



Your Path to Recovery

JointVenture
Rebuilding Together



OAKLEAF
SURGICAL HOSPITAL
physician owned. patient centered.

Joint Replacement Surgery 800.635.6197

oakleafsurgical.com



Thank you for choosing OakLeaf Surgical Hospital for your joint replacement surgery.

We want to help you return to an active lifestyle as soon as possible, keeping in mind that a full recovery may take 6 to 12 months. A successful surgery requires that you take an active role in your preoperative and postoperative care as well as physical rehabilitation. Our care team is here to provide you with compassionate and expert care.

This booklet is designed to provide you with information you need to prepare for your upcoming surgery. Having this knowledge will help you actively participate in your care. Below you will find a list of contact numbers if any questions arise prior to or following your surgery.

- Chippewa Valley Orthopedics 715-832-1400

- OakLeaf Surgical Hospital Operator 715-895-9400
- Joint Venture Class Coordinator 715-895-9412
- Nurse Navigator 715-895-9565
- Chart Prep 715-839-1700
- Case Management 715-895-9564
715-895-9561
- Pharmacy 715-895-9470
- Billing 715-858-3726
- Respiratory 715-895-9385
- 2nd Floor Nursing 715-895-9551

- Chippewa Valley Anesthesia Associates 715-598-1711

- Northwoods Physical Therapy
- Altoona Therapy Office 715-839-9266
- Chippewa Falls Therapy Office 715-723-5060

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Let the Journey Begin...

You have been scheduled or are considering having joint replacement surgery at OakLeaf Surgical Hospital.

Here are your next steps:

1. Identify a coach, a friend or family member, who can help support you throughout your surgery preparation and recovery.
2. Reference your Presurgical Checklist.
3. Review the information in this booklet to help guide you through the entire Joint Venture journey.
4. Call the Joint Venture class coordinator (**715-895-9412**) to discuss options for attending Joint Venture class in-person or virtually.
5. Schedule a preoperative physical exam with your primary care provider.
6. Optimize your health by:
 - Nicotine cessation.
 - Eating well-balanced meals.
 - Beginning preoperative exercises.
 - Making time for rest and practicing healthy sleep habits.
7. Receive three OakLeaf Surgical Hospital preoperative phone calls.
8. Prepare your home, obtain any necessary medical equipment.

What is Joint Venture?

Joint Venture is a free educational class offered by Oakleaf Surgical Hospital for all hip and knee replacement patients. The goal of the class is to help our patients feel prepared for their total joint replacement. An Oakleaf registered nurse provides education on ways to prepare for surgery, discusses what to expect throughout the joint replacement journey, and shares tips for recovering at home. The course includes a variety of topics and plenty of opportunities for patients and their caregivers to ask questions about their upcoming surgery.

When are the Joint Venture classes?

Joint Venture classes are offered at least four times per month, on alternating Tuesdays and Wednesdays from 4pm-6pm at Oakleaf Surgical Hospital. Patients interested in attending one of these sessions are welcome to bring a guest of their choice and should reach out to the Joint Venture class coordinator as soon as possible to choose a date that works best for both of them to attend.

Unable to attend the in-person Joint Venture class?

If patients are unable to attend the in-person class, there is an option to view the Joint Venture class video online, or we may be able to arrange an in-person session at an alternate time. Regardless of the way the information is received, patients should begin reviewing the class content sooner than later to gain the most benefit and optimize their health prior to surgery.

Ready to begin your Joint Venture journey?

Contact our Joint Venture class coordinator (**715-895-9412**) to sign up for an in-person class, receive instructions on how to view our class video on the Oakleaf Surgical Hospital website, or discuss the possibility of arranging an alternate date/time to attend an in-person class.

Joint Venture Booklet: Your Path to Recovery

In addition to the in-person or online courses, Oakleaf Surgical Hospital provides patients with our Joint Venture booklet. It includes important information discussed during our Joint Venture class, guiding our patients throughout their Joint Venture journey. We encourage patients and their coaches to review this valuable resource, bring it with them to the in-person Joint Venture class, take it along to any upcoming appointments, write notes in it, and reference it as often as needed.

If you have any questions or would like to learn more information about our Joint Venture class, please call (**715-895-9412**) and speak with our Joint Venture class coordinator. We hope you will join us and look forward to meeting you.

Patient Checklist

AS SOON AS POSSIBLE, once your surgery has been scheduled

- Identify your Coach (family or friend) to assist you before and after surgery.
- Call our **Joint Venture Class Coordinator (Melissa 715-895-9412)** to schedule a date and time when you and your coach can attend our Joint Venture Class, which provides a wealth of information.
- Schedule/complete dental cleaning or other necessary dental work so that all care is completed within the timeframe recommended by your surgeon.
- Schedule a pre-operative physical with your primary provider, within the 2-4 weeks before your surgery date.
- Notify **Chippewa Valley Orthopedics** with the date of your pre-operative appointment.
- Schedule Pre-habilitation, a pre-surgical Physical Therapy visit, if your surgeon has recommended it.
- Schedule your first post-operative Physical Therapy appointment for 3-5 days after your surgery date.
- If you use nicotine products, review the benefits of quitting or cutting back on nicotine use listed within your Joint Venture booklet and consider the positive impact it can have on your recovery. (Patients are recommended to be nicotine-free for the 30 days prior to surgery; your surgeon may require it. Resources available in your booklet.)
- Begin preparing your home for your recovery. (See "Tips for Preparing Your Home" in your booklet.)
- Complete the Patient Outcome Assessment (which will be sent to you in an email from OakLeaf Surgical Hospital).

1-3 WEEKS BEFORE SURGERY

- Choose a pharmacy you plan to use after discharge. Check their hours for possible evening, weekend or holiday discharge needs.
- Choose where you would prefer to get labs drawn, if needed after discharge.
- Complete an Advance Directive document, if desired, and have it signed prior to your surgery date.
- Obtain or make a list of all current medications (prescription, over the counter, herbals, and supplements).

0-2 DAYS BEFORE SURGERY

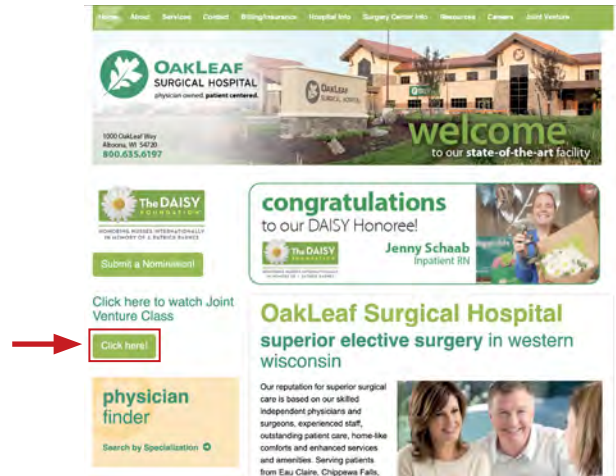
- Take your first presurgical shower, using the 3-day Surgical Soap Cleansing Kit. Follow instructions closely.**
- Make or buy ice; you will be sent home with a Polar Cube water cooling system that requires ice. Ice cubes or blocks need to be placed directly into the Polar Cube. Do Not plan to use frozen bottles of water.
- Take your second presurgical shower, using the 3-day Surgical Soap Cleansing Kit.**
- Remove any nail polish, acrylic nails, jewelry, false eye lashes, or piercings. Nails should be clipped and clean.
- Receive phone call or text message with your arrival time for surgery and when to stop eating and drinking.
Arrival time: _____ **Stop eating/drinking:** _____
- Gather documents you will need to bring with you to the hospital: Photo ID or driver's license, insurance card, Advance Directives-if you have one completed.
- Start packing for the hospital. See the list "What to Pack for the Hospital" provided in your Joint Venture booklet.
- Take your third and final presurgical shower, using the 3-day Surgical Soap Cleansing Kit.**
- Take medications that you were told to continue, using the smallest amount of water needed to swallow them.
- If you plan to use a front-wheeled walker or crutches after surgery, bring those items with you to the hospital. A physical therapist will inspect them for safety and adjust them to your height.
- If you use a CPAP or BiPAP for sleep apnea, bring it with you to the hospital.

Virtual Class

If you are unable to attend an in-person Joint Venture class or would like to review the video after class, please follow the instructions below to find the appropriate video(s) for our virtual class on our website, oakleafsurgical.com.

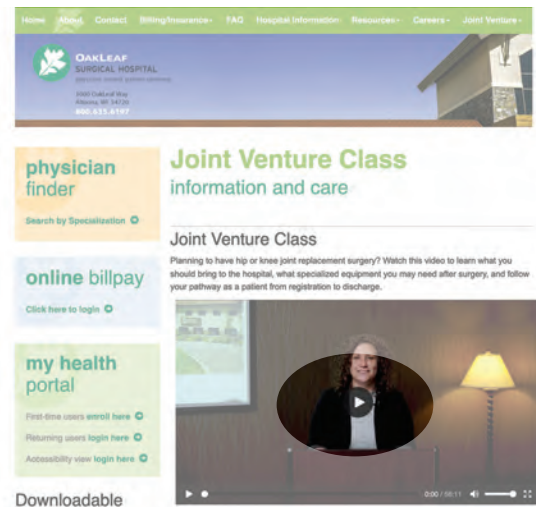
View through the website:

1. Go to: oakleafsurgical.com/jvclass.htm
2. Click on the red play button.



Joint Venture Class

If you experience any technical difficulties or have any questions regarding the video content, please contact our Joint Venture class coordinator at **715-895-9412**.



Patient Outcome Assessment




Help us track your recovery and measure your improvement

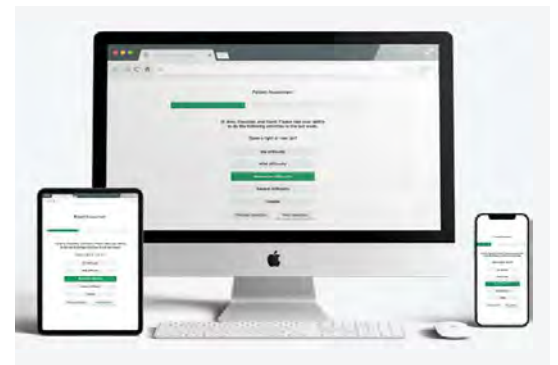
Many people in your situation have received similar care to improve their quality of life. Before you know it, we expect you will be back to doing the things you love.

As one part of your provider's evaluation of your recovery after surgery, we will have you complete several online assessments at various times throughout your recovery process. These assessments are a set of statistically validated questions that are designed to track both your physical recovery, as well as the improvement to the overall quality of your life.

There are no right or wrong answers, but it is important that you answer each question to the best of your ability. You can expect each assessment to take about 10 minutes to complete.

Next Steps

-  **Check your email or text messages**
A member of our Outcome Team will contact you by email or text message a few days before you are scheduled to take the first assessment to provide you with all the information you need.
-  **Complete assessment**
It is important that you complete each assessment within a few days of being contacted. This allows your care team to have all the information needed to provide you with the best care possible.
-  **Questions?**
If you have any questions, contact a member of our Outcome Team at oakleafsurgical@patientoutcomes.com.



Sample Question

What amount of pain have you experienced when going up or down stairs?

None Mild Moderate Severe

Caregiver/Coach

An important part of the patient's care team

Thank you for taking on the important role of being a “Coach” for your family member or friend. Throughout the total joint replacement journey, a coach provides emotional support and encouragement and serves as an important member of the care team. By reviewing the Joint Venture class information along with your family member or friend, you have already taken the first step in learning more about how you can help them prepare for surgery, as well as how you can contribute to a successful recovery following their joint replacement.

Your assistance during the first 3 days after surgery will help your family member or friend recover in the comfort and safety of their own home. Afterwards, it is beneficial to offer assistance at least once a day with food, walking, and any light chores for approximately one to two weeks. Additional ways you can support your family member or friend are mentioned below.

Medication

You play a key role in making sure your family member or friend has prescribed medications available and takes them as directed.

- Consider starting a medication journal after surgery, to keep track of dates and times each medication was taken.
- Encourage adequate pain control (medications, ice, elevation, etc.)

Activity and Exercise

Encourage your family member/friend to walk frequently and perform exercises to increase range of motion and strengthening of their new joint.

Helping at Home

Although it is important to motivate your family/friend to be as independent as possible, they will still need assistance with personal hygiene, meal preparation, and household chores for a period of time after returning home from surgery.

Appointments

Keep track of medical appointments and provide transportation to and from the hospital, surgeon’s office, physical therapy appointments, and any other appointments. If the patient desires, attending their after-surgery visits with them can be helpful for you and the patient.

Don't forget to take care of yourself! Helping to care for someone else can be hard work; make sure to eat well, rest, and take time for yourself.

Preparing for Surgery

Preoperative Physical Exam

Once you have decided to have a total joint replacement, your orthopedic surgeon will ask you to schedule a complete physical examination with your primary care provider or specialist within 30 days prior to the day of your surgery.

Laboratory/Imaging Tests

You may need to have bloodwork, a urine test, an EKG of your heart and possibly a chest x-ray to make sure you are healthy enough to have surgery and complete the recovery process. This will be determined by your primary care provider or specialist.

Immunization

Speak with your surgeon and/or primary care provider regarding any recent or upcoming immunizations/vaccinations prior to surgery.

Medications/Allergies (have a list ready)

During your preoperative visit, you will talk about medications you are currently taking. Your provider may tell you how to take your medications before surgery. This will be discussed further during your preoperative pharmacy phone call.

Dental Care

To reduce the risk of infection to your new joint, plan on seeing your dentist at least two weeks prior to your surgery for any dental work or cleanings. Your surgeon will inform you when it will be best for you to see your dentist after surgery. In order to decrease the risk of infection to your new joint, antibiotics may be recommended prior to all postoperative dental procedures and cleanings.

**Dental Emergency: If there is a dental emergency during the two weeks before your surgery or within the 12 weeks after surgery, it is important to notify your surgeon as soon as possible.*

Optimizing Your Healing Process

There are steps you can take to prepare your body before surgery that will optimize the healing process afterwards.

- ✓ Quitting or cutting back on nicotine use (lung hygiene and circulation)
- ✓ Eating well
- ✓ Exercising
- ✓ Getting plenty of rest

Smoking/Nicotine Cessation

At our facility, patients are encouraged to be nicotine-free 30 days prior to surgery. This decreases the negative effects nicotine has on your circulation and ensures oxygen-saturated blood reaches the surgical site postoperatively.

There are several risk factors associated with continuing nicotine use prior to surgery:

- Inflamed arteries
- Decreased oxygenation
- Increased risk of scar formation
- Reduced joint mobility
- Increased risk of infection

The use of nicotine products including cigarettes, e-cigarettes, chewing tobacco, and vaping delay the healing process. The likelihood of a patient being readmitted to the hospital increases as much as five times for patients who use nicotine.

If you quit using nicotine before your surgery, you will increase your ability to heal.

For additional information, contact respiratory therapy at **715-895-9385**.

Smoking/Nicotine Cessation

Health Benefits of Quitting

20 minutes – Blood pressure and pulse return to normal.

8 hours – Oxygen levels return to normal.

2 days – Ability to smell and taste begin to improve as damaged nerves regrow.

2-3 weeks – Circulation and lung function improve.

1-9 months – Coughing, congestion, tiredness, and shortness of breath decreases.

5 years – Risk of lung cancer decreases by half; risk of stroke becomes the same as nonsmokers.



The following is a list of support programs to help you quit smoking:

- Free National Quit Line 800-QUIT-NOW or 800-784-8669
- American Lung Association 800-586-4872
- American Cancer Society 800-227-2345
- National Cancer Institute's Smoking Quit Line . . . 870-448-7848

Breathing Easier

To optimize your breathing and promote lung expansion, please bring the following items to OakLeaf Surgical Hospital with you on the day of surgery, if you have them:

- Breathing medications used at home (i.e., inhalers, nebulizer vials, nasal sprays)
- CPAP or BiPAP machine



A few other tools that staff may use to help you facilitate lung expansion following surgery include:

- Supplemental oxygen
- An incentive spirometer
- Frequent reminders to cough and take deep breaths



Eating Well

Nutrition before surgery is just as important as after surgery. Some loss of appetite can occur after surgery. Eating a well-balanced diet that incorporates protein and fiber is important to help with wound healing and prevent constipation. Here are some healthy considerations for your nutrition before and after surgery:

- Incorporate foods such as fruits, vegetables, meats, nuts, eggs, and protein shakes.
- Avoid foods high in fat, sugar, or salt.
- Stay hydrated. Drink at least 6–8 glasses of water each day.
- If you are diabetic or borderline diabetic, maintaining stable blood sugar control is important for the healing process and reduces your risk of infection.

If your surgeon has recommended that you lose some weight or need to maintain better control of your blood sugars, you may want to discuss this with your primary care provider. Consider asking to meet with a dietician, to discuss options available and what might be the best approach for you.



Exercises Prior to Surgery

Performing the following exercises before surgery will help you develop muscle memory and allow you to perform them easier after surgery. Start the following exercises as soon as possible, one time each day. These exercises should not cause increased pain. If you experience pain while performing these exercises, please contact your surgeon or physical therapist prior to resuming the exercises.

Ankle Pumps

Pump foot and ankle up and down and move ankle in circles. This is an important exercise to do because it helps prevent blood clots. Do 10-20 repetitions daily.



Quad Sets

Tighten the muscles on the top of the thigh by pushing your knee down into the bed. Hold for 5 seconds. Do 10 repetitions daily.



Heel Slide

Lying on your back or in a reclined sitting position with your legs out straight in front of you, slide your heel up the bed toward your buttocks. Keep the kneecap pointed toward the ceiling and return to the start position with good control. Bend knee until a stretch is felt and try to bend a little further each time. Do 10-20 repetitions daily.



Activity of Daily Living (ADL) Kit

We will provide you with an ADL kit during your stay at OakLeaf Surgical Hospital. This consists of four pieces of medical equipment that will go home with you to help with your safety at home.

1. **Long handled sponge** - assists with lower extremity washing, reaching your back, and making it safer for you while in the shower.
2. **Reacher** - can be used to make it easier while dressing or for picking up items in the bathroom or the kitchen.
3. **Sock aid** - (putting on socks with less assistance) place your sock on the bottom of the cuff, place it on the floor, and use the ropes to help with getting your sock on.
4. **Long shoehorn** - used when sitting and putting shoes on and taking them off.



Importance of Rails

It is important to consider putting rails by your steps that you plan to use on a regular basis, whether they are the ones going into the house, going to the basement, or to an upper level. The reason for this is because you will find that to be more safe and secure than using crutches alone. Also, placing rails in the bathroom (grab bars, safety rails) near the toilet to be able to assist with getting up and sitting down may be beneficial for you.

OakLeaf Phone Calls

You will receive two phone calls from OakLeaf Surgical Hospital. These may occur in any order, about 1-2 weeks prior to surgery.

1. Preoperative (Chart Prep) Nurse

One of our chart prep nurses will contact you to review your health history and to go over surgery details with you. You can expect the phone call to take about 15 minutes.

The business day before surgery, you will be given your arrival time by a phone call or text message. You will also be given eating and drinking instructions for surgery at that time. Please take note of the information and follow it closely.

If you have any questions, call Chart Prep Monday through Friday between 8:00am and 4:30pm.

2. Pharmacy

An OakLeaf Surgical Hospital pharmacist will call you up to two weeks prior to your procedure. The purpose of the call is to obtain a complete list of the medications (prescription, over-the-counter, herbal, dietary supplements, and/or vitamins) you use at home. The pharmacist will need to know the name, strength, and when you take every medication.

OakLeaf Surgical Hospital will provide most medications you will need during your stay. Occasionally, the pharmacist will ask you to bring in medication from home on the day of your surgery. Please do not bring in your medications from home unless the pharmacist specifically asked you to bring in a particular medication. Any medications brought into the facility (whether they will be used or not) will be given to your preoperative nurse, who will deliver them to the pharmacy department to be stored in a secure location during your stay.

Medications are not allowed at your bedside because staff do not want to duplicate anything. Another reason is to ensure that you do not take anything the doctors do not want you to take while you are at OakLeaf Surgical Hospital.



OakLeaf Phone Calls

2. Pharmacy (cont.)

After your medication list is complete in our system, the pharmacist will review your list and inform you what medications you should or should not take prior to surgery.

For any medications that need to be held prior to surgery, the pharmacist will instruct you when you need to stop taking them. They will also tell you which medications, if any, need to be taken on the day of surgery. If your surgeon or provider performing your preoperative physical gives you instructions on how to take your medications, please follow their instructions instead of ours. If you have any questions, please feel free to ask the pharmacist while you are on the phone call. If you have any medication changes before your procedure, please call our pharmacy department using the number listed in the front of your Joint Venture booklet.

Important Considerations

Something else to take into consideration before surgery is identifying which pharmacy you would like your medications filled at. This could be your normal pharmacy or a local pharmacy closer to OakLeaf Surgical Hospital. Some things to think about when making this decision are:

- What day are you going to be discharged?
- Will your pharmacy be open on that day?
- If so, how late will they be open?

Equipment Needs After Surgery

Case Management

A member of our Case Management Team will meet with you prior to discharge.

- ✓ How to prepare your home for recovery
- ✓ Your Medical Equipment Needs:
 - A front wheeled walker is recommended for most surgical patients, especially those who are unfamiliar with crutches and would benefit from increased stability and safety.
 - If you have had lower body surgery before and used crutches recently and feel safe, there is no need to use a walker.
 - If you have multiple steps to do to get into or around your home and have one railing or no railings, you will need crutches.
 - A cane can be used for less than 3 steps, if a solid railing is in place.
 - My equipment needs after surgery:



Equipment Needs After Surgery

Case Management (cont.)

- ✓ Support People/Services
 - Support at home throughout your recovery
 - Securing a driver upon discharge and for follow-up appointments
- ✓ Outpatient Appointment Locations
 - Where do I prefer to have outpatient physical therapy?

**Since schedules fill up quickly, OakLeaf staff encourage patients to call the therapy location of their choice ahead of time to set up their first post-operative physical therapy appointment, choosing a date about 3-5 days after surgery. If the physical therapy location requires an order ahead of time, please call Chippewa Valley Orthopedics. Contact your insurance company if you have questions regarding physical therapy benefits, coverage, and limitations.*

Case Management

Our overall goal is to assist you in returning home.

Your hospital healthcare team will include the following members: you, your surgeon, physician assistant or nurse practitioner, hospitalist, physical therapist, registered nurse, and case manager. This team will be continuously evaluating your abilities to return home.

Furthermore, your case manager will work with you to ensure you have all the necessary medical equipment and any necessary services you may need to safely discharge to your home.

If you are not physically and/or medically able to return home, the case managers will assist you with choosing the best option for post-acute care. Some examples of these would include a skilled nursing facility, swing bed, or home health care. Transitioning to post-acute care will be based on physical therapy needs, medical needs, insurance requirements/authorizations, and facility acceptance.

If there are additional questions or concerns related to discharge planning, please contact the Case Management Department at OakLeaf Surgical Hospital.

Our case managers can be reached Monday through Friday between 8:00am and 4:30pm at **715-895-9561** or **715-895-9564**.



Tips for Preparing Your Home

There are many things you can do to prepare your home before surgery. Consider the following suggestions that may provide comfort and promote safety when you return home after surgery:

- ✓ It is important to have a proper chair on the main level of your home. This chair should be firm, yet comfortable and have arms. This will help when getting in and out of your chair. Attempt to have your feet flat on the floor by using a cushion or foot stool if needed. Your hips should be slightly higher than your knees, which is required for some hip replacement patients and a comfort measure for all patients.
- ✓ Remove tripping hazards, such as rugs, cords, or other items on the floor.
- ✓ Clean your home, do your laundry, and place clean linens on your bed.
- ✓ Prepare meals ahead of time or contact your nearest Meals on Wheels (contact your county's Aging and Disability Resource Center).
- ✓ Consider installing secure railings alongside staircases and sturdy grab bars in the bathroom.
- ✓ Consider installing nightlights in bathrooms, bedrooms, and hallways.
- ✓ Have any medical equipment you need available at home, immediately upon discharge.
- ✓ Place frequently used items so they are easily accessible, near the area you plan on spending most of your time recovering.
- ✓ Keep in mind that it is valuable to arrange for someone to help you with medication, walking, physical therapy, meal preparation, and personal hygiene during the first 2-3 days after surgery. For the next one to two weeks after that, it would be helpful to have someone continue assisting you with your needs at least once a day.
- ✓ Arrange for someone to care for your loved ones or pets.
- ✓ Arrange for someone to collect your mail.
- ✓ Arrange for someone to assist with lawn care or snow removal.

Overnight Accommodations

For information regarding overnight accommodations for your family/driver, please refer to our website and follow the instructions provided:

1. Visit our website at **www.oakleafsurgical.com**.
2. Go to **"FAQ"** in the navigation bar.
3. Click on **"Patient Information"** in the drop-down menu.
4. Scroll down to find **"Overnight Accommodations for Visitors"** and click on that section.



Before Surgery

Contact your surgeon within two weeks of your surgery date, if you have any of the following issues:

- ✓ Any open areas, rashes, sores, or in-grown toenails noted on your body.
- ✓ If you have a recent insect bite that appears red or irritated.
- ✓ If you have a new or recurrent infection.
- ✓ Emergent dental conditions.
- ✓ If you have a known metal allergy or are concerned you may have one.
- ✓ Scheduled immunizations.
- ✓ Recent fall.
- ✓ If you notice you are experiencing symptoms of the flu, a cold, or have a fever.
- ✓ If you have been on an antibiotic, within 2-3 weeks of your scheduled surgery.

Chippewa Valley Orthopedics & Sports Medicine

715-832-1400

Days Prior to Surgery

Two Days
Before Surgery



FIRST shower with surgical soap
(do not shave legs)

The Day
Before Surgery



SECOND shower with surgical soap
(do not shave legs)

Receive Hospital
Arrival Time



Arrival time for surgery:

Stop eating at:

NOTE: This includes mints, gum,
hard candy, and nicotine products.

Stop drinking fluids at:

The Day
of Surgery



FINAL shower with surgical soap
(do not shave legs)

Surgical Soap Instructions for Use

Your surgical soap kit has 3 sponges and a bottle of surgical soap in it. You will use this (one) kit for all 3 of your pre-surgical showers, beginning 2 days before your surgery date. Change your bed sheets after your first shower.

With **each** of your 3 showers, follow these steps:

1. Wash your hair first using your regular shampoo and conditioner. Rinse it well.
2. Wash your face and genital areas with your regular/usual soap.
3. Apply 1/3 of the surgical soap (from your kit) to **one** of the sponges.
4. Wash your body from the neck down, **AVOIDING** your head and genital area.
***This soap is for external use only, so make sure to keep it out of your ears, eyes, and mouth.*
5. After applying the soap, wait 60 seconds. Then rinse thoroughly.
6. Use a clean towel to dry off and put on clean clothing.
***It is common to have dry skin when using this soap; however, DO NOT USE LOTIONS, CREAMS, OR SKIN CARE PRODUCTS ON THE AREAS WASHED WITH THE SURGICAL (EXIDINE) SOAP.*

Your cleansing area:

Keep the cleanser out of the eyes, ears, and mouth.

For external use only.



Start preoperative bathing:

Su	M	Tu	W	Th	F	Sa
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*****Seek immediate medical attention if you experience any signs or symptoms of allergic reaction while cleaning your skin with this product at home.**

①



Thoroughly rinse the area to be cleansed.

②



Apply the minimum amount of product necessary to cover the area. Wash gently.

③



Thoroughly rinse the area again.

④



Repeat this process for each pre-surgical shower.

Surgery Date: _____

Stewart Berg Pelssig Harris Crow Carlson McCarthy

Knee Hip Hip Scope Shoulder

The Day Before Surgery

Hospital Arrival Time

The business day before your surgery, you will receive a phone call or text message from an OakLeaf Surgical Hospital staff member with your expected arrival time and instructions on when to stop eating and drinking. If your surgery is on Monday, you will be called on Friday. If you have not received a call or text message from one of our OakLeaf team members by 2:00pm the business day before surgery, please call **715-831-8130**.

Second Presurgical Shower

Remember not to apply lotions, creams, or other skin care products to the areas you applied the surgical soap to. Remove any nail polish, acrylic nails, false eyelashes, jewelry, piercings, etc.

Pack for Your Stay

Use the list on the next page to ensure you have the items you will need to make your journey smooth and more comfortable.

Belongings Checklist

Please check off the items you have brought with you that must stay throughout your time at the hospital. We ask that you keep only the essential items needed for your stay and send any extra belongings/valuables home with your family.

Any belongings that remain with you will be inventoried with nursing staff for the safety of staff, yourself, and other patients.

Essential Items

- | | |
|--|---|
| <input type="checkbox"/> Glasses | <input type="checkbox"/> Walker |
| <input type="checkbox"/> Hearing aids | <input type="checkbox"/> Knee scooter (if necessary for specific surgery) |
| <input type="checkbox"/> Dentures - <input type="checkbox"/> top <input type="checkbox"/> bottom | <input type="checkbox"/> Other medical equipment - specify _____ |
| <input type="checkbox"/> Photo ID /Insurance Card | <input type="checkbox"/> Clothes to go home in |
| <input type="checkbox"/> Phone/charger | <input type="checkbox"/> Home medications that have been instructed to bring with |
| <input type="checkbox"/> CPAP | |
| <input type="checkbox"/> Crutches | |

Non-Essential Items

- | | |
|--|--|
| <input type="checkbox"/> Cash - specify amount _____ | <input type="checkbox"/> Jewelry - specify _____ |
| <input type="checkbox"/> Wallet/Purse | |
| <input type="checkbox"/> Car Keys | <input type="checkbox"/> Extra clothing more than outfit to discharge home in |
| <input type="checkbox"/> Tablet | <input type="checkbox"/> Home medications that pharmacy has not deemed necessary for your stay |
| <input type="checkbox"/> Headphones | |

Prohibited Items (should be sent home or secured while you're here)

- | | |
|--|--|
| <input type="checkbox"/> Any weapons (guns, pocket knives, etc.) | <input type="checkbox"/> E-Cigarettes |
| <input type="checkbox"/> Cigarettes/Tobacco products | <input type="checkbox"/> Illicit drugs/Alcohol |

Additional Items

Please give the completed list to your pre-op nurse and they can answer any questions you may have!



Your Surgical Pathway

Morning of Surgery

Take your final presurgical shower, but do not shave your surgical site or the surrounding area. Knicks or cuts from shaving those areas could increase your risk of infection, and your surgery could end up being postponed. (Our nursing staff will clip any hair in the surgical area for you, when you are in the preoperative area getting ready for surgery.)

Dress in clean, comfortable clothing. Do not apply any makeup, lotions, or powders.

You may brush your teeth and rinse your mouth, but do not swallow any water.

Do not eat or drink anything the morning of your surgery, unless you have been instructed otherwise by your nurse or surgeon.

You may be instructed to take some of your routine medications with a sip of water, but please follow instructions given to you by either your surgeon, preoperative nurse, or OakLeaf Surgical Hospital pharmacist.



Your Surgical Pathway

Arriving at the Hospital

Come to the hospital at your scheduled arrival time in order to begin the registration process. Enter through **DOOR #3** and check in with our receptionist in the main lobby. You will be guided to registration where you will be asked to provide your photo ID and insurance cards. One of our staff members will verify your name, address, insurance information, and planned procedure. When this information has been gathered and is complete, you will be given a wristband and asked to take a seat in the lobby where you will eventually meet your preoperative nurse.

Please arrive on time so that our team of experts can help you prepare for your stay.

In some cases, being late may result in having to reschedule your surgery to a later time during that day.

Your Surgical Pathway

Preoperative Area

After finishing registration, a preoperative nurse or nursing assistant will greet you in the main lobby and accompany you and, if you wish, a family member back to our preoperative area. This is where our team of experts will continue to help you prepare for surgery.

You can expect to change into a hospital gown.

While you are in the preoperative area, staff will continually ask you to verify your name, date of birth, and the procedure you are having done, for safety purposes. In fact, you can expect many questions and a variety of activities to take place as our team helps you prepare for surgery.

Nursing staff will then do the following:

1. Check your vital signs and blood sugar. If your blood sugar level is greater than 180, there is a much greater risk that your surgery could be cancelled.
2. Draw labs and perform an EKG of your heart, if necessary.
3. Review your health history which includes:
 - Verifying the last date and time you took each of your home medications.
 - If any medications are brought into the facility, please give them to your preop nurse to secure them in our pharmacy department during your stay.
 - Verifying any allergies you have.
 - Asking when you last ate or drank anything.
4. Start your IV and provide any preoperative medications your physician has ordered for you.
5. Prep your surgical site by removing hair from the surgical area using clippers and washing with an antimicrobial soap. TEDS/compression stockings and SCDs (sequential compression devices) will be applied to your nonsurgical leg to help with prevention of blood clots and circulation.
6. Provide education about your surgery, including information about your recovery and postoperative pain management.
7. Inventory your belongings.

Your Surgical Pathway

Preoperative Area

You will then meet:

1. With an anesthesiologist to discuss your anesthesia options, which are discussed in greater detail in the “Anesthesia” section.
2. With your surgeon prior to surgery to answer any remaining questions you may have. Your surgeon will verify the surgical site with you and mark the area with their initials.
3. With your operating room nurse. Your nurse will ask you a few questions, address any concerns you may have, and escort you back to the operating room.

Nursing staff will make every attempt to keep your family/friend updated on your progress throughout your stay, as you request. There is also a status board in our lobby, which allows your family/friend to see where you are at in the operative process.



Your Surgical Pathway

Anesthesia Encounter

Chippewa Valley Anesthesia Associates will be your anesthesia provider at OakLeaf Surgical Hospital. Our team members look forward to being a part of your exceptional, individualized experience.

On the day of your surgery, you will meet your anesthesia team (anesthesiologist and certified registered nurse anesthetist) to review your history and anesthesia plan. The anesthesia options will be explained in the preoperative area prior to surgery. Your plan will be tailored to maximize your operative and immediate postoperative comfort, as well as reduce potential risks. Your personal care and safety are our top priorities.

Anesthesia options for a total joint replacement include either spinal anesthesia or general anesthesia. In addition to either spinal or general anesthesia, patients undergoing total knee replacements may have the option of receiving a nerve block for postoperative pain control.

Your Surgical Pathway

Anesthesia Encounter

Spinal Anesthesia

A spinal anesthetic causes numbing of the body from the mid-chest down to your toes, for approximately three hours. While in the operating room, you will receive relaxation medication through your IV. The anesthesiologist will then perform the spinal anesthetic by placing a small needle between the vertebral spaces of your spine and injecting a numbing medication. After ensuring its effectiveness, your care team will provide further IV sedation medications to help you rest comfortably during your surgery.

Rarely, a spinal anesthetic may not provide complete numbness or be able to be placed. In this case, your anesthesia plan may switch to a general anesthetic, which is discussed in greater detail on the next page.

Spinal anesthesia has many benefits. It can be used in combination with oral medications to target inflammation and nerve pain, in conjunction with a nerve block to provide multi-modal pain control in the initial stages of recovery. Using these techniques results in a decreased need for narcotic pain medications. Another benefit of spinal anesthesia includes limiting or avoiding the side effects from having a general anesthetic, which involves nausea, vomiting, sore throat, and risk of dental injury.

Overall, patients have a decreased risk of complications for total joint arthroplasty with spinal anesthesia versus a general anesthetic.

Risks to spinal anesthesia are extremely rare but may include infection and bleeding in and around the spine. A more common risk includes a persistent spinal fluid leak that may cause a "spinal headache." This risk decreases with age, is less than 1%, and is easily treated.

Individuals with increased risk factors for such complications will not be offered the option of receiving a spinal anesthetic.

Some patients are not candidates for spinal anesthetics. Your anesthesiologist will discuss the best option for you.

Your Surgical Pathway

Anesthesia Encounter

General Anesthesia

A general anesthetic is the type of anesthetic most people associate with having surgery. Medication is placed through your IV to induce a peaceful “sleep.”

Once asleep, a breathing tube will be placed to help protect your lungs and ensure proper ventilation during your surgery. Multiple monitors will be used to ensure your safety and proper depth of anesthesia. Once surgery is completed, your breathing tube will be removed as you start to wake up from the anesthetic.

Risk factors for general anesthesia include a sore throat, nausea, vomiting, and risk of dental injury. Nausea is the most common side effect and preventative medicines are given during the procedure. Your care team will do their best to eliminate nausea to help you feel more comfortable. Instances of dental, lip, tongue, or throat injuries are possible but rarely occur.

Nerve Block for Total Knee Replacement

Nerve blocks can be used in conjunction with either spinal or general anesthetics and are placed in specific areas of the body to aid in postoperative pain control. Nerve blocks are placed preoperatively, prior to entering the operating room. The type of nerve block offered for total knee replacements is an adductor canal block. It involves a small injection of local anesthetic into the middle inner thigh near the nerve that controls pain sensation to the front of your knee joint. We do not block the sciatic nerve, which controls pain from the back of the knee joint. The adductor canal block will significantly reduce your pain for approximately 12-18 hours. A mild sedative for relaxation will be given prior to placement.

Currently, we do not offer nerve blocks for patients undergoing total hip replacements.

Your Surgical Pathway

Surgical Suite

Upon entering the surgical suite, your operating room (OR) nurse will introduce you to other members of your OR team and guide you through the next steps. You may notice many people and various pieces of equipment in the room, which is normal for total joint replacement surgery. Please make sure to ask questions, if you have any. Your surgical team is here to keep you safe throughout your entire procedure.

Your operating room nurse will remain in the operating room with you, be your advocate as you rest comfortably during the procedure and will escort you to the postoperative area (recovery room) after your surgery is finished.

Members of your highly skilled, experienced operating room team include:

Operating Room Nurse—Guides you from preoperative area to the operating room and then to the recovery room. Your nurse stays with you throughout your procedure, overseeing the room and ensuring your safety.

Anesthesiologist—Meets you in the preoperative area to discuss anesthesia options, develops an individualized plan with you for surgery, administers anesthetizing agents in the operating room, and is present when you wake up from anesthesia.

CRNA (Certified Registered Nurse Anesthetist)—Continuously monitors your heart rate, heart rhythm, oxygen level, blood pressure, level of sedation, and administers medications to keep you comfortable and safe throughout the entire operation.

Anesthesia Technician—Present at the beginning and end of the procedure to assist with putting on and taking off monitoring equipment (a blood pressure cuff, a clip on your finger to monitor your heart rate and oxygen level, EKG patches). They also assist the anesthesia team with any other needs as you become more relaxed.

Surgeon—Performs your operation (with help from the rest of the operating room team members).

Surgeon's Assistant(s) (which may be a Physician Assistant, Nurse Practitioner, and/or a Licensed Athletic Trainer)—Helps the surgeon during your operation, finishes closing the incision, and applies your dressings.

Surgical Technicians—Members who hand the surgeon proper instrumentation and assists the surgeon and surgeon's assistant with other needs.

Radiology Technician—Takes x-rays in the operating room, per surgeon instruction.



Your Surgical Pathway Postoperative/Recovery Area

Following your surgery, you are taken to the recovery room where you are cared for by a registered nurse. You will remain there until you have met our established criteria for transfer to the second-floor unit, which will be approximately one hour.

Depending on the type of anesthesia used, you may wake up with an oxygen mask over your nose and mouth or a nasal cannula in your nose. This provides you with extra oxygen while you are still sleepy. When you fully awaken, you may experience blurred vision, a dry mouth, chills and/or nausea. If you had a spinal anesthetic, you may still feel some numbness in the lower half of your body. It is normal to experience these symptoms, and we will do everything we can to minimize this.

You may experience some discomfort during your time in recovery. Everyone has a different level of comfort. We will monitor your vital signs and provide proper pain management so that you are kept comfortable.

Depending on the type of anesthesia you received and how you are feeling, you may start taking in oral liquids/snacks at this time.



Your Surgical Pathway

Second Floor Suites

Once you have met the criteria for leaving the recovery room, your nurse will escort you to your room where you will be welcomed by your second-floor nurse and team. Other members of your second-floor care team will include a certified nursing assistant, physical therapist, case manager, and pharmacist. These members will all visit you following your surgery.

Once you are settled into your room, you will continue to recover from anesthesia and begin your rehabilitation journey.

Anesthesia Recovery

As a spinal anesthetic wears off, there is a potential you may have lower heart rates and blood pressures. This can cause lightheadedness. If you were to get up too fast or try walking when you feel this way, you could faint/pass out. Nursing staff will continuously monitor your heart rate and blood pressures frequently.

Oxygen Therapy

Most patients require oxygen for a short period of time after surgery. How long you receive the supplemental oxygen is specific to each patient.

However, being consistent with your respiratory exercises will shorten the time oxygen is needed.

Your Surgical Pathway

Second Floor Suites

Diet

Your diet will be advanced as tolerated, as long as you are not experiencing problems with nausea. Initially, after surgery we encourage you to eat lightly. Diabetic, vegetarian, and gluten free meals are options that may be offered. Your surgeon encourages you to sit up in a chair while eating your meals.

Activity

Our goal is to have you up and walking within the first four hours of arriving to your room. You will be encouraged to walk in the hallway frequently throughout your stay.

Bladder

The last area to “wake up” from spinal anesthesia are the bowel and bladder. For this reason, your surgeon may request that your operating room nurse place a catheter in your bladder while you are in the OR, to drain your urine. It is not uncommon to have a “leaky” bladder until the spinal has completely worn off. If you already have issues with your bladder, please let your care team know. If you have a urinary catheter in place, you can expect it to be removed as soon as you are able to walk safely following your surgery.

Bowels

Medications may be given to you during your stay to prevent constipation, which is a common concern after surgery. You should drink plenty of fluids and increase your fiber intake throughout your recovery.

Your Surgical Pathway

Second Floor Suites

Blood Clot Prevention

Ankle Pumps

Begin these exercises right away to reduce the risk of developing blood clots. This exercise can be done by moving your feet up and down, bending at the ankles.

TEDS (compression stockings)

This white elastic sock will be applied to your non-surgical leg in the preoperative area and to your surgical leg after surgery when appropriate. The TEDS help with circulation and help prevent blood clot formation. You will continue to wear these stockings at home as directed by your physician, which is approximately three weeks.

Medications

Anticoagulation (blood clot prevention) is a very important aspect of your medication regimen while in the hospital as well as when you go home. These medications reduce your risk of developing blood clots due to your procedure.

Some of these medications include aspirin, warfarin (Coumadin), rivaroxaban (Xarleto), and apixaban (Eliquis). It is very important to take the prescribed medication as ordered by your surgeon. If for any reason, including cost or availability, you are unable to take the ordered anticoagulant medication please reach out to your surgeon immediately. They will work with you to determine the best anticoagulant for your situation.

SCDs (sequential compression devices)

A soft, velcro wrap will be applied to your calves. These will periodically fill with air, massage your legs, and then deflate. SCDs are used to increase circulation throughout your legs and help prevent blood clots. The SCDs will not be needed at home.



Your Surgical Pathway

Second Floor Suites

IV Therapy

You will receive fluids through your IV for hydration, antibiotic therapy, and pain management after surgery.

Labs

Staff may visit you on the second floor during your stay to collect lab work that has been ordered by your surgeon or hospitalist.

Drain

For some patients having a joint replacement, a drain may be necessary to collect any excess fluid from around the surgical site. Your nurse will assist with removing this prior to discharge.



Your Surgical Pathway

Healing Process

Pain, bruising, and swelling are “natural” parts of the healing process. Our goal is to individualize your care and manage your pain and swelling using multiple methods that will assist you in functioning to the best of your ability. Initially, pain will be managed by techniques used within the operating room to help minimize the need for additional pain medications, including narcotics.

After surgery, medications will be prescribed for short term pain relief. Many types of medicines are available to help manage pain. They assist by targeting different types of pain, such as muscle spasms, swelling, incisional pain, and nerve pain in various ways. Medications will be ordered on either a scheduled basis or only when needed.

Opioid medications (narcotics) are also included in this combination, but they are reserved for severe pain. Your doctor may prescribe a combination of medications to decrease and minimize the need for opioids, which can be addictive, associated with postoperative complications, and may cause other negative side effects. Opioid dependency and overdose is a critical public health issue in the United States, so it is very important to use them only as directed by your doctor. As soon as your pain begins to improve, stop taking opioids.

Your healthcare team will discuss options that may work best to help ease your pain and swelling, to achieve a more tolerable level of comfort.

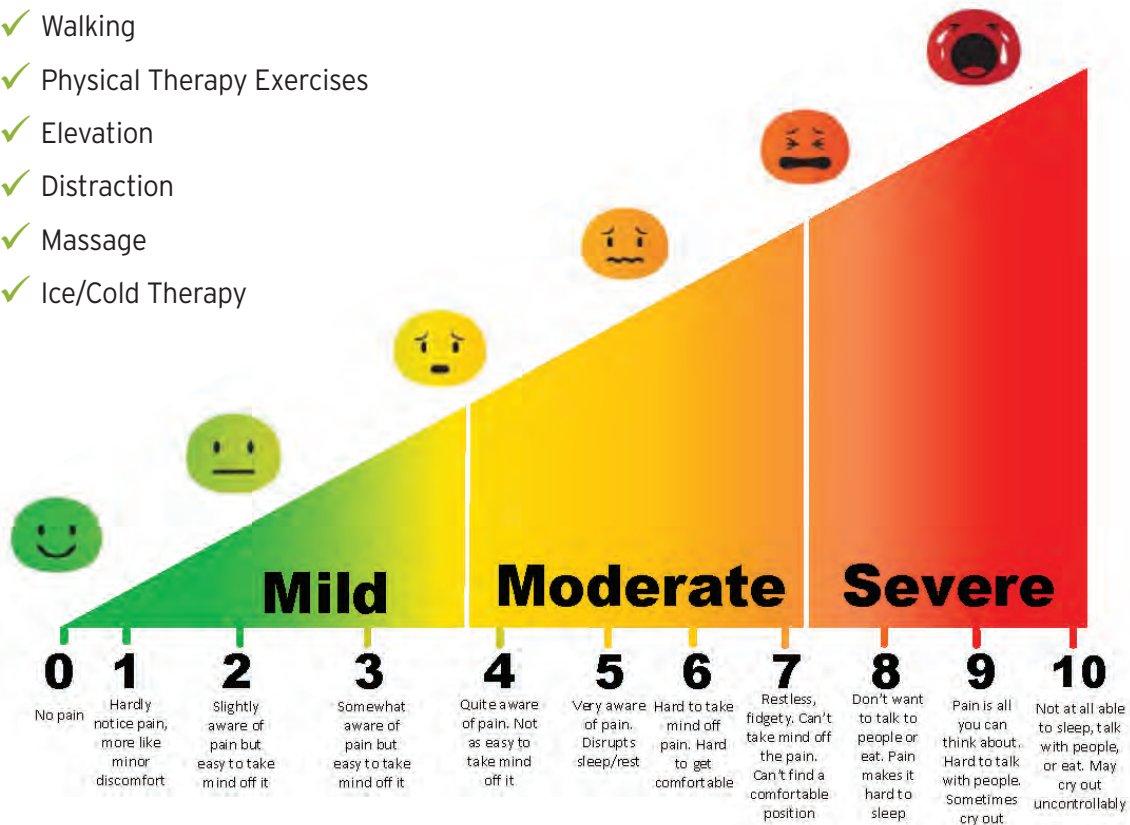
Your Surgical Pathway Pain Management Pain Scale

Below is our Pain Assessment Tool. Staff will ask you to rate your pain level using this tool.

Please notify staff if you continue experiencing pain so your team can help make you more comfortable.

There are many non-medication options available to assist with pain management and promote comfort:

- ✓ Repositioning/Movement
- ✓ Walking
- ✓ Physical Therapy Exercises
- ✓ Elevation
- ✓ Distraction
- ✓ Massage
- ✓ Ice/Cold Therapy



To help support your recovery and provide you comfort, OakLeaf Surgical Hospital offers a relaxation channel on the television in your room. It provides imagery and instrumental music, which has been chosen specifically to support a healing environment. This is a peaceful alternative to commercial television that may help reduce anxiety and promote comfort.

Your Surgical Pathway Pain Management

Cold Therapy

An iceman is a cooling device that allows ice water to circulate through a pad applied to your surgical site after surgery to help keep swelling to a minimum and reduce your pain. You will wear this as much as possible throughout your stay and when you go home. A towel should be placed next to your skin before applying the cooling pad to protect your skin.



Your Surgical Pathway

Physical Therapy

Physical Therapy

Specific exercises, walking, rest, elevation, and ice are all important for your recovery process. Physical therapy will see you in your room following your total joint surgery. They will review how to get in and out of your bed, chair, bathroom, and vehicle. Further instruction will include using a walker or crutches and navigating stairs. The physical therapist will also review any restrictions you may possibly have following surgery.

The exercises they will educate you about are very important for you to continue at home. This is vital to the success of your total joint replacement. It is expected that you perform these 2-3 times daily at home. You may need assistance from a friend or family member to complete these exercises and achieve optimal range of motion.

Movement every couple of hours will be helpful in preventing you from getting too stiff, to reduce swelling, and to prevent blood clots from forming.

Expect to have outpatient physical therapy 2-3 times each week and plan to have someone available to drive you.



Your Surgical Pathway Prior to Discharge

The decision for your discharge will be made collectively by your care team including you, your providers, physical therapist, nurse, and case manager. You and your care team will evaluate your progress for anticipated discharge. There are a few steps to complete and certain items to be taken into consideration to safely discharge.

1. Your surgeon or their assistant will check in on you, see how you are recovering, answer any questions you may have, and write discharge orders.
2. Your physical therapist will evaluate your individual needs and prepare you to return home safely.
3. All scheduled antibiotics and ordered medications will be completed.
4. Pain and/or nausea is manageable/tolerable.

Once the steps above have been completed, your nurse will print out your discharge instructions and review them with you. These include appointments with your doctor and physical therapist, your doctor's discharge instruction sheet, helpful tips for managing at home, and medication lists.



Your Surgical Pathway Prior to Discharge

The other time you will talk with a pharmacist is prior to discharge. At this point you are planning on heading home. Your doctors may prescribe new medications based on the procedure and each individual's situation. They will review your home medication list to determine which medications you can continue to take and which medications need to be held or stopped after surgery.

A pharmacist will review your discharge medication list and discuss any newly prescribed medications with you. Some examples of new medications at discharge are pain medications, antibiotics, medication for constipation, anti-nausea, and anticoagulants. Please follow the instructions and documents at discharge regarding your medication plan.

If you have any questions related to your medications prior to your surgery or after discharge, please contact us at the number provided in the front of this booklet.

Once all your discharge instructions have been reviewed and questions have been answered, staff will help gather your belongings and assist you to door #4 where your driver can pick you up. Please refer to discharge folder and Joint Venture booklet after leaving the facility. You are welcome to call us with any further questions or concerns.



Review the signs to continue your journey towards a safe and healthy joint replacement.

	GREEN = Going Great	YELLOW = Let's Take a Look	RED = Get HELP!
Pain & Swelling	<p>Using medications, rest, ice and elevation, your pain is manageable/ tolerable</p> <p>Ice and elevation are helpful at reducing swelling</p>	<p>Pain/swelling is limiting your ability to get out of bed</p> <p>Ice and elevation do not reduce swelling</p> <p>Redness, tenderness, or mild pain in your calf area</p> <p>Any fall or injury that may have affected your surgical extremity</p>	<p>Intense calf pain/ tenderness with redness and/or swelling in either leg</p> <p>Chest pain, difficulty breathing, shortness of breath</p>
Incision Area & Dressing	<p>Clean, dry, intact dressing</p> <p>Very minimal, if any, thin drainage</p> <p>Skin together along incision line</p>	<p>Yellow or green, thick drainage with or without an odor</p> <p>Warmth, swelling, redness present</p>	<p>Any sudden numbness or weakness of the face, arm, or leg on one side of the body; confusion, difficulty speaking</p>
Fever	<p>Temperature less than 101 °F</p>	<p>Temperature more than 101 °F</p> <p>Chills</p>	
Nutrition & Bowel/Bladder	<p>Appetite per usual</p> <p>Bowel movement about every two days</p> <p>No pain or burning with urination</p>	<p>Decreased appetite; poor food/fluid intake</p> <p>Increased nausea/vomiting</p> <p>No bowel movement for less than three days</p>	
	<p>Happy Healing!</p>	<p>Contact your surgeon</p> <p>Chippewa Valley Orthopedics</p> <p>715-832-1400</p>	<p>Seek medical attention or call 911</p>



Thank you for allowing the staff
at OakLeaf Surgical Hospital
to take care of you on this important journey!

We wish you a speedy recovery and hope that you return to the life you desire with your new joint in place.

