items you use often within easy reach: You'll want to avoid using a stool or bending over. A rolling cart may be helpful.

Buy a firm pillow: Putting a firm pillow on a low chair or sofa before sitting down may be more comfortable for you.

Wear safe shoes: Wear well-fitting, rubber-soled shoes to prevent slipping, no flip flops.

Move electrical cords out of the way: To reduce your risk of tripping over loose cords, move them out of the way if possible or tape them securely to the floor.

Pick up clutter and remove throw rugs: Rugs can shift or bunch, causing you to slip or trip. Don't take chances — remove all of them before your surgery. Move extra clutter out of the way while you recover to allow you more space to move around with a walker.

Watch for small pets or objects on the floor: After your surgery, always keep an eye on the floor as you walk to avoid tripping over pets or small objects.

Stock up on food: It's a good idea to stock up or prepare simple meals to have on hand when you get home. Simple prepared or frozen foods may be helpful. To prevent having to bend over or use a stool or stepladder, store as many supplies as possible between your waist and shoulder level so that they'll be easy to reach.

Prepare a room on the main living level to sleep in, if you usually sleep upstairs.

Get help with household chores: For the first few weeks after surgery, you'll need some help with typical household chores like cooking, cleaning, shopping, bathing and doing laundry. If your insurance provides an allowance and you don't have a spouse, relative or friend who can help with these tasks, your health care team can assist with arrangements ahead of time for someone to help you around the house. You can also possibly arrange a short stay at an extended care rehab facility while you recover.

Before Surgery

Staff will call to review your preoperative assessment/health history. **Important:** Bring your picture ID, insurance card, papers from surgeon, medication bottles, and advance directive or living will with you to class and/or the pre-op area the day of surgery.

Day of Surgery

When you arrive at the hospital, report to the Same Day Surgery waiting area. Once all of your paperwork is completed, you'll be directed to the Pre-op Unit. When it's time for your surgery, you'll be taken by stretcher to the operating room. Your family can wait for you in the surgery waiting room. Knee replacement surgery usually takes about two to four hours.

After Surgery

- You'll wake up slowly in the recovery room, where you'll spend the first hour or two after surgery. Your nurses will monitor your progress closely. Family members aren't permitted to visit you in the recovery room, but can see you after you've been moved to your hospital room.
- You'll have an I.V. line to receive medication and fluids. You may receive an antibiotic and other medication to ease any symptoms you may have, such as pain or nausea. Be sure to tell your nurse if you're in pain or feeling sick.
- When you fully recover from the effects of anesthesia, you'll be taken to your hospital room on the orthopedic floor.
- Depending on your medical history, surgery experience and recovery room stay, you may spend the night in the Intensive Care Unit (ICU) for closer monitoring. The surgeon or nursing staff will inform you and your family if this is necessary.

What Can I Expect After Leaving the Recovery Room?

- You'll be moved to a hospital room and greeted there by the nursing staff. A frame will be placed on your bed to make it easier for you to move around. You may receive oxygen through a small tube placed in your nose. You'll have a dressing on your knee and may have a drain coming from your knee to remove any extra blood or fluid from the area to reduce swelling. An ice bag may be used to reduce swelling. You'll have an I.V. in place to receive fluids, antibiotics and other medication as needed.
- Support and compression stockings may be used to help improve circulation and decrease your risk of blood clots. Inflatable stockings, called sequential compression devices (SCD) may also be used to gently squeeze and then release your foot. You may be given medication to help prevent clots.
- You may have an immobilizer on your leg to stop you from bending it at first.
- You may have a Continuous Passive Motion Machine (CPM) to increase flexibility by gently moving your knee. You'll start with 40 degree flexion and increase slowly every day with a goal of 90 degrees by the time of discharge.
- You'll be given a device called an incentive spirometer to help you with deep breathing exercises. Breathing exercises will help reduce your risk of developing pneumonia and other breathing problems. The nursing staff or respiratory therapist will teach you how to use the incentive spirometer. You'll be shown how to use it regularly after surgery to take about 10 full breaths every hour when awake.
- No showers or baths until you're advised to do so by your physician.



- You may be offered ice chips to start with, then water. If you don't feel sick to your stomach or vomit, the nurses will advance your diet. Please let them know if you follow any special diet.
- Managing your pain will be very important after surgery. Each doctor manages pain in ways to best meet your needs. Be sure to talk with your nurse or surgeon about options available to manage your pain.
- Some patients require a blood transfusion after surgery to replace blood loss. Every effort is made to minimize this; however, blood loss is common during knee surgery.
- The usual hospital stay for a total knee replacement is one to two days. Depending on your progress, you'll either go home or move to a skilled nursing facility. The nursing staff, physical therapist, social worker and surgeon will discuss this with you and your family.

Schedule for Your Hospital Stay

Day 1:

- **Activity:** The nursing staff and physical therapist will help you get out of bed. At first, you may only be able to move to a nearby armchair. Your goal today will be to be out of bed, sitting in the chair for at least one hour.
- **Medication:** Most patients will receive medication to help prevent blood clots. This may be a pill or a small injection (shot) in your abdomen. Your doctor will order other medication as needed.
- **Managing your pain:** Continue to discuss your pain management plan with your surgeon and your nurse. Although it may not always be possible to be completely pain free, it'll be important for you to be as comfortable as possible. You'll need to be able to rest and do exercises to promote healing.
- We encourage you to use the bathroom/ bedside commode.
- **Plans to go home:** You may be discharged today. Begin making plans for transportation. Plans will be made with the social worker/ Patient Care Coordinator, nurses and your surgeon. We'll help with arrangements for services or equipment you may need. When you're ready to go home, we do our best to have you ready to leave by 11am so you'll have time to get settled at home and have your prescriptions filled.

Day 2:

- **Activity:** You'll continue with the exercise program designed by you and your physical therapist.
- Using a walker, the goal will be for you to be able to walk out into the hall today. Continue to do the leg exercises as shown by your therapist when in bed.

- Use your incentive spirometer every hour while awake to help prevent lung complications.
- **Medication:** You'll continue taking medication to help prevent blood clots, as well as pain medication and other prescribed medication.
- **Managing your pain:** You can expect some pain with exercise and walking; however, therapy can be scheduled around your pain medication to make you as comfortable as possible.
- **Plans to go home:** If you haven't already been discharged, a social worker will be in to discuss plans for you to go home.

Day 3:

- Your I.V. may be removed today, if it hasn't already been removed.
- **Activity:** Therapy progresses. You'll stay out of bed longer and walk further.
- If going home, begin making plans for transportation and a social worker will continue to help with the arrangements for services or equipment you may need. If additional support services are needed, plans will be made to transfer you to a skilled nursing facility today.



What Happens After Leaving the Hospital?

- Some patients require further rehabilitative care at a skilled nursing facility. You'll continue strengthening your body, increasing the distance you can walk and increasing the amount of time you can stay out of bed. When the therapists feel that you're independent and safe, you'll be sent home.
- If you go directly home from the hospital, written care and follow-up instructions will be given to you and/or your family. Your doctor will order home health and physical therapy.
- After you return home, you may receive a mailed patient satisfaction survey. Your comments and feedback are vital to our continual quality improvement. Please complete the survey and return to the hospital as soon as you can. We value our patients' input and work to provide quality health care for all we serve.
- Should you have any questions or wish to visit any of the units, please don't hesitate to contact us.

Checklist for Coming to the Hospital

- Prepare your home. See simple safety ideas on page 1.
- Make a list of all medication, herbs, vitamins and supplements you're taking. Write down any allergies you may have to food or medication. Bring the list with you to the hospital.
- Pack a bag to bring with you to the hospital.
Include:
 - A pair of comfortable, sturdy nonslip shoes (no flip flops).
 - Copies of your insurance cards.
 - Copies of your advance directives (living will, health care surrogate, power of attorney).
 - You may want to pack something to read.
 - Personal care items that aren't supplied by the hospital such as a hair brush, denture paste, contact lens cleaner, makeup, hearing aid batteries, eyeglasses, sleeping clothes, robe, etc.
 - Loose-fitting clothes, like shorts and t-shirts.
 - DON'T bring jewelry, credit cards, large amounts of cash or other valuables. Leave them at home.
- Take a bath or shower the night before surgery.
- DON'T eat or drink anything after midnight the night before surgery, except for any medication your doctor told you to take; take with small sips of water.
- DON'T use any lotions, powders or colognes on the day of surgery.
- DON'T wear jewelry, makeup, lipstick or nail polish the day of surgery.



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