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Dear Patient:

On behalf of Backus Hospital, and our expert doctors, nurses and other professionals, we would like to welcome you and thank you for choosing us for your surgery.

As a Joint Commission-certified program, our goal is always to provide you with the highest quality care and the best possible experience while you are a patient here. Before then, we also want to make sure you are informed so you can be an active part of your own healthcare team as you prepare for and recover from surgery. Research has shown that understanding your surgery and participating in the whole process positively impacts your recovery and helps you achieve the results you want and expect.

The patient guide is full of important instructions and information that will help you prepare for surgery. The book outlines important steps you should take before, during and after your surgery, planning tools, advice on medications, and diet and exercise recommendations. We encourage you to read this guide carefully. If you have questions, please ask your surgeon or call the orthopedic nurse navigator at Backus at 860.425.5332.

Again, thank you for choosing Backus Hospital for your orthopedic care. We look forward to helping you.

Sincerely,

[Signature]
Donna Handley
President
Backus Hospital
Dear Patient:

As Medical Director of the Hip and Knee Total Joint Arthroplasty (replacement) program at Backus Hospital, I am writing to thank you for choosing Backus for your joint replacement surgery.

At Backus Hospital, we strive to provide the best clinical care while taking the individual needs of each patient into account. To accomplish this, we incorporate current joint arthroplasty protocols and clinical practice guidelines with cutting-edge technology including Mako ® Robotic-Arm Assisted surgery and muscle sparing surgery. At Backus Hospital our goal is to provide you with the best hospital clinical results and in-hospital experience. Our staff of orthopedic surgeons is board certified in Orthopedics. In addition, all of our surgeons have received additional advanced training and/or have years of experience in total joint arthroplasty for hips and knees.

While we do our best to achieve the best results for your surgery, much of the outcome of the procedure and recovery is determined by you, the patient. There are many factors that your surgeon cannot control. These include diabetes, obesity, and morbid obesity, smoking, clotting problems, kidney or liver failure, pre-operative leg swelling, and various other medical problems. Sometimes these pre-existing conditions can cause major peri- and postoperative complications. This is why as a hip and knee joint replacement patient at Backus Hospital you are required to get medical clearance pre-operatively. It is critical that you follow the treatment plan setup by your primary care practitioner to avoid having your surgical date delayed.

During the pre-operative process there will be ample information provided to you. This will be true even if you have had prior hip or knee joint replacement. This postoperative experience might be much different from what you experienced prior. Please be sure to read and review all of the information you have received. This includes what is discussed in your surgeon’s office (i.e. risks and benefits of surgery) and what has been provided by the hospital. Finally, I urge you to attend the preoperative total joint class provided by the hospital and available online. Following these steps will greatly improve the outcome of your surgery, your recovery and your overall experience at Backus Hospital.

We look forward to providing you with excellent care.

Sincerely,

Scott Stanat, MD
Board-certified Orthopedic Surgeon
Backus Hospital
Important Phone Numbers

Your Surgeon

Your Medical Doctor

Backus Hospital:

Total Joint Class Registration  855.442.4373
Preadmission Testing Center  860.889.8331 ext. 2142
Surgery Time-Line  860.889.8331, ext. 6376
Integrative Medicine  860.972.4444, ext. 2483
Total Joint Supervisor  860.425.3815
If you have any questions regarding your surgery, hospital stay and post discharge care.
Orthopedic Nurse Navigator  860.425.5332
Nurse Manager  860.889.8331, ext. 7816
Available Monday-Friday 8am-4:30 pm. If you have any concerns regarding the care and services provided, you may request to speak with the Nurse Manager directly and confidentially.
Director of Nursing  860.889.8331, ext. 6546
Patient Experience  860.889.8331, ext. 5939
Case Management  860.823.6319
Directions to Backus Hospital

Coming from East
Take Route 6-West to I-395 South. Follow I-395 to exit 13-East for the Routes 2 & 32 connector in Norwich. Follow the connector until you exit to your right onto Washington Street. The hospital entrance is on the right.

Coming from West
Take I-95 North to exit 76 for I-395 North. Follow 395 to Exit 13-a –East for the Routes 2 & 32 connector in Norwich. Follow the connector until you exit to your right onto Washington Street. The hospital entrance is on the right.

Coming from North
Take I-91 South to Hartford; watch carefully for Sharp left exit to Route 2 East. Take Route 2 East to Norwich. Exit Right onto Washington Street. The hospital entrance is on the right.

Coming from South
Follow I-395 North to exit 13 – A East for the Routes 2 & 32 connector in Norwich. Follow the connector until you exit to your right onto Washington Street. The hospital entrance is on the right.
Why do I need joint replacement?

A gradual loss of cartilage along the joint margin which results in wearing away of the bone, pain, swelling, stiffness, bone spurs which causes a decrease range in motion and the ability to move.

Why does it happen? Wear and tear on the joint, age, weight, hereditary, repetitive stress injury and some illnesses such as rheumatoid arthritis.
Backus Hospital Joint Replacement Pre-Op Patient Education Class

Patients who plan to undergo Joint Replacement Surgery are required by their orthopedic surgeons to attend the Joint Replacement Pre-Op Class.

Joint Replacement In-Person Pre-Op Class

Registration
Go to “backushospital.org”
1. Then choose “Classes and Events”
2. Under “Search Classes & Events by keyword” type in “Joint Replacement”
3. From the drop down “Select City” pick “Norwich, CT”
4. Click the blue “Search” button.
5. Choose the date and time or call 1.855.442.4373 to register.

Class Location
Backus Medical Office Building (MOB) 330 Washington Street Norwich. Ground Level Conference Room #130 – enter through the MOB entrance, walk straight down the hallway past the Quest lab, the conference room is on the right before the double doors.

This class provides education on how to prepare for surgery and recovery. The nurse navigator, physical therapist and discharge planning will be available to offer information and answer questions specific to your individual needs. We strongly recommend and welcome your support person who will be with you after surgery.

Joint Replacement Online Pre-Op Class
In the event you are unable to attend the in-person Joint Replacement Pre-Op Class, we also offer an online version through your Force Therapeutics account.

1. 1. You will receive a “Welcome Email” from Force Therapeutics. Please follow the prompts to create a password and log in.

2. Beginning 30 days before your surgery, when you log in to your Force account you will see an option to view your online joint class within your to-do-list. Simply click on the class title to begin. The Force Therapeutics online class is a convenient option for those patients who are unable to attend an in-person session. You will receive important pieces of education regarding how to prepare and recover from surgery. You must complete the entire class; however, it is not necessary to complete the class in one sitting.

Force Therapeutics will have additional information that will help ensure that you have a smooth surgery and recovery. Please be sure to keep up to date with your Force Therapeutics care instructions as they help better prepare you for the things you need to do before, during, and after surgery!

If you have any questions please contact
Heidi Morse, MSN, RN-BC Orthopedic Nurse Navigator 860.425.5332
Backus Hospital surgeons prescribe Force Therapeutics to stay connected to their patients as they recover from surgery.

**WHAT IS FORCE?**
Force is an interactive online care platform that gives you access to educational material and exercise videos at no charge. It is accessible on your computer or smartphone, allowing you to be in charge of your recovery and in touch with your Care Team within the comfort of your home.

**WHY USE FORCE?**
- Share important information with your provider
- Access care instructions and exercise videos any time
- Fill out your forms from home

**HOW DO I GET SET UP?**
- You will be set up with your Force account when your surgery is scheduled
- Look for an email from Force Therapeutics to create a password and log in
- Continue to access Force at [app.forcetherapeutics.com/login/hartford](http://app.forcetherapeutics.com/login/hartford)
- To use Force on your phone or tablet, download the Force Patient app from the app store

If you have questions about the program, please contact the Force Patient Success team at patientsuccess@forcetherapeutics.com
PREPARING for Surgery at Backus Hospital

Perioperative Assessment & Testing Center (PATC)

You have been scheduled for your elective orthopedic procedure at Backus Hospital. In preparation for your surgery, you must complete a pre-operative medical risk assessment at our Perioperative Assessment & Testing Center (PATC) within 30 days of your procedure. Your visit will take approximately 60 minutes and will cover your medical history, current medications, physical exam, appropriate pre-operative testing, procedure-related education, and, if need, a pre-anesthesia consult. The PATC strives to ensure you have a safe and successful surgery.

How PATC Works

1. Your surgeon’s office schedules your surgery at Backus Hospital.

2. You will receive a call from PATC to schedule an appointment for your preoperative surgical risk assessment and exam if the surgeon’s office has not done so for you already.

3. Based on your medical history, you may be referred to a specialist physician prior to surgery. For example, if you have a cardiologist (heart doctor) or pulmonologist (lung doctor) that you see routinely, additional testing or clearance may be required prior to your surgery.

What to bring to your PATC appointment:

- Government issued photo ID
- Insurance cards or forms
- A list of medications, including nonprescription and herbal supplements (include the name, dose and how often you take each one)
  - These can have unwanted effects when combined with other medications or anesthesia. You will receive instructions regarding managing your medications before surgery.
- A family member or friend to accompany you if possible

During your PATC appointment you will:

- Meet with a medical assistant, an Advanced Practitioner (APRN) and, if needed, a nurse case coordinator or anesthesiologist
- Complete a history and physical examination, blood work, Methicillin-resistant Staphylococcus aureus (MRSA) swab, and EKG if required
- Complete airway and sleep apnea assessments for anesthesia
- Receive pre-operative and anesthesia education
- Receive instructions regarding your pre- and post-operative medication
After your PATC appointment:
• Your healthcare team will provide resources for obtaining medical equipment and confirm your choice of home healthcare provider, if applicable.
• Call Same Day Surgery one business day prior to your surgery between 1:00 pm and 4:00 pm for your time of arrival. A member of the Backus Hospital perioperative team may call you before this time if the surgical schedule is released early. During this call, a member of the perioperative team will review final instructions and answer any questions you may have.

PATC Location:
Backus Hospital
326 Washington Street, Norwich, CT
• Parking is available at the Main Entrance
• Enter building and proceed to preregistration; a member of the PATC team will escort you to the center after registering.

If you have any questions about your PATC visit, please call
860.889.8331 ext. 2142
Medications

Be sure to inform your provider of ALL the medications you are taking, including:

- Vitamins
- Over the counter drugs (such as aspirin, antacids, pain relievers, etc.)
- Herbs and “natural” products

These can all have unwanted effects when combined with medications or anesthesia. You will receive instructions regarding managing your medications before surgery.

Please Note:

- If you are experiencing pain prior to surgery, you are allowed Tylenol up to the day of your surgery.

<table>
<thead>
<tr>
<th>Medication Name</th>
<th>Dosage (mg)</th>
<th>Frequency</th>
<th>Reason for medication</th>
<th>Prescribing Doctor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example &gt;&gt; 1)</td>
<td>Lisinopril 10mg oral tablet</td>
<td>1 orally once daily</td>
<td>Hypertension</td>
<td>Dr. Smith</td>
</tr>
<tr>
<td>2)</td>
<td></td>
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<tr>
<td>10)</td>
<td></td>
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</tr>
</tbody>
</table>

Medication Allergies:  □ Yes  □ No

Allergic to

Reaction:

Pharmacy Info:

Name

Address  Phone
Importance of Having a support person

It is important that you choose a family member or friend to be your support person. Support persons are people who help you throughout this journey. It should be someone who can assist with your daily activities in the immediate post-operative period and when you return home. A support person will be needed to drive you to appointments or therapy sessions until you are cleared by your surgeon.

We believe patients respond well to the assistance of their support person. Their encouragement and support will help you progress during recovery. If you live alone, consider having a friend or family member stay with you for the first few nights.

Please identify here who you can rely on after surgery and note their phone number for your convenience:

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone</th>
</tr>
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</table>
Optimizing Surgical Recovery

**Tobacco**

**STOP smoking at least four to six (4-6) weeks BEFORE surgery or when your surgery is scheduled.**

**Refrain from smoking six (6) weeks AFTER surgery.** Nicotine hinders the healing process and the bone needs time to heal and to grow on the new implant. Smoking increases your risk for developing an infection after surgery. Check with your surgeon or your personal physician if you are using medication to help you quit smoking such as a nicotine patch or gum. Call 860.892.6900 to find out when the next available “Freedom from Smoking” session is being held. Please be aware that smoking is prohibited anywhere in the hospital and on the hospital campus.

**Alcohol**

**NO alcohol 2 weeks prior to surgery.** Also, please inform your healthcare team of any alcohol intake. Alcohol may interfere with certain medications you will be prescribed. Eliminating the alcohol you consume prior to surgery allows your body to heal better. Additionally, serious harm can result from alcohol withdrawal when not properly managed. Alcohol should be avoided after surgery until further advice from your provider.

**Dental Care**

**If you need dental work (including routine dental cleanings), it is recommended to complete it at least two (2) weeks before surgery.** Although infections in joint replacements are uncommon, infections can occur if bacteria enter the bloodstream somewhere in your body. Therefore, you should arrange to have dental procedures such as extractions or periodontal work completed before surgery. After a joint replacement your surgeon or dentist may want you to take antibiotics before any future dental work. Most surgeons prefer that no dental work be done for three (3) months after surgery (excluding dental emergencies). Please discuss with your surgeon any specific questions you may have regarding dental care.

Oral health is linked to overall health. It is important to brush your teeth and rinse with an antiseptic mouthwash at least two times a day before and after surgery.

**Nutrition**

**Good nutrition is important before surgery.** Eating healthy, well balanced meals, and avoiding any unnecessary weight loss or gain prior to your procedure is recommended. This will help make sure you have the strength for recovery. If you are overweight, losing weight will help reduce the stress on your new joint. For every pound you lose, you reduce the stress on your knee by four pounds.

**Marijuana (Medical or Recreational)**

**Please stop all THC containing products 7 days prior to surgery unless instructed by your doctor.** CBD topical products- do not use after your pre-surgical shower. Medical marijuana cannot be used during your time at the hospital. Do not use medical marijuana at the same time as prescription pain medication unless instructed to do so by your doctor.

**Exercise**

**Keeping your muscles toned will help you to recover faster after surgery.** Be sure to follow the exercise program you have been given by your doctor. Since you will be having a surgery that affects your legs it is important to strengthen your upper body and core to improve your ability to move after surgery.
Medications

At your medical clearance, you will be told when to stop taking certain medications. Examples of medications and supplements you should stop taking are:

- Blood thinner like Coumadin, Lovenox, Pradaxa, Plavix, Xarelto, and Eliquis
- NSAIDS like Aleve, Motrin, etc.
- Aspirin
- Fish Oil, Flax, Vitamin E.

At your medical clearance, you may be told to take additional medication.

Your doctor or APRN may advise you to take iron (Ferrous Sulfate) and Folic Acid for at least four weeks prior to surgery and two weeks after. This may boost the minerals needed for new blood productions by your body. A stool softener, such as Colace, may be required daily. Consult your physician for the type of iron and appropriate dose of vitamin supplements and stool softeners. You will be given medication for five days should you test positive for Methicillinresistant Staphylococcus aureus (MRSA). This is done in abundance of precaution.

At your medical clearance, please be honest about your tobacco, drug and alcohol use.

It is important for your surgical team to know the truth about your tobacco, drug and alcohol use as it can impact your anesthesia, pain management, and recovery. Drug abuse and excessive use of prescription pain medications can make it difficult to manage your pain after surgery.
Home Planning and Preparation

It is a good idea to prepare your home for your hospital discharge BEFORE you go to the hospital.

The following is a list of suggested items that may be recommended to help you during your surgical recovery.

- Check with your insurance plan to verify which items are covered.
- You may find these items at medical supply companies or some stores like Wal-Mart or online (Amazon). Many town senior centers have DME lending programs.
- Below are examples of common devices that your provider may or may not prescribe you.

<table>
<thead>
<tr>
<th>Durable Medical Equipment (DME)</th>
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<tbody>
<tr>
<td><strong>Total Hip Needs:</strong></td>
</tr>
<tr>
<td>Walker w/2 wheels</td>
</tr>
<tr>
<td>Toilet seat riser</td>
</tr>
<tr>
<td>Cane</td>
</tr>
<tr>
<td><strong>Total Knee Needs:</strong></td>
</tr>
<tr>
<td>Walker w/2 wheels</td>
</tr>
<tr>
<td>Cane</td>
</tr>
<tr>
<td><strong>Recommended/Options Items</strong></td>
</tr>
<tr>
<td>3-in-1 commode</td>
</tr>
<tr>
<td>Long-handled reacher/grabber</td>
</tr>
<tr>
<td>Long-handled shoehorn</td>
</tr>
<tr>
<td>Elastic shoelaces</td>
</tr>
<tr>
<td>Sock aid</td>
</tr>
<tr>
<td>Shower chair</td>
</tr>
<tr>
<td>Long-handled bath sponge</td>
</tr>
<tr>
<td>Hand-held shower head</td>
</tr>
<tr>
<td>Permanent (installed) Grab bar for shower/tub</td>
</tr>
<tr>
<td>No suction cup grab bars</td>
</tr>
</tbody>
</table>
Preparing Your Home Before Surgery

It’s important that you or someone in your family makes sure the house is ready for your return home after joint replacement surgery. Your safety and comfort is of upmost importance for your recovery. You should:

- **Ask for help.** Plan to have a family member or friend stay with you for the first two to seven days after you return home.
- **Make needed modifications and check with your insurance plans.** You may need to install grab bars in the bathroom or railings to the entrance of your house or the stairs inside your home. Some changes to your home may be covered.
- **Put things in reach.** Make sure items that you use often are at arm level so you don’t have to bend or reach high to get them.
- **Rearrange furniture.** You need room to move with a walker.
- **Remove tripping hazards.** Tidy and remove clutter. Ensure throw rugs are removed and electrical cords do not obstruct hallways and walkthroughs.
- **Create a command center.** Arrange a sitting area with a nearby table that enables easy access to things you often use like the phone, television remote, water, reading materials and medications.
- **Get a good chair.** It should have a firm seat that is high enough so your knees stay lower than your hips. Make sure it has armrests that you can push on as you get up.
- **Use a footstool.** Elevating your surgical leg straight out in front of you when you sit will help control swelling and pain.
- **Choose loose fitting clothes.** Movement is important after surgery and loose clothes won’t restrict you or rub your incision.
- **Check your bathroom size.** Ensure that you can move in the bathroom with your walker with two wheels. You may need to get a bedside commode if the walker does not fit in the bathroom.
- **Decide where you will sleep.** Initially after surgery, you may want to consider setting up a temporary bed on the first floor if you cannot do the stairs at first. You should have access to a bathroom or bedside commode on the same floor where you sleep.
Post-Hospital Plan
Your post-hospital plan will be discussed during your PATC visit or with your surgeon prior to your hospital admission.

• Your nurse case coordinator or social worker will provide you with a list of choices for you to select a home health care agency.

• We have a network of preferred providers that collaborate with Backus Hospital to provide seamless orthopedic aftercare.

Discharge Transportation
Transportation options include:

• Family member or friend

• A wheelchair van can be arranged by a nurse case coordinator, however, it is not typically covered by insurance and may require an out of pocket cost.

On rare occasions, you may be transferred to a preferred provider Skilled Nursing Facility (SNF) post discharge. Transportation to a SNF can be by a family member or friend or via wheelchair van (not typically covered by insurance) or ambulance (only paid for by insurance with a certificate of medical need).

Discharge Information
Our goal is for patients to be ready for a safe transition home by 11 am the day after their surgery. This targeted time line is also individualized based on patient circumstances. All patients must meet their individual physical therapy safety goals and be medically cleared by their medical or surgical team before transitioning home.
Your Surgical Experience  The Day Before Your Surgery

Surgical Time Line

Please call Same Day Surgery between the hours of 1 pm and 4 pm one business day before surgery to receive your surgical time and when to report to the hospital. If your surgery is scheduled on a Monday or after a holiday, please call 1 business day before your scheduled surgery. The phone number to call for your time of arrival is 860.889.8331 extension 6376. A team member from Same Day Surgery may call you in the event the schedule is ready early.

The NIGHT BEFORE your surgery you will shower and do the following:

• Nail polish and acrylic (non-natural) nails must be removed prior to surgery.
• Follow instructions on next page for CHG Cloths use.

Wait at least one hour after you shower or bathe, than use the six (6) CHG clothes provided and follow the instructions on the next page for CHG Cloths use.

To decrease your risk of infection, please do not allow pets to sleep on or in the bed with you.

The MORNING OF your surgery you will shower and do the following:

• Brush your teeth and rinse with an antiseptic mouthwash.
• You may wash your hair with your normal shampoo and conditioner.
• Rinse off and dry off with a CLEAN towel.
• DO NOT shave your body with a razor before surgery.
• DO NOT use any powders, lotions, oils, deodorants, make-up or hair products after this shower.
  Report any rashes, cuts or abrasions to your surgeon.
• Wear clean comfortable clothes to the hospital.
Instructions for Surgery Preparation with CHG Cloths

Cleaning your body with Chlorhexidine Gluconate (CHG) wipes before surgery reduces the number of bacteria on your skin and helps prevent infection.

The night before surgery shower with your normal soap and shampoo your hair.

1. Use a clean towel and washcloth.
2. Do not shave any part of your body except your face.
3. Brush your teeth and rinse with an antiseptic mouthwash.
4. **DO NOT** apply any lotions, creams, powders, or deodorants.
5. Wait at least one hour after you shower or bathe, then use the six (6) CHG cloths provided in the order shown on the diagram below.
   - Gently wipe back and forth over each area for about 15 seconds.
   - **Avoid contact with your eyes, nose, ears, private or rectal areas.**
   - **DO NOT** use on skin with cuts or open sores. Report open skin to surgeon.
   - Dispose of cloths in trash.
   - Sleep on clean sheets with clean pajamas.

CLOTH 1: Wipe your neck and chest. **DO NOT** use on your face.
CLOTH 2: Wipe both arms, starting each with the shoulder and ending at the fingertips. **Be sure to thoroughly wipe the armpits.**
CLOTH 3: Wipe your abdomen and hips, followed by your groin. Be sure to wipe the folds in the abdominal and groin areas. **DO NOT** wipe the genital area.
CLOTH 4: Wipe your right leg and foot, starting at the thigh and ending at the toes. Be sure to thoroughly wipe behind your knee.
CLOTH 5: Wipe the left leg and foot in the same way as the right leg.
CLOTH 6: Wipe your back starting at the base of your neck and ending at your waist. You might need someone to help you. last, wipe the buttocks.

Please tell your surgeon if you have any of these following problems and **DO NOT** Use CHG wipes:
- Have an allergy to CHG
- Are receiving radiation therapy
- Currently have severe skin breakdown, rash or burn
- Are receiving thiotepa (Chemotherapy Drug)
**Enhanced Recovery After Surgery**

Enhanced Recovery after Surgery (ERAS) is a pathway to help you prepare for surgery and help you recover quicker after your operation. ERAS aims to keep things as normal for you as possible before, during and after your surgery.

**Focus on Your Recovery**

The program focuses on making sure you are an active participant in your surgery and recovery, along with the care team made up of surgeons, nurse practitioners (APRN), physician assistants (PA), nurses, patient care technicians, anesthesiologist, nurse anesthetist (CRNA), surgical technologists, physical and occupational therapists, dieticians, social services, case management and environmental services. Your care team will work closely together with you to ensure you have a safe and comfortable experience.

**Goals of Enhanced Recovery**

Reduce surgical stress on your body by optimizing your care and recovery. Studies have shown that patients who participate in their recovery heal faster and get back to their lives sooner. ERAS aims to:

- Minimize pain with the use of non-narcotic medications
- Improve outcomes from your surgery
- Reduce complications like post-operative nausea and vomiting and dizziness from low blood pressure and dehydration
- Allow for earlier return of eating of food and activity
- Reduce the length of time during your hospital stay
- Return to your baseline health and normal daily activities
**The Day Before and the Day of Surgery**

In the 48 hours before your surgery, there are some specific steps you must take. It is important that you follow these simple steps.

**Pre-Op Call**
An associate from the Backus Hospital will call you the day before your surgery, usually between 1 and 4 p.m., to tell you what time to arrive at the hospital and to go over a few things with you. If your surgery is scheduled for Monday or the Tuesday after a holiday, the nurse will call you on the Friday before your surgery is scheduled.

**The NIGHT BEFORE surgery:**
- **DO NOT** eat solid food or milk products after midnight.
- Drink your usual amount of clear liquids throughout the evening and night.
- Please avoid beverages that contain alcohol, carbonation or those with pulp.
- Take only the medication you were instructed to take at your medical clearance appointment.
- Shower as instructed.

**The MORNING OF surgery:**

**Non-Diabetic Patients:**
- Drink your usual amount of clear liquids the morning of your surgery.
- 2 hours before arrival to the hospital drink 16oz of Gatorade or apple juice.
  *This is the last liquid you can drink before surgery*
- Shower as instructed
- Take only the medication you were instructed to take at your medical clearance appointment.

**Diabetic Patients:**
- Drink your usual amount of clear liquids the morning of your surgery.
- 2 hours before arrival to the hospital drink 16oz of water, Gatorade Zero or Powerade Zero. Please do not drink more than 16 oz. of fluids.
  *This is the last liquid you can drink before surgery*
What to Bring

- Two forms of identification
  - Picture Identification (Drivers License)
  - Insurance Cards
  - Payment card

- Cane or walker (if needed to walk into the hospital the day of surgery)

- Eyeglasses, Hearing Aids, Dentures (& cases)

- CPAP/BiPAP Mask & Machine and tubing for patients with Sleep Apnea

- Clothing/Footwear
  - Loose fitting clothing (sweatpants or gym shorts)
  - Slip resistance shoes (rubber soles) with backs; any specialized footwear (orthotics/diabetic shoes);
    - NO sandals, flip-flops, crocs or open back shoes.

- Toiletries (toothbrush, tooth paste, comb, etc.)

- Important telephone numbers

- Books, magazines, or items to pass the time

- Cell phone and charger

DO NOT Bring

Money

Valuables
Meet Your Team

**Surgeon:** The surgeon is the doctor who is responsible for evaluating the need for surgery and performing the surgery itself. They will manage your orthopedic care during your hospitalization and in the office.

**Hospitalists:** Hospitalists are internal medicine physicians, or nurse practitioners who specialize in seeing patients only in the hospital. Hospitalists have the same training as other internal medicine doctors including medical school, residency training, and board certifications. A hospitalist may be included to assist in managing any medical concerns during your hospital stay.

**Physician Assistants (PAs):** These are healthcare professionals who practice under the supervision of a physician. When your surgeon is not available for immediate hands-on care, the PA will round daily on patients to assist with medication adjustments, dressing changes, and test-result monitoring. They will communicate with the orthopedists on patient care needs.

**Anesthesia Team:** This team is responsible for safely administering and monitoring anesthesia during surgery and in the recovery room. They will monitor you during your postoperative care for any issues related to anesthesia. The anesthesia team also includes APRNs.

**Nurses:** Nurses are essential to care in the recovery of all patients after surgery in both the recovery room same day surgery and on the orthopedic floor after surgery. They have expertise in the care of orthopedic patients.

**Patient Care Technician:** Under the direction of a licensed nurse, the patient care technician performs vital sign monitoring and provides bathing and toileting assistance.

**Physical Therapists/Occupational Therapists:** Physical Therapists are trained to teach patients and families how to walk and exercise after surgery to regain mobility and improve overall physical strength and ability. Occupational Therapists work with you to ensure you can accomplish daily activities like bathing and dressing with any physical limitations during the recovery process. Both will ensure you follow any activity precautions you may have as directed by your surgeon.

**Case Management:** These are licensed staff that assist in the planning, coordination, and monitoring of medical services for the patient with emphasis on quality of care, continuity of services and cost effectiveness.

**Orthopedic Nurse Navigators:** Our orthopedic nurse navigators will be in contact with you prior to surgery, throughout the process, and then after your surgical procedure. Your navigator is there as a resource for you; please do not hesitate to call with any questions before, during or after your hospital stay.
It’s Surgery Time

Arrival
Arrive at the hospital on time. When you speak with the Backus Hospital clinical team member the day before your surgery, they will let you know when to arrive on the day of your surgery. Our team is ready to make sure you’re comfortable and well-informed throughout the entire process.

Upon Arrival
• You will enter the hospital through the Emergency Care Entrance. Please proceed to the purple elevators on the left and go up to the 1st floor. You will check in at the Same Day Surgery (SDS) registration desk and a member of the healthcare team will bring you to the SDS care area to change into a hospital gown. Your clothing and personal belongings will be safely stored. Reminder: Please leave all valuables at home.
• Your support person may be asked to wait in the waiting room while the nurse prepares you for surgery.
• Your preoperative team member will ask questions, take vital signs, perform a physical assessment and start your intravenous (IV) that will be used to administer fluids and medications.
• Only one (1) support person will be allowed to join you in the pre-operative area while you wait to go to surgery but that individual must be at least 18 years old.
• Your surgical site will be identified and marked prior to your surgery.
• Communicate to your surgeon who you have designated to be your advocate after surgery and how to reach that person. With your permission, the provider will contact your support person with updates.

Anesthesia
There are several choices of anesthetic techniques that may be chosen for total joint replacement surgery. You and your anesthesiologist will discuss all necessary factors prior to surgery and agree upon a plan for your anesthetic. You will be closely monitored by your anesthesia team throughout your entire surgery.

General Anesthesia
• This type of anesthesia affects the whole body and you are completely unaware of your surroundings.
• This type of anesthesia requires a breathing tube to be inserted to support your breathing.

Regional Anesthesia
• This is a technique that will anesthetize a particular area or region of the body. You will not be awake during surgery.

Duration of Surgery
Your surgery will last approximately 1-3 hours.
After Surgery Your Hospital Stay

Recovery – Post Anesthesia Care Unit (PACU):
The Post-Anesthesia Care Unit is also referred to as PACU.

- After your surgery you will be brought to the PACU in a hospital bed, where you will be closely monitored as anesthesia wears off. The anesthesia staff and nurses will monitor your vital signs like blood pressure, pulse, breathing and temperature; and manage your pain. These staff members will monitor any other issue that may arise.

- Patients having a total knee replacement may have a nerve block. Your surgeon will discuss with you if a nerve block is a part of your pain management plan.

- During this time, you may also have a physical therapist work with you for the first time.

- The length of stay in the PACU will be determined by many factors including the type of procedure and the nature of the anesthetic used. You may be in the PACU between 1-2 hours.

Transfer to your Hospital Room
You will be transferred to your assigned medical-surgical orthopedic room which is when your support person is encouraged to visit. Our goal is to have you up and walking within 4 (four) hours of the PACU. The physical therapists and nursing staff will help get you out of bed.

You will have a bandage over the surgical incision, and the intravenous catheter in your arm will still be in place to administer fluids and medications post-operatively. Your care team will monitor your progress throughout your hospital stay to ensure a safe and speedy recovery. They will continue to check your vital signs, manage your pain and change the dressings that cover your incision if needed.

Transfer to Same Day Surgery
If you will be heading home on the day of surgery, you will be transferred to Same Day Surgery from the recovery room. Here your support person is able to join you. Our goal is to have you up and walking within four (4) hours of PACU. The physical therapists and nursing staff will help get you out of bed. They will assist you in getting ready to go home. A beverage and possibly something light to eat will be offered. Discharge instructions will be reviewed with you and your support person. You will also receive a printed copy.
Pain Management: Keeping You Comfortable

You will experience pain following surgery. However, we will work with you to help manage your pain appropriately. If you are in pain or have discomfort, please tell us. We want to help you to feel comfortable. Good pain control is a partnership between you and your caregivers. Managing your pain will help you recover more quickly.

Our Goals

- Develop a pain relief plan
- Decrease pain to a level that is tolerable
- Determine if pain medication is needed and the appropriate amount
- Develop a plan to transition you off of narcotic pain medication

Pain Assessment

- To help us minimize your pain after surgery you will be asked to rate the intensity and type of your pain through the use of a pain scale of 0-10.
- 0 is no pain, 10 is excruciating pain
- Knowing that after surgery 0 is not realistic, a score between 4-5 is an attainable and acceptable score for most patients.
- It is best if you take the pain medication when your pain level starts to rise. DO NOT allow your pain to get severe. If you maintain pain control, it takes less medication and less time to manage the pain.
- Some of the best non-medication pain management techniques include deep breathing, listening to music/distraction, and using ice near the incision.

Pain Scale (0-10)

<table>
<thead>
<tr>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Pain is present but does not limit activity</td>
</tr>
<tr>
<td>1-2</td>
<td>Can do most activities with rest periods</td>
</tr>
<tr>
<td>3-4</td>
<td>Unable to do some activities because of pain</td>
</tr>
<tr>
<td>5-6</td>
<td>Unable to do most activities because of pain</td>
</tr>
<tr>
<td>7-8</td>
<td>Unable to do any activities because of pain</td>
</tr>
<tr>
<td>9-10</td>
<td></td>
</tr>
</tbody>
</table>
What to Do When You are in Pain

- Your nurse will assess you to be sure your pain relief plan is working before and after an intervention for pain (such as pain medicine or an ice pack).
- Please let your nurse know what your own “comfort-function goal” is – the number where you feel comfortable enough to function.
- When you feel pain or an increase in pain, please notify your nurse.

Pain Relief Plan Options

<table>
<thead>
<tr>
<th>Pain Management</th>
<th>Integrative Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ice</td>
<td>Healing Touch</td>
</tr>
<tr>
<td>Assisted Mobility</td>
<td>Massage Therapy</td>
</tr>
<tr>
<td>Pain Medication</td>
<td>Music Therapy</td>
</tr>
<tr>
<td></td>
<td>Meditation</td>
</tr>
<tr>
<td></td>
<td>Movies/Audio Books</td>
</tr>
</tbody>
</table>

Please tell your nurse if you have any side effects from pain medicine like nausea, itching, constipation or drowsiness.

Integrative Medicine

Integrative medicine, which offers compassionate care to heal the mind, body and spirit, integrates alternative/complementary therapies into Western medical practice. Integrative medicine at Backus Hospital provides pain management and relaxation without the use of medications to improve care and healing.

Benefits of Integrative Medicine

- Pain reduction
- Relaxation and stress reduction
- Relief of muscle spasm and soreness
- Improved range of motion and flexibility
- Improved sleep and digestion
- Increased circulation and tissue healing
- A general sense of well-being

You may find an intervention such as healing touch beneficial. Ask a clinical team member for more information.
**Diet Information**
Inform your nurse of any dietary restrictions and food allergies or intolerances.

**Breathing Exercises**
Breathing exercises are an important part of your recovery. After your surgery, you will be encouraged to perform simple lung exercises like deep breathing and coughing.

**Incentive Spirometer**
You will be given a device known as an Incentive Spirometer. A member of your care team will instruct you on how to use this device. It is best to use it 10 times every hour when awake for the first few days after surgery, even at home. This will help to fully expand your lungs by breathing deeply and will prevent fluid collection, pneumonia and fevers.

**Preventing Blood Clots**

**Deep Venous Thrombosis (DVT)** blood clot in a vein. The biggest danger is a clot that breaks off and travels to the lungs. This is called a Pulmonary Embolism (PE) and it can be life-threatening.

- Here are some of the signs of a blood clot:
  - DVT (clot in an arm or leg) – pain, swelling, warmth, numbness/tingling
  - PE (clot in the lungs) – difficulty breathing, chest pain, fast heart rate

- Walking is the key to blood clot prevention.
- Avoid sitting or lying in one position for long periods of time.
- It’s important to get up and walk every hour to help prevent blood clots.

**Sequential Compression Device**
Also known as pneumatic compression stockings or “pneumo-boots” or venodyne stockings inflate and deflate automatically via a pump at the end of the bed while you are in the hospital. They assist in the prevention of blood clots by squeezing your calves to help the blood in your legs continue circulating throughout your body. They are worn while you are in bed or sitting in a chair until you are walking frequently.

**Blood Clot Prevention**
Prevention of blood clotting is extremely important after joint replacement. Different medications are used for anticoagulation.

- Medication may be injected or taken by mouth, depending on the type of anticoagulation your surgeon orders.
- If you are on anticoagulation medication during your hospital stay, your surgeon will prescribe this medication or a substitute (such as aspirin), upon transition home.
- **DO NOT** stop taking your anticoagulation medication until directed by your doctor.
Length of Stay for Total Joint Procedures
Your hospital stay will most likely be same-day surgery or one overnight stay.

Mobility

Mobility is Medicine

- Research has shown that early movement following surgery can decrease complications and help with decreasing pain.
- Expect that you will be moving (getting in and out of bed, going to bathroom, transferring to a chair) the same day of your surgery.

<table>
<thead>
<tr>
<th>Mobility Includes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transfers (includes car transfer training)</td>
</tr>
<tr>
<td>Toileting</td>
</tr>
<tr>
<td>Stair training</td>
</tr>
<tr>
<td>Walking with an assisted device (cane or walker)</td>
</tr>
</tbody>
</table>

Getting Started

- Mobility will begin on the same day as surgery with a goal of 4 (hours) from the PACU.
- You will receive a Physical Therapy evaluation and a customized therapy program.
- You may attend a Group Physical Therapy Class that allows the physical therapist to work with you individually and alongside other patients. The Group Physical Therapy Class allows you to visit with other patients and to help encourage each other to get back to the activities you love.
- **DO NOT** get out of bed without the assistance of a healthcare team member for toileting or transfers to and from a chair.
- It is best to take your pain medication **PRIOR** to your physical therapy session to allow better participation.
Transitioning Home

Post-Hospital Plan

Your post-hospital recovery begins the day you are discharged from the hospital and go home. For the first two weeks following surgery, you will have a therapist team member come to your home. They will develop a therapy plan individualized for you. Regular exercise is an important part of restoring your normal joint motion and strength. This plays a key role in returning you to your normal everyday activities. Your surgeon and therapist will develop a plan that is best for you. Your total recovery period is about one year in which you will have many follow-up visits with your doctor and therapists. Remember to ask lots of questions along the way and to stay on track with your exercise and diet regimen.

Care for Your Incision

Monitoring for signs and symptoms of infection is very important. Our nursing team will educate you on proper incision site care. We pride ourselves on having low infection rates. Your surgical incision may be closed using sutures or staples. These will be removed in your surgeon’s office about 2 (two) weeks after your surgery. Taking appropriate care of your wound helps to prevent infection. You can help by following these simple steps:

- **Keep the area clean and dry**
  A dressing will be applied to the incision in the hospital and should be changed per your surgeon’s instructions. How to do this and how often will be explained to you before you go home. If you are not sure how to do this, ask your surgeon or nurse. Your incision should remain dry and covered until your follow up visit in 2 weeks when the staples or sutures are removed.

- **Watch for changes**
  Immediately notify your surgeon if the wound has redness that is spreading, appears more warm, or begins to drain liquid. Remember that some swelling is expected for the first 3 (three) to 6 (six) months after surgery.

Infection Prevention

The most important thing you can do to prevent infection is to wash your hands thoroughly with soap and water or use an alcohol-based hand cleanser frequently and before changing the dressing over your incision. Be very careful handling your pets until your incision is healed. Wash your hands after touching your pets to prevent infection. Support your body’s ability to fight infection by eating a healthy diet and drinking plenty of healthy fluids like water. Contact your primary care physician if you think you may have an infection elsewhere.

Dressings

Follow the surgeons instructions regarding your dressing.
Showering/Bathing

- You may shower following your surgeons instructions. When you are able to shower, DO NOT rub the incision.
- NO tub baths, hot tubs, spas, or pools until your surgeon has confirmed your wound has healed enough to do so.
- Cover the dressing with a protective wrap while showering until told the incision can get wet by your surgeon.
- You may shower with your Aquacel dressing on but do NOT remove dressing.

Exercise

Please follow the exercise plan that your surgeon and therapist have established for you. Your recovery process and continued health depends on good nutrition, rest and proper exercise. Most joint replacement patients experience a dramatic reduction in joint pain and significant ability to participate in the activities of daily living within 2(two)-3(three) weeks after surgery.

- Recovery takes time. Expect to feel a bit more tired than usual for the first few weeks. Allow yourself plenty of time to regain your strength and self-confidence. Stay active-just don't overdo it.
- Monitor your own health on a daily basis to ensure your recovery is continuing as planned. You are the best person to notice changes in your body and should inform your doctors if needed.

Ice Therapy

- Begin using an ice machine or ice pack immediately after surgery. Icing is very important for the first 7 days after surgery. Apply the ice therapy while awake during the day.
- Care must be taken with icing to avoid frost bite to the skin. Do NOT apply ice directly to the skin. DO NOT apply ice at night.

Diet

- Anesthetic drugs used during surgery may cause nausea for the first 24 hours. If you have nausea drink only clear liquids and eat only light foods (Jell-O, soups, dry crackers, toast). You may have been given a prescription medication for nausea (Zofran). If so, you may take that medication as directed.
- If you are not nauseated, you can eat your normal food as tolerated.

Constipation

- To avoid constipation, drink water 64 oz per day unless you have a fluid restriction. Eat foods with a high fiber content such as beans, broccoli, carrots, celery, fruits (apples, blueberries, prunes, dates, pears, citrus), oatmeal, whole grains, and nuts.
- You were prescribed Senokot to prevent constipation. Take it as directed.
- Take Miralax or generic brand of Miralax over the counter if you do not have a bowel movement by four (4) pm every day.
Nutrition Guidelines

After your procedure you may experience constipation. Fluid and fiber have been the foundation for treatment of constipation. You should gradually increase your fiber and fluid intake over the course of your recovery.

How Much Fiber Do I Need

Men

30–38 grams per day

Women

20–25 grams per day

Fluid Needs

When increasing your fiber intake you must also increase your fluid intake! Otherwise it could potentially make your symptoms worse. Many people will want some more variety in their fluids instead of plain water. If a beverage contains flavoring it may cause you to drink more. Try the list below to increase your fluids daily:

Fluids Other Than Water

Smoothies

Non-calorie additives (ex. Crystal Light, Hint, Bai etc.)

Low calorie Sports Drinks (<50 calories /serving)

Electrolyte Beverages (Propel, NUUN tablets, etc.)

Fruit Infused Water

It is recommend to keep a water bottle with you most of the time, so that you will drink more fluids. Remember the old saying: “out of sight out of mind” that holds true for fluid intake too.

Nutrition Facts

4 servings per container

Serving size 1 cup (180g)

Amount per serving

Calories 245

% Daily Value*

Total Fat 12g 14%

Saturated Fat 2g 10%

Trans Fat 0g

Cholesterol 8mg 3%

Sodium 210mg 9%

Total Carbohydrate 34g 12%

Dietary Fiber 7g 25%

Total Sugars 5g

Includes 4g Added Sugars 8%

Protein 1g

Vitamin D 4mcg 20%

Calcium 210mg 16%

Iron 4mg 22%

Potassium 380mg 8%

*The % Daily Value (DV) tells you how much a nutrient in a serving of food contributes to a daily diet. 2,000 calories a day is used for general nutrition advice.
Foods with Fiber

Here is a list of variety of foods with fiber. When in doubt look at the nutrition facts label to see how much fiber is in each product. We are aiming for at least 3-5 grams of fiber per serving. Pick and choose from the list below to meet your fiber needs!

### Food Items with at Least 4 Grams of Fiber

<table>
<thead>
<tr>
<th>Grains</th>
<th>Fruits</th>
<th>Vegetables</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/3 to 1/2 cup of high fiber cereal</td>
<td>1/2 cup blackberries/</td>
<td>1 artichoke</td>
<td>1/2 cup cooked beans</td>
</tr>
<tr>
<td>(check nutrition facts)</td>
<td>raspberries 1/2 cup dry oats</td>
<td>(cooked)</td>
<td>(lima, kidney, black, etc.)</td>
</tr>
<tr>
<td>1/2 cup dry oats</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(makes 1 cup cooked)</td>
<td>4 dried prunes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Food Items with at Least 3 Grams of Fiber

<table>
<thead>
<tr>
<th>Grains</th>
<th>Fruits</th>
<th>Vegetables</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 slice of whole wheat bread</td>
<td>1 apple</td>
<td>1/2 cup beets</td>
<td>2 Tablespoons almond/</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(diced/canned)</td>
<td>peanuts / walnuts</td>
</tr>
<tr>
<td>4 whole wheat crackers</td>
<td>1/2 cup apricots</td>
<td>1/2 cup broccoli,</td>
<td>1 cup plain popcorn</td>
</tr>
<tr>
<td>1 whole wheat English muffin</td>
<td>1 banana</td>
<td>brussel sprouts or</td>
<td>cooked</td>
</tr>
<tr>
<td></td>
<td></td>
<td>cabbage (cooked)</td>
<td></td>
</tr>
<tr>
<td>1 TBSP of rice/bran/wheat cereal</td>
<td>1/2 cup of cherries</td>
<td>1/2 cup carrots</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1/2 cup cauliflower</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1/2 cup of corn</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1/2 cup sweet potatoes or</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>yams</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1/2 cup tomatoes</td>
<td>2 TBSP Ground Flaxseed</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(cooked)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>1/2 cup canned</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>pumpkin</td>
<td></td>
</tr>
</tbody>
</table>
Medication Instructions

- Take all medication as prescribed by your surgeon.
- Some patients are discharged home with a prescription for injections to prevent blood clots. It is important that you or a family member learn how to perform these injections before leaving the hospital. Home care will not come to your home every day for every dose. You must learn how to perform these injections.
- Remind your provider of any medications you were on before your surgery that were not prescribed for you after your surgery.
- Remember to check with your surgeon before you begin taking any over-the-counter medications, herbal remedies, or supplements.
- Please get all of your medications filled at the same pharmacy so your pharmacist can properly identify harmful medication interactions. Ask your pharmacist questions you may have regarding your medications and associated side effects.

Other Important Information

- Swelling is common after total joint surgery. Elevation, ice and motion are helpful in decreasing the swelling. You should elevate your ankles above your heart during the day to decrease swelling. If swelling persists, call your surgeon.
- It is important that you inform your dentist you have had a total joint replacement, as you may need prophylactic antibiotics prior to having your teeth cleaned or other dental procedures.
- If you have any surgical procedures following your total joint replacement, inform the physician that you have an implant.

Don’t Forget

- It is important that you fully understand your transitional care plan to ensure your continued healing, safety, and comfort. You will receive these instructions in writing before you leave the hospital.
- Before you leave the hospital ask questions about all of your medications and be sure you know what medications are being prescribed, the proper dosage, how and when to take the medication, and possible side effects.
- Be informed about your health condition (ask the care team if you do not understand any information shared with you) and what you can do to help facilitate your recovery.
- **NO driving** while on narcotic pain medication and return to driving will be decided by your surgeon.

Your instructions may include your follow-up appointments with your orthopedic surgeon and/or other specialists or your primary care physician. If you do not have a follow-up appointment with your surgeon, please make one as soon as you return home.
Follow-up Phone Call
Your health and recovery is very important to your care team. Our nurse navigator will personally call you a few days after your transition home. We want to answer any questions or concerns.

Home Care Services
- Will conduct a home visit within 24 hours of discharge.
- Provide therapy on weekdays and weekends

Medicare and most private insurers will pay for physical therapy in your home when you initially get discharged from the hospital.

You will be made aware of the scope and frequency of services your insurance has authorized for your homecare provider. Most insurers will initially allow for 2-3 visits a week of rehabilitation services, but your specific plan will be discussed with you upon initiation of your home care services.

While you have a choice for home care agencies, Hartford Healthcare at Home is an affiliate of Harford Healthcare and works collaboratively with the Backus Hospital team.
Rehabilitation at Home

Focus of Rehabilitation:
1. Strength
2. Functional mobility
3. Achieving your goals of recovery

What to Expect
- A phone call from your home care agency to schedule times of visits EITHER the same day as discharge from the hospital or the following morning
- An initial visit (by a Physical Therapist) to assure full assessment of safety, medical and functional status
- Home care services will be for 2 weeks
- Transition to outpatient rehabilitation after the 2 week follow up visit at the surgeons office

What You Need
- Additional support at home to assist with activities
- Your medication, equipment, insurance information and support person available (in person or by phone) especially on initial visits
- Transportation to get to appointments
- Dedication to your rehabilitation
- Goal for your recovery

Dedicate Yourself to Your Rehabilitation
- Get dressed
- Get moving
- Be diligent about your home exercises
- Be part of your care plan and partner with your care team
Hip Precautions

Following Total Hip Replacement

• **DO NOT** cross your legs at the knees for at least 6 weeks
• **DO NOT** bring your knee up higher than your hip
• **DO NOT** lean forward while sitting or as you sit down
• **DO NOT** try to pick up something on the floor while you are sitting
• **DO NOT** turn your feet excessively inward or outward when bending down
• **DO NOT** reach down to pull up blankets when lying in bed
• **DO NOT** bend at the waist beyond 90°
• **DO NOT** stand pigeon-toed
• **DO NOT** kneel on the knee of the non-operated leg (the good side)
• **DO NOT** use pain as a guide for what you may or may not do

**DO NOT** bend your operated hip beyond a 90° angle.

**DO NOT** turn your operated leg inward in a pigeon-toed position.

**DO NOT** cross your operated leg or ankle.
Preparing for Surgery Checklist

To Complete Before Surgery

Our program will help you gather and complete the necessary information required prior to surgery. This includes:

1. **Pre-Admission Testing Center** (within 30 days of surgery)
   - History & Physical
   - Lab/blood work
   - EKG

2. **Specialist Clearance** (If you currently see a specialist)
   - Cardiologist (Heart)
   - Pulmonologist (Lung)
   - Endocrinologist (Diabetes)

3. **Important Paperwork**
   - Medication Reconciliation (Please have your medication list ready)
   - Clinical profile/history
   - Anesthesia Questionnaire
   - Surgical Consent Form
   - Insurance Verification

4. **Total Joint Education Class Attendance**
   - Date: / / 

5. **Discharge Planning**
   - Our goal is for you to recover as soon as possible in the comfort of your own home. Your discharge from the hospital will be to go home with home care services. You need to discuss your post-hospital plan with your doctor and support person PRIOR to your surgery.

6. **Going Home**
   - Be sure you have all recommended equipment
   - Arrange for transportation from hospital for transition to home
   - Please have your support person with you to review discharge instructions with your care team.

continued on next page >>
Post-acute Skilled Nursing Facility

- Facilitated by nurse case coordinators and social workers
- Insurance authorization will be needed for a skilled nursing facility. Authorization cannot be obtained until AFTER your surgery and you have been evaluated by physical therapy and your medical team.
- Transportation from hospital on day of discharge

7 Home Planning and Preparation

- **Sleeping arrangements:**
  If your bedroom is upstairs, you may need to set up a temporary sleeping area on the first floor. Stairs are not impossible but are difficult until you have full mobility.

- **Decrease fall risk**
  Remove all throw rugs, loose rugs, electrical cords and clutter from hallways/walking areas. These put you at a risk for falling.

- **Out of reach objects:**
  Check your cabinets for items you routinely use and place them at a level where you will not need to bend or get on a step stool to reach them.
  Prepare an area for supplies you will need, such as a telephone, TV remote control, radio, tissues, medication, reading materials, etc.

- **Safety bars/rails:**
  Install safety bars in the shower and rails for all stairs (inside & outside) as needed.
  **Do not use suction-cup grab bars**

- **Proper hip alignment:**
  Have extra pillows or pads for chairs, sofas, and car seats to elevate the seat to insure proper hip alignment (not greater than 90º).

- **Durable medical equipment (DME):**
  You will need a walker with two wheels in front. No walkers with four wheels as these put you at risk for falls. You will also need a cane. For hips, a “hip kit” will helpful.

- **DME insurance coverage:**
  Verify that your necessary DME is covered by insurance.

- **Pets:**
  Make preparations for pets that may be underfoot.

- **Recovery games and entertainment**
  Consider activities that you will be able to engage in during your recovery such as books, movies, puzzles, etc.

- **Company:**
  Make arrangements to have a support person stay with you once you return home for the first few days.
To Improve My Health Before Surgery:
- I have stopped smoking to help improve my healing and recovery.
- I eat healthy, balanced meals. I have also increased my fluid intake.
- My dental care has been completed prior to surgery.
- My diabetes has been checked and is in control.

What to Bring to the Hospital:
- Two forms of identification (picture ID and insurance cards)
- Eyeglasses, hearing aids, denture cases
- Loose clothing and slip resistant shoes
- CPAP/BiPAP mask, tubing and machine
Hartford HealthCare at Home

Hartford HealthCare at Home (Affiliate of Hartford HealthCare) provides a partner in your quickest and safest recovery, at home.

What should you anticipate?

• A visit or phone call from our transitional care coordinator in the hospital following your surgery to discuss your goals of recovery and plan for transition home.
• Initiation of a home visit within 24 hours of discharge, 7 days a week.
• An initial visit by a Physical Therapist to assure full assessment of safety, medical and functional status
• Collaboration with you and your physician in your goals of care.
• Consultative services available for Hartford HealthCare at Home programs and service lines as desired.
• Discussion of Insurance benefits and copayments required.

You will be made aware of the scope and frequency of services your insurance has authorized for your homecare provider. Most insurers will initially allow for 2-3 days a week of rehabilitation services, but your specific plan will be discussed with you upon initiation of your home care services.

Home care services will be provided, on average for a period of 2 weeks with a transition to outpatient rehabilitation as appropriate. Hartford HealthCare Rehabilitation Network locations will be provided by your homecare therapy team.

Call 1.800.HOMECARE (1.800.466.3227) for more information or to pre-arrange services.
How well are YOU RECOVERING today?

EVERY DAY

Follow your exercise plan Take your medications as prescribed Eat healthy meals

**RED LIGHT – STOP/EMERGENCY**

Go to the ER or call 911 if you have any of the following:

- Difficulty breathing or shortness of breath
- Chest pain
- Localized chest pain with coughing or when taking a deep breath

**YELLOW LIGHT – CAUTION**

Call your surgeon’s office or home care agency if you have any of the following:

- Fever above 101.0°
- Uncontrolled shaking or chills
- Increased redness, heat, drainage or swelling in or around the incision
- Increased pain or significant decrease in motion during activity and at rest
- Increased swelling, pain or tenderness of the thigh, calf, ankle or foot
- Abnormal bleeding or any kind, such as increased bleeding from the incision, nosebleed, etc.
- Blood in the urine

**GREEN LIGHT – ALL IS GOOD**

When your symptoms are under control you experience:

- No difficulty breathing or flu-like symptoms
- No chest pain
- No abnormal bleeding or drainage from incision site
- Slight pain and swelling expected during healing process
Exercise – After Your Joint Replacement

One of the most important ways you can help speed your recovery and increase mobility after your knee or hip replacement is to complete your exercises and to challenge yourself a little bit each day. This booklet will help you strengthen and improve the muscles around your new hip or knee. Typically, you will complete 10 to 15 repetitions of each exercise two to three times each day. While you will be focusing on the leg with the hip or knee replacement, you might want to do the exercises with both legs. Follow all of the precautions outlined here and explained to you by your therapist, and remember to breathe in deep, regular breaths.

Quad Sets
While lying on your back in bed, press your knee into the mattress and tighten your muscle on the top of your thigh. Hold for a count of 5-10 seconds.

Ham Sets
While lying on your back in bed, keep your affected leg bent and the other leg straight. Tighten the muscle on the back of your affected leg. Push the heel down into the bed with the affected leg. Hold for 5 seconds.

Gluteal Sets
While lying on your back in bed, squeeze your buttock muscles together and hold for a count of 5-10 seconds.

Heel Slides
While lying on your back in bed, bend your knee and slide your heel to your buttock. Slide it back out straight. Tie a plastic bag around your foot if it makes the foot easier to slide.

Straight Leg Raises
While lying on your back in bed, tighten your thigh muscles and lift the leg up several inches off the bed. Keep your knee straight and toes pointed up. Hold the leg up for 5-10 seconds and then lower it back onto the bed. Do not continue if this hurts your lower back.

Lying Knee Extension
Lie on your back in bed. Place a towel rolled up or in a ball under the lower part of your thigh. Lift your foot and straighten knee. Do not raise your thigh off the rolled up towel or ball.
**Sitting Knee Extension**
While sitting in a chair with your back against the chair back, straighten your knee and hold for a count of five to 10 seconds. Lower your leg back down to the floor.

**Ankle Pumps**
While sitting in a chair or lying on your back in bed, straighten your knee and slowly push your foot forward and backward. Repeat 20 times with both ankles, every hour while away.

**Heel Raises**
While standing up, hold on to the back of a chair. Raise up on your toes.

**Standing Knee Flexion**
While standing up, hold on to the back of a chair. Bend your knee back behind you. Slowly lower it back to the ground.
**Knee Raises**
While standing up, hold on to the back of a chair. Raise one knee at a time as if marching in place. Do not lift your knee higher than your waist. Hold your knee up for 2-3 seconds. Slowly lower it back to the ground.

**Standing Hip Abduction/Adduction**
While standing up, hold on to the back of a chair. Move one leg out to the side. Keep hip, knee, and foot pointed straight forward. Slowly lower it back down to the ground.

**Standing Hip Extensions**
While standing up, hold on to the back of a chair. Bring your leg backwards as far as you can. Keep your knee straight.

**Mini Squats**
While standing up, place your back against a wall. Slide down the wall until your knees are bent at 30-45 degrees. Slowly raise up to the straight position.
Exercise – After Your Hip Replacement

Preventing Dislocation

Your therapist will work closely with you and teach you precautions about your hip replacement. It is important to keep these precautions in mind as you do the exercises that will help you strengthen the muscles and adjust to your new hip. Follow these precautions until your surgeon indicates that changes in the following activities depicted below are safe.

- **DO NOT** bend forward more than 90 degrees
- **DO NOT** lift your knee higher than your affected hip
- **DO NOT** bring legs together or cross your legs
- **DO NOT** turn your affected leg inward
- **DO NOT** twist your body when standing
- **DO NOT** reach across your affected leg
- **DO NOT** put more weight on your affected leg than instructed

Setting milestones will help you keep track of your improvement and help keep you motivated to move to the next level.

**Hip Recovery Goals Weeks 1-2:**

- Walk with increasing distance and comfort progressing with each day.
- Climb stairs as needed, always using a handrail. Step up with your non-operated leg going up the stairs, and step down with your operative leg going down.
- Straighten your hip completely by lying flat for 30 minutes several times per day.
- Shower and dress by yourself. (with adaptive equipment if you had your hip replaced)
- Gradually resume light home duties with help as needed.

**Hip Recovery Goals Weeks 2-4:**

- Complete any remaining goals for week 1-2.
- Walk greater distances with confidence with or without assistive devices as needed.
- Climb up and go down stairs with greater ease.
- Resume all light home duties with help as needed without bending forward beyond 90 degrees unless cleared by your doctor.
Hip Recovery Goals **Weeks 4-6:**
- Complete any remaining goals from weeks 1-4.
- Walk without an assistive device unless needed for balance and safety.
- Climb up and down stairs – with a rail – from one foot to another in a normal fashion.
- Resume all light home duties by yourself.
- Return to light work duties if approved by your surgeon.

Hip Recovery Goals **Weeks 6-12:**
- Complete any remaining goals from weeks 1-6.
- Walk independently.
- Climb up and down stairs with a rail.
- Resume all home duties, low impact activities, and return to work without restrictions.

**Complete 10 to 12 repetitions of each exercise 2 to 3 times per day working up to 20 repetitions as tolerated.**

**Lying Hip Abduction/Adduction**
While lying on your back in the middle of the bed, slide affected leg out to the side as far as you can. Keep your knee straight and toes pointed up. Slide it back to the center. Tie a plastic bag around your foot if it makes the foot easier to slide.

**Side Lying Hip Abduction**
Place two pillows between your knees and turn to your unaffected side. Tighten the thigh muscle of your affected leg. Lift the leg 8-10 inches up from the pillow.

**Single Leg Step-Up**
While standing on the bottom step, hold on to the stair rail. Slowly lower one leg to the floor. Body weight should be supported by the leg on the floor. Slowly straighten the leg on the step. Body weight should be supported by the leg on the step.

*Ask your therapist when you are ready to start this exercise.*
Exercise – After Your Knee Replacement

Knee Replacement Exercises

One of the most important ways you can help speed your recovery and increase your mobility after your knee replacement is to complete your exercises and to challenge yourself a little bit each day. The exercises you will learn with your therapist and outlined in this booklet will help you strengthen and improve the muscles around your new knee and will help you gain mobility in your knee. Typically, you will perform your exercises 10 to 20 times, 2 to 3 times each day. While you will be focusing on the leg with the knee replacement, you might want to do the exercises with both legs. Follow all of the precautions, and remember to breathe in deep, regular breaths. Setting milestones will help you keep track of your improvement and help keep you motivated to move to the next level.

Knee Recovery Goals Weeks 1–2:

• Walk progressively farther each day listening to your body. If you have minimal pain, go a little farther. If too much pain or swelling, reduce the distance and ice and elevate to promote recovery.
• Climb stairs with assistance and a hand rail if feeling strong and safe. When going up the stairs, lead with the non-surgical leg, and go down the stairs leading with your surgical leg.
• Place a rolled towel under your ankle when lying down or sitting with your leg extended to help keep your knee straight.
• Sponge bathe or shower when approved by your surgeon and dress by yourself.
• Gradually resume light home duties with help as needed.

Knee Recovery Goals Weeks 2–4:

• Complete any remaining goals from week 1–2
• Walk more independently with your walker, crutches or cane as instructed. By the end of week four you may walk with greater confidence with or without assistive devices.
• Climb stairs with a rail as safety allows.
• Straighten your knee by placing your foot on a stool for half an hour several times a day.
• You will have greater motion of your knee and be able to straighten your knee more.
• You may shower and dress by yourself.
• Resume light home duties with help as needed.

Knee Recovery Goals Weeks 4–6:

• Complete any remaining goals from weeks 1–4.
• Walk with increasing confidence and ease.
• Have more than 95 degrees of bend and approaching full extension.
• Climb up and down stairs with a rail.
• Resume all light home duties by yourself.
• Return to light work duties if approved by your surgeon.
Knee Recovery Goals **Weeks 6-12:**
- Complete any remaining goals from weeks 1-6.
- Walk independently with ease and confidence.
- Climb up and down stairs with a rail.
- Have near full extension.
- Straighten your knee by placing your foot on a stool for half an hour several times a day.
- Resume light home duties, work duties, and low impact activities.

**Complete 10 to 12 repetitions of each exercise 2 to 3 times per day working up to 20 repetitions as tolerated.**

**Downward Kneecap Push**
With thumbs on upper border of kneecap, gently push kneecap toward foot.

**Upward Kneecap Pull**
With thumbs on lower border of kneecap, gently pull kneecap toward hip.

**Sitting Knee Extension with Stool**
While sitting in a chair, place the foot of your affected leg on top of another chair, seat or stool. Press your knee down and hold for 30 seconds. Repeat 10 times, 2-3 times per day.

**Sitting Knee Flexion**
While sitting in a chair, scoot a little forward. Place a belt or towel under your foot while holding the edges in your hands. Bend your knee as far as you can with the belt or towel. Scoot forward a little more to feel more of the stretch at your knee. Hold for 30 seconds.
# Home Safety Checklist

## Entrance

<table>
<thead>
<tr>
<th>Potential Hazard</th>
<th>Yes</th>
<th>No</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are step surfaces non-slip?</td>
<td>☐</td>
<td>☐</td>
<td>Add adhesive-backed sandpaper stripping?</td>
</tr>
<tr>
<td>Are step edges visually marked to avoid tripping?</td>
<td>☐</td>
<td>☐</td>
<td>Add strips of tape in a contrasting color to the edge of each step?</td>
</tr>
<tr>
<td>Are there handrails on the stairs or ramp?</td>
<td>☐</td>
<td>☐</td>
<td>Add handrails at the appropriate height</td>
</tr>
<tr>
<td>Is there adequate outdoor lighting?</td>
<td>☐</td>
<td>☐</td>
<td>Add lighting as appropriate</td>
</tr>
<tr>
<td>Do you keep outdoor walkways, steps, and porches free of wet leaves and snow?</td>
<td>☐</td>
<td>☐</td>
<td>Remove wet leaves and snow as necessary.</td>
</tr>
<tr>
<td>Do you sprinkle icy outdoor areas with de-icers as soon as possible after a snow fall or freeze?</td>
<td>☐</td>
<td>☐</td>
<td>Put down salt, kitty litter, and/or de-icers as necessary.</td>
</tr>
</tbody>
</table>

## Bathroom

<table>
<thead>
<tr>
<th>Potential Hazard</th>
<th>Yes</th>
<th>No</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the path from the bedroom to the bathroom dark?</td>
<td>☐</td>
<td>☐</td>
<td>Use nightlights in the bedroom, hallway, and bathroom.</td>
</tr>
<tr>
<td>Is the bathtub or shower floor slippery?</td>
<td>☐</td>
<td>☐</td>
<td>Install non-slip decals or a rubber mat.</td>
</tr>
<tr>
<td>Is it difficult to get on and off the toilet?</td>
<td>☐</td>
<td>☐</td>
<td>It may be helpful to raise the seat and/or install handrails.</td>
</tr>
<tr>
<td>Is it necessary to reach far or turn around to get towels, shampoo, or soap?</td>
<td>☐</td>
<td>☐</td>
<td>Keep supplies in an easy to reach receptacle, or in a storage unit that attaches to the tub or shower wall.</td>
</tr>
<tr>
<td>Is it difficult to enter the shower because you have to step over your tub?</td>
<td>☐</td>
<td>☐</td>
<td>Purchase and extended tub seat so that you can sit down and swing your legs over the edge to enter the tub.</td>
</tr>
</tbody>
</table>

## Bedroom

<table>
<thead>
<tr>
<th>Potential Hazard</th>
<th>Yes</th>
<th>No</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is it necessary to get out of bed to reach a light, the telephone, or your eyeglasses?</td>
<td>☐</td>
<td>☐</td>
<td>Place a lamp, telephone and your eyeglasses within reach of the bed. Consider attaching a light to your headboard and/or using a cordless phone.</td>
</tr>
<tr>
<td>Is there clutter (clothes, shoes, books, newspapers) on the floor?</td>
<td>☐</td>
<td>☐</td>
<td>Remove clutter to ensure an obstacle-free paths within and between rooms.</td>
</tr>
<tr>
<td>Do you get up during the night to use the bathroom?</td>
<td>☐</td>
<td>☐</td>
<td>Place a portable commode near your bed to eliminate nighttime trips to the bathroom</td>
</tr>
</tbody>
</table>

continued on next page >>
### Living Room

<table>
<thead>
<tr>
<th>Potential Hazard</th>
<th>Yes</th>
<th>No</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do carpets, rugs and floor coverings have frayed corners or rolled-up edges?</td>
<td>![Yes]</td>
<td>![No]</td>
<td></td>
</tr>
<tr>
<td>Are there throw rugs in walkways?</td>
<td>![Yes]</td>
<td>![No]</td>
<td></td>
</tr>
<tr>
<td>Are chairs and sofas low to the ground?</td>
<td>![Yes]</td>
<td>![No]</td>
<td></td>
</tr>
<tr>
<td>Do you need to walk around furniture to get through the living area?</td>
<td>![Yes]</td>
<td>![No]</td>
<td></td>
</tr>
<tr>
<td>Do you have to reach up to pull cords to lights and/or ceiling fans?</td>
<td>![Yes]</td>
<td>![No]</td>
<td></td>
</tr>
</tbody>
</table>

### Kitchen

<table>
<thead>
<tr>
<th>Potential Hazard</th>
<th>Yes</th>
<th>No</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is it necessary to reach far, bend over, or climb on a stool to get commonly used items and foods?</td>
<td>![Yes]</td>
<td>![No]</td>
<td></td>
</tr>
<tr>
<td>Is there liquid, food, grease, or clutter on the floor?</td>
<td>![Yes]</td>
<td>![No]</td>
<td></td>
</tr>
</tbody>
</table>

### Outdoor Areas

<table>
<thead>
<tr>
<th>Potential Hazard</th>
<th>Yes</th>
<th>No</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are walks and driveways on your property free of cracks and breaks?</td>
<td>![Yes]</td>
<td>![No]</td>
<td>Patch unsafe areas on driveway and walks to avoid tripping.</td>
</tr>
<tr>
<td>Are lawns and gardens free of holes?</td>
<td>![Yes]</td>
<td>![No]</td>
<td>Patch areas or avoid entering these areas if unsafe.</td>
</tr>
<tr>
<td>Do you put away garden tools and hoses when they’re not in use?</td>
<td>![Yes]</td>
<td>![No]</td>
<td>Always store tools in their appropriate</td>
</tr>
</tbody>
</table>

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## Home Safety Checklist

### Other

<table>
<thead>
<tr>
<th>Potential Hazard</th>
<th>Yes</th>
<th>No</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you have light switches near every doorway?</td>
<td>☐</td>
<td>☐</td>
<td>Add lighting to improve visibility at thresholds and flooring changes?</td>
</tr>
<tr>
<td>Do you have light switches at both the tops and bottoms of stairways?</td>
<td>☐</td>
<td>☐</td>
<td>Add lighting to improve visibility on stairs.</td>
</tr>
<tr>
<td>Do you have securely fastened handrails that extend the full length of the stairs on both sides?</td>
<td>☐</td>
<td>☐</td>
<td>It is important to make sure handrails are the full length of the stairs to avoid over reaching</td>
</tr>
<tr>
<td>Are you alert for children playing on the floor or toys left in your path?</td>
<td>☐</td>
<td>☐</td>
<td>Keep all floors clean of toys</td>
</tr>
<tr>
<td>If you have pets, are you alert for sudden movements across your path of pets getting underfoot?</td>
<td>☐</td>
<td>☐</td>
<td>Keep pets out of very narrow/small spaces. Keep pet food dishes in an easily accessible area.</td>
</tr>
<tr>
<td>When you carry bulky packages, do you make sure they don’t obstruct your vision?</td>
<td>☐</td>
<td>☐</td>
<td>Divide large loads into smaller ones whenever possible</td>
</tr>
<tr>
<td>Do you take time to get your balance when you change position from lying down to sitting and from sitting to standing?</td>
<td>☐</td>
<td>☐</td>
<td>If you feel dizzy upon sitting wait one full minute after dizziness passes before you stand.</td>
</tr>
<tr>
<td>Do you keep yourself in good condition with moderate exercise, good diet, adequate rest, and regular medical checkups?</td>
<td>☐</td>
<td>☐</td>
<td>Make regular appointments with your medical provider. Complete all exercises prescribed by your therapist. Keep hydrated and maintain a healthy diet.</td>
</tr>
<tr>
<td>If you wear glasses, is your prescription up to date?</td>
<td>☐</td>
<td>☐</td>
<td>Make sure to schedule an annual appointment with your optometrist.</td>
</tr>
<tr>
<td>If you live alone, do you have daily contact with a friend or neighbor?</td>
<td>☐</td>
<td>☐</td>
<td>Establish a routine of daily communication with family and/or neighbors. Consider setting up a monthly service/emergency call button such as First Alert.</td>
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Thank you for choosing Backus Hospital!
<table>
<thead>
<tr>
<th>Date</th>
<th>Notes, Questions and/or Instructions</th>
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