



PEACHTREE ORTHOPAEDIC
SURGERY CENTERS



Patient's Guide to Outpatient Total Joint Replacement Surgery

Peachtree Orthopaedic Surgery Centers

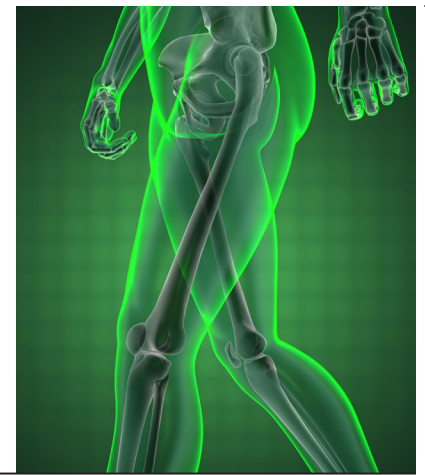
5505 Peachtree Dunwoody Road, Suite 200
Atlanta, GA 30342 | (404) 350-2450

77 Collier Road NW, Suite 2000
Atlanta, GA 30309 | (404) 351-6393





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POSC-PERIMETER

Disclosure of Physician Ownership in Surgery Center and Patient Grievance Protocol

Please be advised that the following physicians own an interest in POSC:

Michael P. Bernot, M.D.
James L. Beskin, M.D.
Ezequiel Cassinelli, M.D.
Wing K. Chang, M.D.
John C. Chao, M.D.
Xavier A. Duralde, M.D.
Letha Y. Griffin, M.D.
Timothy B. Griffith, M.D.
Anuj Gupta, M.D.
John D. Henry Jr., M.D.
Lee A. Kelley, M.D.
James S. Kercher, M.D.
W. Scott Kimmerly, M.D.
Donald F. Langenbeck Jr., M.D.

Walter B. McClelland Jr., M.D.
Stephen M. McCollam, M.D.
Allen McDonald III, M.D.
Douglas H. Murray, M.D.
Scott D. Pennington, M.D.
Shevin D. Pollydore, M.D.
Ashok S. Reddy, M.D.
R. Marvin Royster, M.D.
David A. Schiff, M.D.
D. Hal Silcox III, M.D.
Stephen W. Smith, M.D.
Obinwanne Ugwonali, M.D.
M. Jonathan York, M.D.

You are entitled to obtain the services for which you have been referred to POSC-Perimeter at the location of your choice. Alternative sources of the service for which you have been referred to this entity are as follows:

Northside Hospital
1000 Johnson Ferry Road
Atlanta, GA 30342
(404) 851-8000

Piedmont Hospital
1968 Peachtree Road
Atlanta, GA 30309
(404) 605-2000

State:

If the patient has further concerns about the care being provided in this licensed ambulatory surgical treatment center, they may express concern to the appropriate representative within the (Surgery Center) according to the (Surgery Center) policy.

- They may also file a complaint with the Georgia Department of Community Health, Complaints Division, Two Peachtree Street, NW, 31st Floor, Atlanta, GA 30303-3142, 404-657-5728, 1-800-878-6442, fax: 404-657-5731, www.dch.georgia.gov.
- The web site for the Office of the Medicare Beneficiary Ombudsman is <http://www.medicare.gov/claims-and-appeals/medicare-rights/get-help/ombudsman.html>. Phone number: 1-800-Medicare (800-633-4227)
- This notice is posted as required by regulation of the Department of Public Health and Medicare CFC.

Office of Civil Rights:

- You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Right Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at U.S. Department of Health and Human

POSC-PIEDMONT
Disclosure of Physician Ownership in Surgery Center
and Patient Grievance Protocol

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www.peachtreeorthopedics.com



Thank you for choosing one of our **Peachtree Orthopaedic Surgery Centers** (POSC) for your upcoming surgery. We've provided this guide to help you prepare for your surgery and to make your experience as pleasant as possible. This packet contains directions to our surgery centers, as well as other valuable information. **Please read carefully, as this information is crucial to ensure you have a positive surgical experience.**

Your pre-operative visit is a very important part of your surgical experience and our first step toward ensuring your comfort and safety. This appointment will be scheduled at your convenience, but we ask that your appointment is complete at least three business days prior to your surgery. At the time of your appointment, a nurse will review your medical history, your pre- and post-operative care and your transportation needs. If it is necessary to send you for lab work, additional time will be required. If you have had any lab tests performed within the month, please be ready to provide us with the office name and phone number where the results can be obtained, so that we avoid duplicating lab tests.

On the day of your surgery, it is very important that you arrive at your scheduled time. Late arrival may cause a delay or cancellation of your surgery. Please be aware that we sometimes experience unavoidable delays. We will keep you informed of any changes in your scheduled surgery time. Once you are ready for surgery, two family members will be allowed to stay with you until you are taken back to the operating room. If there are more than two family members waiting, they may take turns visiting you.

Our goal is to provide premium, personal care in an environment most relaxing for the patient — and no one is better qualified to measure our success than a former patient. You may be emailed a questionnaire after your surgery to evaluate your experience. **We value your feedback and appreciate your comments.**

Thank you again for choosing Peachtree Orthopedics for your surgical needs. If our staff can be of further assistance in preparing you for surgery, please do not hesitate to contact us.

Thank you!

Patient's Bill of Rights (Page 1 of 3)

The Patient has the right to:

- Be informed of rights (both verbally and in writing) as a patient (or patient representative) prior to, or when discontinuing the provision of care. A list of these rights shall be posted within POSC to be read by all patients.
- Exercise these rights without regard to age, race, disability, sex or culture, economic, education, or religious background or the sources of payment for care given.
- Formulate advance directives regarding patient's healthcare, and have POSC staff and practitioners who provide care in POSC comply with these directives (to the extent provided by state laws and regulations).
- Be treated with dignity and receive considerate and respectful care provided in a safe environment free from all forms of abuse, neglect or harassment.
- Remain free from seclusion or restraints of any form that are not medically necessary.
- Expect reasonable safety while in POSC.
- The name of the physician and staff who will be providing care and the name of the professional relationships of the other physicians and non-physicians who will participate in care.
- Receive appropriate information regarding provider credentialing. Receive as much information about any proposed treatment or procedure as needed in order to give informed consent or refuse this course of treatment. Except in emergencies, this information shall include a description of the procedure or treatment, the medically significant risks involved in this treatment, alternate course of treatment or non-treatment and the risks involved in each terms the patient can understand.
- Participate actively in decisions regarding medical care. To the extent permitted by law, this includes the right to request and/or refuse treatment.

Patient's Bill of Rights (Page 2 of 3)

- Express a complaint regarding care or any violation of your rights without being subject to discrimination or reprisal.
- Be advised of POSC's grievance process should the patient wish to communicate a concern regarding the quality of care the patient receives. Notification of the grievance process includes: whom to contact to file a grievance, and that patient will be provided with a written notice of the grievance determination that contains the name of the POSC contact person, the steps taken on patient's behalf to investigate the grievance, the results of the grievance and the grievance completion date.
- Provided with a written notice of the grievance determination that contains the name of the POSC contact person, the steps taken on the patient's behalf to investigate the grievance, the results of the grievance and the grievance completion date.
- Change providers if desired, either within POSC or to another provider of the patient's choice.
- Full disclosure of the privacy policy and full consideration of privacy concerning the medical care program. Confidential treatment of case discussion, consultation, examination and treatment and all communications and records pertaining to patient's care at POSC.
- The patient has the right to be advised as to the reason for the presence of any individual involved in the patient's healthcare. The patient's written permission shall be obtained before medical records can be made available to anyone not directly concerned with the patient's care.
- Assess information contained in patient's medical records within a reasonable time frame in accordance with state/federal laws and regulations.
- Reasonable responses to any reasonable requests made for service.
- Leave POSC even against the advice of the attending physician.
- Reasonable continuity of care.
- Be informed by the attending physician or designee of the continuing health care requirements following discharge.

Patient's Bill of Rights (Page 3 of 3)

- Obtain information before scheduled surgery about payment requirements of the bill, regardless of the source of payment. Examine and receive an explanation of the bill, regardless of the source of payment.
- If eligible for Medicare, to know upon request and in advance of treatment whether a healthcare provider or facility accepts the Medicare assignment rate.
- Be advised if physician/ POSC proposes to engage in or perform human experimentation affecting the care or treatment. The patient has the right to refuse to participate in such research projects or clinical trials.
- Receive appropriate knowledge regarding absence of malpractice insurance.
- All Peachtree Orthopedic Surgery Center personnel, medical staff members and contracted agency personnel performing patient care activities shall observe these patients' rights.

For Grievances, Contact:

Peachtree Orthopaedic Surgery Centers
(404) 355-0743

Department of Community Health: 404-657-5728
Healthcare Facility Regulation Division:
800-878-6442
Fax: 404-657-5731
Two Peachtree St. NW, 31st Floor
Atlanta, Ga. 30303-3142
www.ors.dhr.georgia.gov

Office of Medicare Beneficiary Ombudsman
www.cms.hhs.gov/center/ombudsman.asp
1-800-Medicare (800-633-4227)

The care a patient receives depends partially on the patient himself. Therefore, in addition to these rights, a patient has certain responsibilities as well. These responsibilities should be presented to the patient in the spirit of mutual trust and respect. The patient should:

- Provide accurate and complete information about present complaint, past illnesses, hospitalizations, any medications (including over-the-counter products and dietary supplements), any allergies or sensitivities, and other matters related to health status.
- Make it known whether course of treatment and what is expected of the patient is clearly understood.
- Follow the treatment plan established by the physician, including the instructions of nurses and other health professionals as they carry out the physician's orders.
- Provide a responsible adult to transport the patient home from the Surgery Center and remain with the patient for 24 hours (if required by the physician).
- Keep appointments and notify the surgery centers or the physician when unable to keep an appointment.
- Accept responsibility for any actions resulting from the refusal to follow treatment or physician's orders.
- Inform the physician about any living will, medical power of attorney, or other directive that could affect the patient's care.
- Accept and ensure that the financial obligations of care are fulfilled as promptly as possible.
- Follow Peachtree Orthopaedic Surgery Centers' policies and procedures.
- Be considerate of the rights of other patients and POSC personnel.
- Be respectful of personal property and that of other persons at POSC.

Peachtree Orthopaedic Surgery Centers strive to provide excellent patient care and service. If you have a concern or complaint, please tell us so that we can work to satisfy your needs. Please speak to the ASC Nurse Manager.

Thank you!

**Peachtree Orthopaedic Surgery Center at Perimeter
5505 Peachtree Dunwoody Road, Suite 200, Atlanta, Georgia 30342**

From 400 North (Alpharetta/Cumming Area)

Take GA 400 South to Exit 3, Glenridge Connector. Take the exit toward Peachtree Dunwoody Rd. Turn left onto Peachtree Dunwoody Rd. Take an immediate right into the Peachtree Dunwoody Medical Center complex.

From 285 West (Smyrna Area)

Take I-285 East to Exit 26, Glenridge Drive. Take a right onto Glenridge Drive, which becomes the Glenridge Connector. Turn left onto Peachtree Dunwoody Road. Take an immediate right into the Peachtree Dunwoody Medical Center complex.

From 285 East (Stone Mountain Area)

Take I-285 West to Exit 28, Peachtree Dunwoody Road. Turn left onto Peachtree Dunwoody Road. The Peachtree Dunwoody Medical Center is approximately 1 mile down on your left.

From 85 North (Norcross/Buford/Suwanee Area)

Take I-85 South to I-285 West. Follow I-285 Exit 28, Peachtree Dunwoody Road. Turn Left onto Peachtree Dunwoody Road. The Peachtree Dunwoody Medical Center is approximately 1 mile down on your left.

From 75 North (Marietta/Kennesaw/Acworth Area)

Take I-75 South to I-285 East to Exit 26, Glenridge Drive. Take a right onto Glenridge Drive, which becomes Glenridge Connector. Turn left onto Peachtree Dunwoody Road. Take an immediate right into the Peachtree Dunwoody Medical Center complex.

From South of Atlanta (College Park/ Newnan/McDonough Area)

Take I-75/I-85 North through downtown Atlanta. Stay left to merge onto I-85 North. Take exit 87, GA 400 North toward Buckhead/Cumming. Take Exit 4A toward I-285 East. Follow signs to Glenridge Connector toward Peachtree Dunwoody Road. Take a right off the ramp onto Glenridge Connector. Take a left onto Peachtree Dunwoody Road, then take an immediate right into the Peachtree Dunwoody Medical Center Complex.

**Directions to Peachtree Orthopaedic Surgical Center at Piedmont
77 Collier Road NW, Suite 2000, Atlanta, Georgia 30309**

Coming from the South (I-20E/I-20W/Peachtree City)

- Take 75 North to Exit 252-A (Northside Drive)
- Turn right onto Northside Drive
- Turn right onto Collier Road
- Turn left onto the Piedmont campus; follow signs to the North Parking Deck
- Park in the North Parking deck and take the elevator to the Bridge Level leading to the Hospital
- Follow signs to Suite 2000

Coming from the North (I-85)

- Take 85 South to Exit 86 (Peachtree Road)
- Follow signs to go north on Peachtree Street towards Buckhead
- Turn right on Peachtree Road
- Turn left on Collier Road
- Turn left onto the Piedmont campus; follow signs to the North Parking Deck
- Park in the North Parking deck and take the elevator to the Bridge Level leading to the Hospital
- Follow signs to Suite 2000

Coming from the North (I-75)

- Take 75 South to Exit 252 (Howell Mill Road)
- Turn left onto Howell Mill Road
- Turn right onto Collier Road
- Turn left onto the Piedmont campus; follow signs to the North Parking Deck
- Park in the North Parking deck and take the elevator to the Bridge Level leading to the Hospital
- Follow signs to Suite 2000

Coming from the North (GA 400)

- Take 400 South to Exit 1 (Sidney Marcus Blvd.)
- Turn left onto Sidney Marcus Blvd.
- Get into the far right lane to turn onto Buford Highway
- Take Peachtree Road exit towards Buckhead
- Turn right on Peachtree Road
- Turn left on Collier Road
- Turn right onto the Piedmont campus; follow signs to the North Parking Deck
- Park in the North Parking deck and take the elevator to the Bridge Level leading to the Hospital
- Follow signs to Suite 2000

Total Joint Education

Once your surgery has been scheduled, it is important that you receive as much education about your upcoming surgery as possible. Understanding your surgery can help you manage more effectively at home and help prevent some unforeseen complications.

We have developed a more personal approach to your education. Our Orthopedic Nurse Case Manager will act as your personal liaison between you and the surgical center. Our Nurse Case Manager will make an outreach call to you before surgery to educate you in great detail about what you can expect pre- and post-operatively, as well as answer any questions you may have. The Nurse Case Manager will also follow-up with you once you are home to ensure that you are managing without any difficulties.

The initial phone call will review:

- How to prepare your home
- What to bring to the Surgery Center
- What equipment you will need
- What to expect during and after surgery
- All necessary prescriptions
- Home health expectations (if any)
- Pre-operative clearance
- New medication uses and side effects
- When to call your physician for reportable signs and symptoms

Please contact our **Nurse Case Manager** between the hours of 8 am and 5 pm Monday through Friday one week prior to your surgery.

Peachtree Orthopaedic Surgery Center at **PERIMETER**

Physician Name: _____ Procedure Date: _____

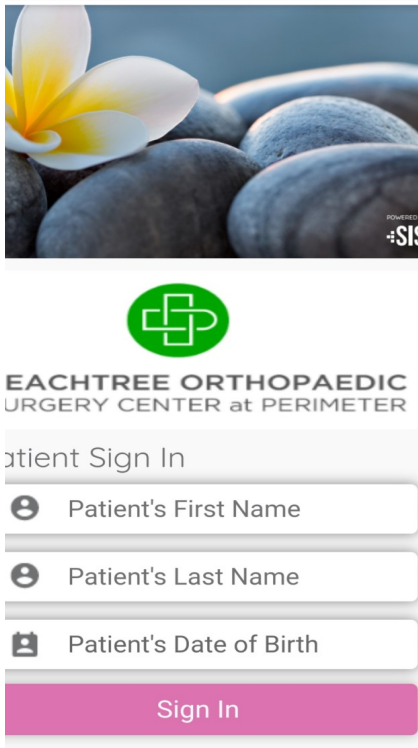
To ensure you receive the best care possible, Peachtree Orthopaedic Surgery Center at Perimeter offers an easy, online questionnaire for you to complete. When you use our online portal, you help us reduce long phone interviews and handwritten forms. Please complete your questionnaire today!

How to Complete Your Medical History Online

1

Please be on the lookout for an email and / or text message inviting you to our surgical patient portal.

Click on the link contained in the text or email.



2

This portal will allow you to complete your pre-surgical questionnaire online. Please complete this survey 1-2 weeks prior to your procedure. Your responses will be reviewed by a nurse who will contact you if there are any questions. You will also have access to your pre-surgical instructions.

3

You will not need to download an app on your phone. You only need to click on the link.

You also will not have to create a User Name or Password. As you see on the sample screen to the left, you will need only your name and date of birth.

Important

You must complete the questionnaire in one session. It will not save changes if you exit during the session. The questionnaire should take less than 15 minutes to complete.

If you are not able to complete your history online, please call our pre-op nurse during business hours at 404-350-2450 to complete your history over the phone.

Peachtree Orthopaedic Surgery Center at **PIEDMONT**

Physician Name: _____ Procedure Date: _____

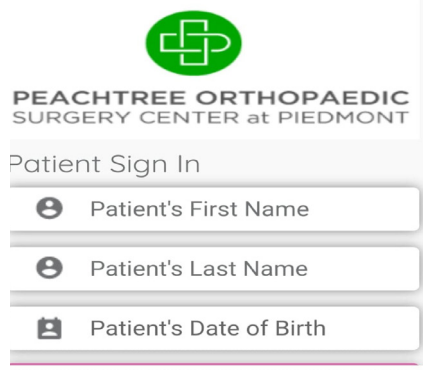
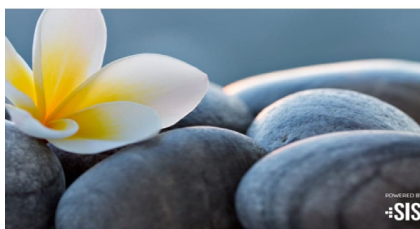
To ensure you receive the best care possible, Peachtree Orthopaedic Surgery Center at Piedmont offers an easy, online questionnaire for you to complete. When you use our online portal, you help us reduce long phone interviews and handwritten forms. Please complete your questionnaire today!

How to Complete Your Medical History Online

1

Please be on the lookout for an email and / or text message inviting you to our surgical patient portal.

Click on the link contained in the text or email.



2

This portal will allow you to complete your pre-surgical questionnaire online. Please complete this survey at least 48 hours prior to your procedure. Your responses will be reviewed by a nurse who will contact you if there are any questions. You will also have access to your pre-surgical instructions.

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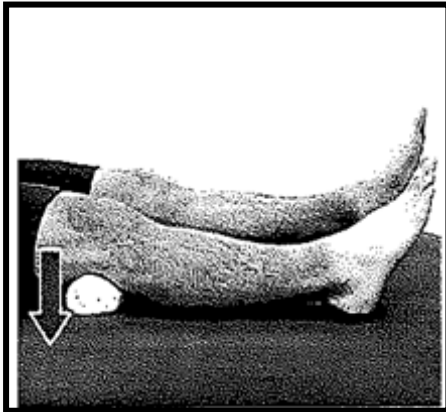
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Preparing for Surgery: Pre-Surgical Checklist

1. Online health history completed
2. Medication instruction pre-op: (Have you stopped your anti-inflammatory medications? Over-the-counter meds? Aspirin?)
3. Consents signed
4. Medical clearance from primary MD
5. Labs and EKG completed
6. Telephonic education class with CM
7. Pre-surgical office visit/counseling
8. Home health arranged
9. Equipment delivered (walker)
10. Notified of surgical arrival time
11. Prescriptions filled (aspirin, stool softeners, pain meds)
12. Home Preparation
 - a. Do you have a coach/family prepared to stay with you for 24 hours?
 - b. Are meals prepared?
 - c. Is your home modified? (i.e., throw rugs removed, pathways clear)
 - d. Pet care arranged?
 - e. Pre-surgical physical therapy exercises?

Pre-Surgical Exercises

1

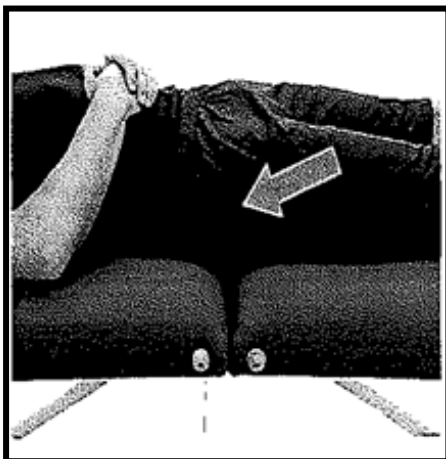


QUAD SET - TOWEL UNDER KNEE

Place a small towel roll under your knee, tighten your top thigh muscle to press the back of your knee downward while pressing on the towel.

Repeat	10 times
Hold	5 seconds
Complete	2 sets
Perform	6 times/day

2



GLUT SET - SUPINE

While lying on your back, squeeze your buttocks and hold. Repeat.

Repeat	10 times
Hold	5 seconds
Complete	3 sets
Perform	2 times/day

3



STRAIGHT LEG RAISE - SLR

While lying or sitting, raise up your leg with a straight knee. Keep the opposite knee bent with the foot planted to the ground.

Repeat	10 times
Hold	2 seconds
Complete	3 sets
Perform	2 times/day

16

4

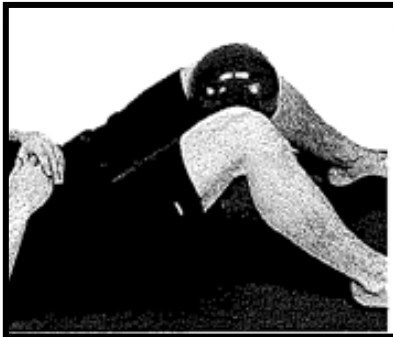


SUPINE HIP ABDUCTION - ELASTIC BAND CLAMS

Lie down on your back with your knees bent. Place an elastic band around your knees and then draw your knees apart.

Repeat	10 times
Hold	5 seconds
Complete	3 sets
Perform	2 times/day

5

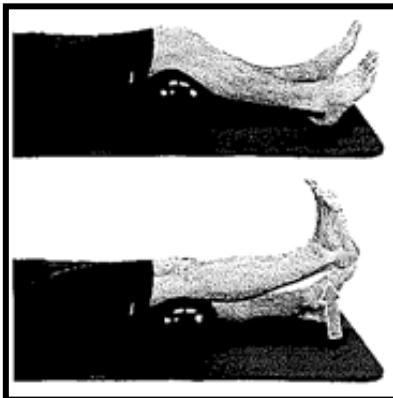


HIP ABDUCTION SQUEEZE - SUPINE

Place a rolled up towel, ball, or pillow between your knees and press your knees together so that you squeeze the object firmly.

Repeat	10 times
Hold	5 seconds
Complete	3 sets
Perform	2 times/day

6

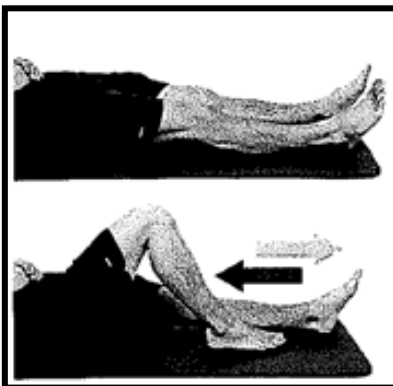


SHORT ARC QUAD - SAQ

Place a rolled up towel or object under your knee and slowly straighten your knee as you raise up your foot.

Repeat	10 times
Hold	5 seconds
Complete	3 sets
Perform	2 times/day

7

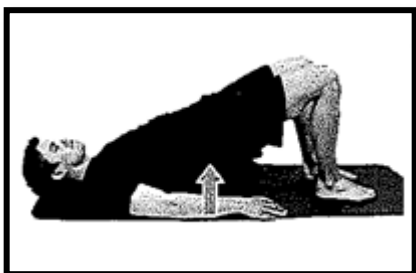


HEEL SLIDES - SUPINE

Lying on your back with knees straight, slide the affected heel towards your buttock as you bend your knee. Hold a gentle stretch in this position and then return to original position.

Repeat	10 times
Hold	5 seconds
Complete	2 sets
Perform	2 times/day

8



BRIDGING

While lying on your back, tighten the lower abdominals, squeeze your buttocks and then raise your buttocks off the floor/bed to create a “bridge” with your body.

Repeat	10 times
Hold	5 seconds
Complete	3 sets
Perform	2 times/day

9



HAMSTRING STRETCH WITH TOWEL

While lying on your back, hook a towel/strap under your foot and draw up your leg until a stretch is felt under your leg, calf area. (Keep your knee straight.)

Repeat	10 times
Hold	10 seconds
Complete	1 sets
Perform	2 times/day

10



HIP ABDUCTION - SIDELYING

While lying on your side, slowly raise up your top leg. Keep your knee straight and your toes pointed forward the entire time. The bottom leg can be bent to stabilize your body.

Repeat	10 times
Hold	1 seconds
Complete	3 sets
Perform	2 times/day

11



SEATED HEEL SLIDES

While in a seated position and foot forward and rested on the floor, slowly slide your foot closer towards you. Hold a gentle stretch and then return foot forward to original position.

Repeat	10 times
Hold	5 seconds
Complete	3 sets
Perform	1 times/day

18

12



PARTIAL ARC QUAD - LOW SEAT

While seated with your knee bent and heel touching the ground, slowly straighten your knee as you raise your foot upwards. Lower your foot back down until your heel touches the ground and then repeat.

Repeat	10 times
Hold	3 seconds
Complete	3 sets
Perform	2 times/day

13

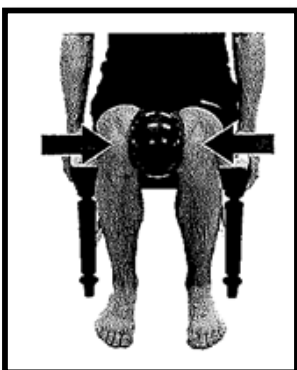


ELASTIC BAND - SEATED CLAMS

Sit in a chair with an elastic band wrapped around your knees. Move both knees to the sides and separate your legs. Keep your feet on the floor the entire time.

Repeat	10 times
Hold	5 seconds
Complete	3 sets
Perform	2 times/day

14



BALL SQUEEZE - SEATED

While sitting, place a ball between your knees. Squeeze the ball with your knees and hold.

Repeat	10 times
Hold	5 seconds
Complete	3 sets
Perform	2 times/day

15



STANDING HAMSTRING CURLS

While standing, bend your knee so that your heel moves towards your buttock.

Repeat	10 times
Hold	1 seconds
Complete	3 sets
Perform	2 times/day

19

16

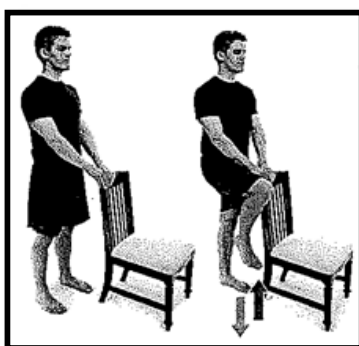


HIP FLEXION - STANDING - SLR

While standing, raise your leg forward as shown. Use your arms for support if needed for balance and safety.

Repeat	10 times
Hold	1 seconds
Complete	3 sets
Perform	2 times/day

17



STANDING MARCHING - SINGLE LEG

While standing, draw up your knee, set it down and then repeat on the same side. Use your arms for support if needed for balance and safety.

Repeat	10 times
Hold	2 seconds
Complete	3 sets
Perform	2 times/day

18



HIP ABDUCTION - STANDING

While sitting, place a ball between your knees. Squeeze the ball with your knees and hold.

Repeat	10 times
Hold	1 seconds
Complete	3 sets
Perform	2 times/day

19



STANDING CALF STRETCH - GASTROC

While standing and leaning against a wall, place one foot back behind you and bend the front knee until a gentle stretch is felt on the back of the lower leg. Your back knee should be straight the entire time.

Repeat	5 times
Hold	10 seconds
Complete	1 sets
Perform	1 times/day

20

Surgical Pre-Op Instructions

THE NIGHT BEFORE SURGERY

- Nothing to eat or drink after midnight the night before your surgery. This includes gum, candy, breath mints, water, ice, coffee, soda, juice and food.
- Pack your insurance card, photo ID and some form of payment (credit card, cash, check)
- Wear loose fitting clothes.
- If having shoulder surgery, you will have a dressing and a sling on your operative arm and will need clothes that will fit comfortably over both.
- Shower using Hibiclens shower scrub

THE MORNING OF SURGERY

- Leave all jewelry and valuables at home
- Shower using Hibiclens shower scrub
- Brush your teeth, but try not to swallow any water
- Take only the medications instructed by your physician or pre-anesthesia nurse with a small sip of water (no diuretics, ace inhibitors or Metformin on the day of surgery)
- Arrive at scheduled time to the appropriate surgery center and sign in.
- Bring a driver with you: have them plan to stay with you while you are at POSC. You will not be cleared for surgery if your driver is not present. This will ensure that you have a ride home if your surgery is canceled for any reason. Please note: your caregiver/driver is not allowed to leave the surgery center while you are here.
- You must have a responsible adult (18 years or over) **STAY WITH YOU AT HOME AFTER SURGERY UNTIL THE NEXT DAY.**
- On the day of your surgery, you will be asked to provide POSC personnel with the name of the individual that will be providing the above care. If you fail to provide that information, your surgery will be canceled.

PREPARING FOR SURGERY

- If you have asthma, bring your asthma inhaler
- If you have sleep apnea, bring your CPAP machine
- **DO NOT** wear contact lenses. Bring your glasses.
- **DO NOT** write on or shave the operative area prior to surgery
We will do that the day of surgery (if needed).
- **DO NOT** wear hairspray or nail polish
- **DO NOT** wear make-up or lotion

VISITING HOURS

Visiting hours are from **6 am to 8 pm.**

If you are planning on staying overnight, your caregiver will need to leave by 8 pm and return in the morning. Please have your caregiver arrive at 6 am the next day as **Discharge** will be strictly enforced at **6:30 am.**

PLEASE NOTE: You are responsible for paying for parking

- At the Surgery Center, you will be met by one of our pre-op surgical nurses who will bring you to the pre-op waiting area. There you will don all pre-operative surgical attire including a gown, hat and socks.
- Your pre-op nurse will start an IV and prepare your operative leg by scrubbing and shaving the operative area.
- You will meet with the anesthesiologist who will review your medical history. Be sure to tell them about any post-operative complications you may have had in the past, including nausea and vomiting. Anesthesia will then perform a nerve block to the operative leg and administer other medications through your IV, including antibiotics. (Some surgeons will use the “On-Q” pain pump (for total knee replacement only) for post-op pain relief. This will be inserted into the operative leg by the anesthesiologist after your nerve block is placed).
- Your surgeon will meet you and your family in the pre-op area, confirm and mark the operative site and answer any last minute questions.
- You will then be transferred back to the operating room for your surgery. Surgery will last anywhere from 1½ to 2 hours.
- Once your surgery is complete, anesthesia will be reversed and you will transfer to the recovery room where you will meet your nurse. The nurse will monitor your vital signs and keep you comfortable. Medications for pain and nausea will be administered as needed. The nerve block should keep you comfortable and should provide excellent pain relief for up to 24 hours.
- You will be in the recovery the room for a minimum of two hours post-op. Your family is welcome to come back and stay with you after you are fully awake. You will then meet with a physical therapist who will show you the proper way to transfer out of bed, walk and perform stairs.
- Once you are considered medically stable and are able to ambulate with your walker and have been able to use the toilet safely, you will be discharged to home. Your surgeon may discharge you home the same day or the following morning depending upon your individual needs. We do not provide TV or meals. Please bring a book, laptop or snacks if you like.



Discharge Instructions Checklist

1. Received surgeon's discharge instructions _____
2. Have all prescriptions (if not filled pre-op) _____
3. Have all necessary equipment (walker) / personal belongings _____
4. Post-operative appointment scheduled _____
5. You have a responsible caregiver to take you home and stay with you for 24 hours _____

AFTER YOUR SURGERY...

- You will be contacted by the home health agency the day after your surgery to be visited by a physical therapist and begin your home physical therapy program.
- You will need to use your walker and or cane until you feel that you would not fall without them (usually 2 to 4 weeks).



THIS IS EXTREMELY IMPORTANT: using your operative leg is critical in your rehabilitation process. You must work hard to regain your range of motion and strength. You will be given a **HOME EXERCISE PROGRAM** that you must perform at least **TWICE A DAY**. You must also change your position regularly & walk hourly to ensure the best outcome and reduce the risk of complications.

WALKING

- Proper walking is the best way to help your joint recover. At first you will walk with a walker. You will be able to bear full weight on the leg (unless instructed otherwise by your surgeon).
- Walk as rhythmically and smooth as you can. Don't hurry. Adjust the length of your step and speed as necessary to walk with an even pattern. As your muscle strength and endurance improve, you may spend more time walking.
- When you can stand and walk for more than 10 minutes and your leg is strong enough so that you are not carrying any weight on your walker (often about 2 to 3 weeks after surgery), you can begin to use a cane. Hold the cane in the hand opposite the side of your surgery.

STAIRS

The ability to go up and down stairs requires strength and flexibility. At first, you will need a handrail for support and will be able to go only one step at a time. Always lead up the stairs with your non-operative leg and down the stairs with your operated leg. Remember: "Up with the good and down with the bad." **Stair climbing is an excellent strengthening and endurance activity. Do not try to climb stairs higher than the standard height (7 inches) and always use a handrail for balance.**

DISLOCATION HIP PRECAUTIONS

Total Hip (posterior approach)

- Keep a pillow between your leg while in bed
- Do not lie on your surgical side for 3 to 4 weeks.
- Whenever possible, get in and out of bed from the operative side
- To sit, use an armchair that is high, with a firm seat. Place the operative leg ahead. Using both hands and the good leg, ease into the chair. Do not sit in a chair where your knees are higher than your hips.
- Do not cross your legs
- Do not bend the hip beyond a right angle (90 degrees to the body)
- Do not lean forward while sitting on the toilet or chair
- Do not attempt to tie shoes by leaning forward while seated in a sitting position or by putting the foot out to your side.
- Use an elevated toilet seat, preferably with side arms
- Avoid low, soft chairs or sofas

DISLOCATION HIP PRECAUTIONS *(continued)*

Total Hip (anterior approach)

- Although the chance of having a dislocation is much less with the anterior approach, it is still possible to dislocate the hip.
- We do not recommend extreme bending at the waist or extreme internal or external rotation of the hip for the first six weeks.

KNEE PRECAUTIONS

- Do not kneel on the knee.

MANAGING YOUR PAIN

Your surgeon will have specific instructions regarding pain management and medications. Most patients go home taking a narcotic to manage pain. Some surgeons may incorporate an anti-inflammatory medication like ibuprofen as a supplement. Icing the operative site is another way to manage the pain. Please refer to your surgeon's discharge instructions regarding pain and icing schedule.

PREVENTING INFECTION

The most effective way to prevent infection is proper handwashing. Hand hygiene is the single most important method of controlling the spread of bacteria. Please wash your hands regularly using antibacterial soap and warm water.

REPORTABLE SIGNS AND SYMPTOMS OF INFECTION

IMPORTANT: If you develop any of these symptoms after surgery, please call the office immediately at 404-355-0743.

- Fever greater than 101.5 degrees
- Increased pain to the operative joint
- Increased drainage, redness, foul smell or swelling to the incision site



PREVENTING BLOOD CLOTS

A blood clot in the leg is considered a post-op complication and is an emergency! The best way to prevent a blood clot from forming is to avoid immobility and to walk hourly to promote the blood flow circulation. You may go home with compression stockings and/or a sequential compression device to both legs. Although these do not take the place of walking, they can assist in promoting lower extremity circulation, prevent swelling, and aid in preventing the development of a blood clot.



REPORTABLE SIGNS AND SYMPTOMS OF BLOOD CLOTS

- Severe calf pain or swelling that does not respond to ice or elevation
- Severe calf pain when walking or flexing your foot
- Please call 911 for any chest pain or shortness of breath

Unless otherwise instructed, it is very important to take your anticoagulant (blood thinner) as instructed. Most surgeons will have you take an aspirin tablet twice a day for up to four weeks to prevent blood clots from forming. Other surgeons may have you use an alternate medication that is to be taken as instructed. As with any medication, there can be side effects. Please contact our office if you develop any side effects to the blood thinner such as:

- Bloody or black stool
- Blood noted in urine
- Increased bruising to extremities or trunk
- Excessive nose bleeds
- Vomiting dark fluid or “coffee-ground” material

POST-OP NUTRITION

Eat lightly following the procedure (gelatin, liquids, soups). You may experience some nausea or vomiting. When the nausea subsides, drink plenty of fluids. Resume your normal diet the next day. No alcoholic beverages for 24 hours after surgery or while taking pain medications. In order to heal without any complications and improve your strength and endurance, it is important to eat well and increase your protein intake. Some forms of protein include:

- Chicken/ fish/red meat
- Peanut butter/ almond butter
- Yogurt
- Eggs/ egg whites
- Rice and beans (complete protein)

PREVENTING CONSTIPATION

Pain medications (narcotics) have a side effect of causing constipation. To prevent this, here are a few suggestions:

- Take an over-the-counter stool softener two times a day
- Increase water intake
- Increase fiber in diet i.e. raw fruits, vegetables, whole wheat
- Try warming up 6 to 8 ounces of prune juice in the morning

DRESSING CHANGES

Care of your dressing bandage will be determined by your surgeon's instructions. Please refer to your discharge instructions regarding care of your dressing. As a general rule, dressings should be kept dry. Please do not shower or submerge your operative leg in a bathtub, pool or Jacuzzi until otherwise instructed by your surgeon.

HOW WILL I KNOW WHEN MY DRESSING NEEDS CHANGING?

The release of blood or fluid from your wound after surgery is completely normal. As the gel absorbs this, the dressing will swell slightly and you will notice staining under the waterproof cover (picture 2). When the gel becomes fully saturated and you notice staining to the edge of the gel area, it is time to have your dressing changed (picture 3).

Picture 1:

Dressing immediately after operation with no ooze.



Picture 2:

Dressing a few days after operation. Some ooze, but does not need changing.



Picture 3:

Ooze from the wound has reached edge of dressing. This needs to be changed.



POST-OP DENTAL INSTRUCTIONS

In rare cases, artificial joints can become infected after simple procedures such as dental cleaning. Due to risk of infection, you should not have dental work during the first three months following your joint replacement. If a dental crisis does occur during this time, please call your surgeon's office for instructions.

Please note that any post-op infection such as a urinary tract infection, upper respiratory infection or sinus infection can potentially infect the new hardware if you do not get treated. If you develop any bacterial infection post-operatively, please contact your primary care physician and explain that you have recently had a new joint placed and need to be treated.

DRIVING

Your surgeon will notify you of when you are able to begin driving. Please do not drive while taking pain medications.

SMOKING

Please stop smoking post-surgery. Smoking can limit blood flow to the joint and therefore slow the healing process. Please speak to your MD regarding a nicotine patch or other smoking cessation product for post-op use if necessary.

FOLLOW-UP

It is extremely important to keep your follow-up appointments with your surgeon to ensure that you have the best possible outcome. Please make sure you have all of your follow-up appointments scheduled.

Congratulations on your new total joint replacement! You have taken the first step in reclaiming your quality of life.

REMEMBER:

- **You are not sick!** You are healthy and have a brand new Joint. USE IT. Get up and walk on it. The more you use it, the less painful it will be and the better range of motion you will have later on.
- **Exercise.** Continue to do your Home Exercise Plan twice a day. Walk hourly.
- **Take care of yourself.** Eat properly, drink your fluids, take your medications as scheduled, wash your hands regularly and watch for early signs and symptoms of infection. You can call the office or the nurse case manager if you have any concerns or questions about your post-operative needs.
- **Be patient.** It may take up to six months before you feel completely “back to normal.” Remember: your recovery is a marathon, not a sprint.



IMPORTANT NUMBERS

Surgeon: _____

Primary MD: _____

Nurse Case Manager: 404-355-0743, ext. 1740 (POSC-Perimeter)

In Case of Emergency:

**CALL
911**



PEACHTREE ORTHOPAEDIC SURGERY CENTERS

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