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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.

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,

Donna Handley
President
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
Orthopedic Program Manager  860.425.3815
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 a shoulder replacement?

**Shoulder Arthritis** – is the most common reason that many patients have a shoulder replacement. When the cartilage in the shoulder wears down, the space between the ball and socket joint becomes smaller, this can cause pain and a decrease in the range of motion in your shoulder. Arthritis can occur due to age related changes, inflammation, or after an injury.

**Rotator Cuff Arthropathy** – if your rotator cuff is no longer functioning, you may have poor range of motion of your shoulder. A shoulder replacement can help to restore the function and improve the pain in your shoulder if your rotator cuff is not repairable.

**Types of shoulder replacements:**

**Total Anatomic Shoulder Arthroplasty**
This is a ball and socket replacement where the ball is replaced with a metal implant and the socket is replaced with plastic. 
*See X-ray examples at right* >>>

**Total Reverse Shoulder Arthroplasty**
The ball and socket are reversed with this replacement. A metal ball is placed where the socket was and the plastic socket connected to a stem is placed in the arm bone. 
*See X-ray examples at right* >>>
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. 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](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 needed, 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.
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>
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After your PATC appointment:
• Your healthcare team will provide resources for obtaining medical equipment and confirm your choice of home healthcare provider, if applicable.

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>Lisinopril</td>
<td>10mg oral tablet</td>
<td>1 orally once daily</td>
<td>Hypertension</td>
<td>Dr. Smith</td>
</tr>
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<td>10)</td>
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</tbody>
</table>

**Medication Allergies:**  [ ] Yes  [ ] No

**Allergic to**

**Reaction:**

**Pharmacy Info:**

**Name**

**Address**

**Phone**
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 not allowed 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 blood stream somewhere in your body. Therefore, you should arrange to have dental procedures such as extractions or dental 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.

Marijuana (Medical or Recreational)
Please stop all THC containing products 7 days prior to surgery unless otherwise 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.

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.

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.
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 preadmissions team at Hartford HealthCare at Home will call you before surgery to discuss how home care will assist with your recovery and expectations from home care after surgery, the best plan for your recovery at home, insurance benefits, and services and equipment suggested for after surgery. This information will be shared with your surgical team at Backus Hospital in order to optimize the care you receive while you recover in the hospital as well as provide a smooth transition home.
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 shoulder 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 by insurance.

- **Put things in reach.** Make sure items 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 around your house.

- **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 for you to get out of easily. Make sure it has armrests that you can push on as you get up.

- **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.

- **Decide where you will sleep.** Initially after surgery, you may want to sleep in a recliner chair for comfort.
Post-Hospital Plan
Your post-hospital plan will be discussed during your PATC visit or with your surgeon prior to your hospital admission.

- Your care management team will provide you with a list of choices for you to select a home health care agency, or in rare cases, a skilled nursing facility to support your successful transition from Backus Hospital.
- We have a network of preferred providers that collaborate with Backus Hospital to provide seamless orthopedic aftercare.
- If you require follow-up services, your care management team will work with you to arrange your care needs.

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
If you are staying overnight in the hospital our goal is for patients to be ready for a safe transition home by 11 am the day after their surgery. This targeted timeline 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.
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.

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 Night Before Your Surgery

Do not eat solid food or milk products after midnight. Drink your usual amount of clear liquids throughout the evening and night. Do not drink beverages that contain alcohol, carbonation or those with pulp.

Clear Liquid Beverages Allowed:
Includes water, coffee, tea (no milk or creamers), strained fruit juices with no pulp (apple juice, grape juice, cranberry juice). Gatorade, Crystal Light, iced tea, lemonade. Chicken or beef bouillon/broth, Jell-O (no fruit or toppings), popsicles (no sherbets, no fruit bars).

Remember:
Take only those medications you were instructed to take by your provider.

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. Please do not drink more than 16 oz. of fluids.
*THIS IS THE LAST LIQUID YOU CAN DRINK BEFORE SURGERY.

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

Medication Instructions
During your medical clearance visit at PATC, or your primary provider, you will be given instructions on what medications to take the night before and the morning of your surgery. Take ONLY those medications you were instructed to take.
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, Tubing & Machine for patients with Sleep Apnea
  - If you do not bring your machine, please bring your CPAP/BiPAP settings

- Clothing/Footwear
  - Loose fitting clothing that is easy to remove. After surgery, you will wear loose fitting tops that button in the front and elastic waist pants. Ladies will find a front closing bra is easier to wear.
  - 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
- Credit Cards
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 family/friend 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) family member/friend 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 this person with updates.

Anesthesia
There are several choices of anesthetic techniques that may be chosen for shoulder 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 procedure.

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 you throughout the procedure.

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 1-2 hours.
What is a peripheral nerve block?
A nerve block puts a part of your body to sleep by making it “numb”. It is a way to block the signals that travel along the nerves. The nerve block does this by keeping the pain sensation from reaching the brain.

Why do I need a peripheral nerve block?
- Surgeries, especially orthopedic surgeries, can be painful. Postoperative pain can limit or slow your recovery by making it difficult for you to participate in physical therapy, walk, go to the bathroom etc.
- Peripheral nerve blocks work together with other pain medications (opioids, muscle relaxers, anti-inflammatories, etc.) to provide optimal pain control.
- The goal is to provide the best possible pain relief with the least opioid use.

Your surgeon and anesthesia team may suggest a peripheral nerve block to control the sensation of pain during and after your surgery. The nerve block is used in addition to standard anesthesia which will keep you sleeping during the surgery.
What happens when the block wears off?
We strongly advise patients to take pain medication before the block completely wears off to help ease the transition.

- The block may last 24-36 hours.
- The block may wear off suddenly or gradually.
- You may feel tingling sensations before the block starts to wear off.
- Once the block has worn off, you should stay ahead of the pain. See the medication list for instructions on which medications to take.

When should I be concerned?
If you continue to feel the effects of the peripheral nerve block for longer than 48 hours, please contact your surgeons office.
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, temperature and manage your pain. These staff members will monitor any other issue that may arise.
- 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 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 moving within 4 (four) hours of the recovery room. The physical therapists and nursing staff will help get you out of bed.

You will have a bandage over the surgical site, 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 and manage your pain.

Transfer to Same Day Surgery
If your surgery will be a same day surgery, you will be transferred to Same Day Surgery from the recovery room. Here family members are able to join you. Our goal is to have you up and moving within 4 (four) hours of the recovery room. The physical therapists and nursing staff will help get your 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 given to you and your support person verbally and a written copy will be sent home with you.
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 attainable, 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 <strong>does not limit activity</strong></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.

<table>
<thead>
<tr>
<th>Pain Management</th>
<th>Integrative Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heat/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 helpful. Ask a clinical team member for more information about these offerings.
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 after your surgery.

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 two weeks after surgery, even at home. This will help you to fully expand your lungs by breathing deeply and will prevent fluid collection, pneumonia and fevers.

Blood Clot Prevention
Deep Venous Thrombosis (DVT) is a 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,” these stockings inflate and deflate automatically via a pump at the end of the bed. 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. These stockings will be used while you are in the hospital.
Anticoagulation
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.

Aspirin, the popular pain reliever found in our medicine cabinets, can also be used for blood clot prevention.

**Did You Know Aspirin Could Do That?**

- Aspirin prevents blood clots from forming in your body.
- Take Aspirin to prevent blood clots after surgery as directed by your doctor.
- **DO NOT** stop taking Aspirin until directed by your surgeon.
- **DO NOT** substitute Aspirin for other prescribed anticoagulation medication (i.e. Lovenox®/enoxaparin, Xarelto®, Plavix®)

**Lovenox® (enoxaparin)**

Lovenox® (enoxaparin) is an injection that is to help prevent blood clots. If your surgeon prescribes Lovenox® as an anticoagulant, your nurse will educate you on proper use including injection techniques, signs/symptoms of blood clots, and excessive bleeding before using this medication at home. You (or your caregiver) will be expected to perform these injections at home.
Length of Stay for shoulder replacement
Your hospital stay may 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</td>
</tr>
</tbody>
</table>

Getting Started
• Mobility will begin on the day of surgery with a goal of 4 (hours) from the recovery room.
• You will receive a Physical Therapy evaluation and a customized therapy program.
• **DO NOT** get out of bed without the assistance of a healthcare team member for toileting or transfers until you are cleared to safely do so.
• 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. You will likely transition to outpatient physical therapy in two weeks. This is about the same time as your two week follow-up appointment with your surgeon.

You will need to made appointments for outpatient physical therapy at the facility of your choosing. Contact your insurance provider to discuss any out-of-pocket expenses.

Remember to regularly log into Force Therapeutics to complete your exercise program. Regular exercise is an important part of restoring your normal joint motion and strength, and 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.

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
  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 with a dressing until your follow up visit in 2 weeks when the staples or sutures are removed.

• Watch for changes
  Immediately notify your provider 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
Your surgeon will determine the appropriate surgical dressing for you.

Aquacel Surgical Dressing
- The incision should remain dry and covered with a dressing until the staples or sutures are removed at the two week follow-up appointment.
- Keep the Aquacel dressing in place for 10(ten) days as long as it is clean, dry, and intact. Drainage in the center is okay. The dressing should be changed if drainage is leaking out the side. A gauze dressing should be applied and changed per surgeon’s instructions.
- Leave skin glue alone, let it release on its own.
- No creams, powders, oils or lotions to the incision or area around it.
- Do not scrub, soak or submerge your incision in water until cleared by your doctor.

Surgical Gauze Dressing
- The incision should remain dry and covered until the staples or sutures are removed at the two week follow-up appointment.
- Change the original surgical dressing the third day after surgery unless saturated. Replace with dry sterile dressing covered by an abd pad and secure with tape In the first 3 days after surgery, if blood soaks into the original dressing, reinforce with additional dressing. Do not change until three days after surgery.
- Dressings should be changed per surgeon’s instructions – usually every day.
- No creams, powders, oils or lotions to the incision or area around it.
- Do not scrub, soak or submerge your incision in water until cleared by doctor.

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

Please follow the exercise plan that your surgeon and physical therapist have established for you. Your recovery process and continued health depends on good nutrition, rest and proper exercise. Most shoulder patients experience a reduction in joint pain and an increased ability to participate in the activities of daily living within 2(two) to 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, 30 minutes on and 30 minutes off.

• 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 nausea is encountered, 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, progress to a normal diet 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 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**

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>30–38 grams per day</td>
<td>20–25 grams per day</td>
</tr>
</tbody>
</table>

**Fluid Needs**

When increasing your fiber intake you must also increase your fluid intake! Otherwise it could potentially make your constipation 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.**
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</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>
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<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>4 whole wheat crackers</td>
<td>1/2 cup apricots</td>
<td>(diced/canned)</td>
<td>peanuts / walnuts</td>
</tr>
<tr>
<td>1 whole wheat English muffin</td>
<td>1 banana</td>
<td>1/2 cup carrots</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 cauliflower</td>
<td></td>
</tr>
<tr>
<td>1 packet of oatmeal</td>
<td>1/2 cup of fruit cocktail</td>
<td>1/2 cup of corn</td>
<td></td>
</tr>
<tr>
<td>(flavored or plain)</td>
<td>1/4 cup raisins</td>
<td>1/2 cup sweet potatoes or yams</td>
<td>1 cup plain popcorn cooked</td>
</tr>
<tr>
<td></td>
<td>1/2 cup strawberries</td>
<td>1/2 cup tomatoes (cooked)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 tangerine</td>
<td>1/2 cup canned pumpkin</td>
<td>2 TBSP Ground Flaxseed</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 prior to 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 surgeon 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, and/or supplements.
- Please get all of your medications filled at the same pharmacy so that 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 not uncommon after shoulder surgery. Ice is helpful in decreasing swelling.
- It is essential that you inform your dentist that you have had a shoulder 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 shoulder 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 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. Upon discharge, 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 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 Hartford Healthcare and works collaboratively with the Backus Hospital team.
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
- Rash on skin
- Unrelenting pain
- Color change in hand
- Painful swelling or numbness in your arm

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
Rehabilitation at Home

Focus of Rehabilitation:

1. Strength
2. Functional mobility (Range of Motion)
3. Achieving your goals of recovery

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.

Your will transition to outpatient physical therapy in two weeks. This is about the same time as your two week follow-up appointment with your surgeon. You will receive an outpatient physical therapy script at your appointment.

You will need to make appointment for outpatient physical therapy at the facility of your choosing. Contact your insurance provider to discuss any out-of-pocket expenses.

What to Expect

- A phone call from your home care agency to schedule times of visits the day after discharge from the hospital.
- An initial visit to assure full assessment of safety, medical and functional status.

What You Need

- Additional support at home to assist with activities.
- Your medication, equipment, insurance information and caregiver 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.

Thank you for choosing Backus Hospital!
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. **Medical Clearance** (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. This will require some help at home from family, friends and home therapy. On rare occasions, a skilled nursing facility may be recommended and authorization from your insurance company may be needed. To be prepared you need to discuss your post-hospital plan with your doctor and family PRIOR to your surgery.

6. **Going Home**
   - Arrange for transportation from hospital for discharge
   - Please have your support person with you to review discharge instructions with your care team.

continued on next page >>
Short Term Rehabilitation

- Facilitated by nurse case coordinators and social workers
- Insurance authorization may 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

- **Decrease fall risk**
  - Remove all throw rugs, loose rugs, electrical cords and clutter from hallways and walking areas. These increase your 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**

- **Durable medical equipment (DME):**
  - You will receive recommendations for equipment prior to admission and prior to transitioning home from your care team.

- **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, games, puzzles, etc.

- **Company:**
  - Make arrangements to have a family member or friend stay with you once you return home for the first few days.
Exercise – After Your Shoulder Replacement

**PLEASE NOTE:** Your surgeon and your occupational therapist will discuss with you what exercises you are allowed to do **AFTER** surgery.

**PRIOR TO SURGERY:** You are able to perform all of these exercises (to the best of your ability). This will aid with muscle memory and help your rehabilitation after surgery.

### Precautions

- **DO NOT** lean on your arm.
- **DO NOT** support your body weight on your arm.
- **DO NOT** actively move your shoulder.
- **DO NOT** lift objects.
- **DO NOT** bring your arm behind you.
- You should always be able to see your elbow.
- **DO NOT** bring your arm out to the side.

### Neck Exercises

#### Neck Side Bending
- Gently bring ear toward shoulder.

#### Neck Rotation
- Gently turn neck to side.

#### Neck Flexion/Extension
- Gently bring chin toward chest and then back.

### Scapular/Shoulder Blade Retraction

- Squeeze shoulder blades back together keeping shoulders relaxed.
- Be sure not to move your arm behind you.
Hand, Wrist, Forearm and Elbow Range of Motion Exercises

**Hand active range of motion**
• Make a tight fist and then fully open your fingers wide.

**Wrist Active Range of Motion**
• Bend your wrist back and forth fully.

**Forearm active range of motion**
• Keeping your elbow at your side, turn your forearm facing palm up and then palm down.

**Elbow active range of motion**
• Lower your hand until your elbow is fully straight, and then bend your elbow until you can touch your shoulder.
Shoulder Flexion Passive Range of Motion

- Have someone assist to bring your shoulder up to 90 degrees.
- **DO NOT** actively move your shoulder.

Shoulder External Rotation Passive Range of Motion

- Use your opposite hand to slowly rotate your arm outward to **NEUTRAL**.
- **DO NOT** move past **NEUTRAL**.
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 telephone call from a Care Transitional Specialist from the Preadmissions Team prior to your surgery to establish your preference of home care agency, discuss insurance benefits, what to expect from home care after surgery, and discover how to best plan for your recovery in your home.

• A visit 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 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. Most insurers will initially allow for 2-3 days/week of rehabilitation services, but your specific plan will be discussed with you upon start 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.
### 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 an 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 >>
# Home Safety Checklist

## 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>☐</td>
<td>☐</td>
<td>Remove damaged floor coverings or secure them with non-skid backing.</td>
</tr>
<tr>
<td>Are there throw rugs in walkways?</td>
<td>☐</td>
<td>☐</td>
<td>It is best to remove throw rugs or put non-skid backing on them?</td>
</tr>
<tr>
<td>Are chairs and sofas low to the ground?</td>
<td>☐</td>
<td>☐</td>
<td>Use furniture with higher, firm seats and armrests to safely ease into sitting or rise from chairs or sofa.</td>
</tr>
<tr>
<td>Do you need to walk around furniture to get through the living area?</td>
<td>☐</td>
<td>☐</td>
<td>Rearrange furniture to have a straight path, free of obstacles.</td>
</tr>
<tr>
<td>Do you have to reach up to pull cords to lights and/or ceiling fans?</td>
<td>☐</td>
<td>☐</td>
<td>Install longer cords or link ceiling lights/ fans to a switch on the wall. This eliminates the need to look up and reach.</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>☐</td>
<td>☐</td>
<td>Arrange cupboards and drawers so frequently used items are stored waist high. Use a sturdy step stool with a grab bar (never a chair) to reach overhead items.</td>
</tr>
<tr>
<td>Is there liquid, food, grease, or clutter on the floor?</td>
<td>☐</td>
<td>☐</td>
<td>Sweep often and wipe up spills immediately.</td>
</tr>
</tbody>
</table>
# Home Safety Checklist

<table>
<thead>
<tr>
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<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>
</tr>
</tbody>
</table>
Congratulations!
You are well on your journey to recovery! Thank you for trusting us with your care. Should you have any questions before or after your procedure please do not hesitate to call our Orthopedic Nurse Navigator, at 860.425.5332 or 860.460.8619.