



Guide to Joint Replacement Surgery

Welcome to Ochsner

Thank you for choosing us for your joint replacement surgery. Before, during, and after, we are committed to make your surgery and recovery a success.

+ Please bring this guide to your appointments before and after surgery. You should also bring it to the hospital the day of your surgery.

This information is general and applies to most patients. However, since each person has special needs, you may receive slightly different instructions to follow.

Joint replacement surgery team

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Important phone numbers

Ochsner Medical Center – New Orleans

Hospital Main Number (Operator)	504-842-3000
Orthopedic Clinic.....	504-842-3970
Second Floor Surgery Center	504-842-2022
Pre-Operative Medical Clearance Center	504-842-4526
Admission/Prior Authorization.....	504-842-3297

Ochsner Hospital for Orthopedics & Sports Medicine

Hospital Main Number (Operator).....504-703-2620

Sports Medicine Clinic.....504-736-4800



Your care team is always available. Call us at 504-259-7324 if you have any questions or concerns after your joint replacement.

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Surgery Location and Arrival Time

Orthopedic surgeries are done at one of the following locations.

- **Ochsner Medical Center – New Orleans:** 1514 Jefferson Hwy.
- **Ochsner Hospital for Orthopedics & Sports Medicine:** 1221 S. Clearview Pkwy.
- **Ochsner Baptist - A Campus of Ochsner Medical Center:** 2700 Napoleon Ave.

If your surgery is scheduled at Ochsner Medical Center – New Orleans, it will be in either the Merrill Hines Surgery Center or the Surgery Center (also called Second Floor Surgery Center). Both are indicated on the map on the next page.

If your surgery is scheduled at Ochsner Baptist, on the day of surgery please report to the Registration Desk on the 1st floor of the Magnolia Building, indicated on the map on page 5 (2626 Napoleon Avenue). This is a 4-story red brick building on the corner of Napoleon and Magnolia. Turn onto Magnolia Street to access the parking lot behind the building.

Free parking is available in the parking areas shown on the maps. For additional help, call 504-842-3000.



Confirming Your Arrival Time

The day before your surgery, a member of our team will call to tell you what time to arrive at the hospital.

If you have not heard from us by 2:00 p.m. the day before your surgery, call us at 504-842-3970.

Be sure to confirm your surgeon's office has your correct phone number.

Patient Name: _____

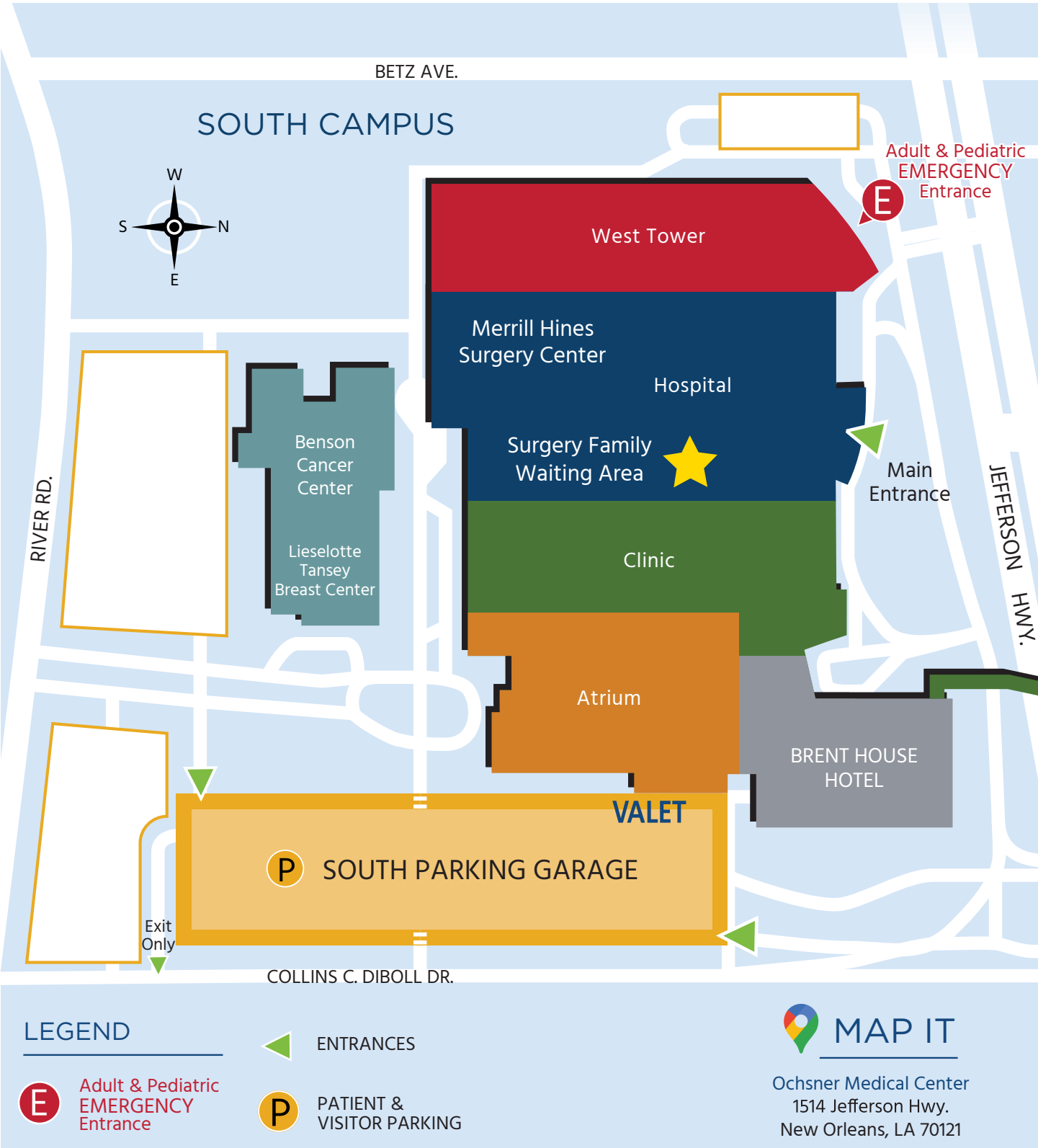
Date of surgery: _____

Location of Surgery: ☐ Ochsner Medical Center - New Orleans
☐ Ochsner Hospital for Orthopedics & Sports Medicine
☐ Ochsner Baptist - A Campus of Ochsner Medical Center

Arrival Time for Surgery: _____

Ochsner Medical Center - New Orleans

1514 Jefferson Highway, New Orleans, LA 70121



Instructions for Arriving at the Surgery Center

1-2 days before your procedure, your doctor's office will call you with a specific arrival time (see the blue box on page 1). Your arrival time will be earlier than the surgery or procedure time.



You must be on time. If you are late, your procedure may be canceled or rescheduled.

Patient Drop Off

Patient drop-off is at the **Main Entrance facing Jefferson Highway** (green arrow on map to the left), between the Emergency Room and the Brent House Hotel. Once you enter, turn right and take the **Concourse elevators or the staircase** up to the 2nd floor Surgery Patient Waiting Area (yellow star on map). Check in at the registration desk. The Center opens at 5:00 a.m. If you have difficulty finding the Center, please call us at 504-842-9300.

Pediatric patients must be accompanied by an adult. If you plan to drop off a child, one adult must accompany them to the 2nd floor Surgery Center while another adult parks the vehicle.

Up to 2 visitors are allowed in the waiting area. **Children under the age of 12 are not allowed in Surgery Center.** The waiting room may be cold, especially in the winter months. Visitors may wish to bring a blanket.

Parking

Self-park in the South Parking Garage

From the garage (gold box on map), enter through the doors closest to Jefferson Highway (located at the far north end of the garage). From there you have two options:

- **Option 1:** Take the garage elevators to the 2nd floor. Once you exit the elevators, follow the ramp that overlooks the atrium. Take a right at the **Atrium elevators**. Proceed down the long hallway and follow the curve to the left. Follow the signs to the Surgery Center and Family Waiting Area (end of the hallway).
- **Option 2:** (preferred for anyone who may have difficulty with the 2nd floor ramp). Take the parking garage elevators down to the 1st floor. Walk straight ahead toward the information desk and past PJ's Coffee. Turn right after the grand piano and take the **Atrium elevators** to the 2nd floor. Once on the 2nd floor, proceed down the long hallway and follow the curve to the left. Follow the signs to the Surgery Center and Family Waiting Area (end of the hallway).

Valet parking – 1st floor of South Garage

Free valet parking is available starting at 6:00 a.m. on the 1st floor of the South Garage. Enter from the valet area and turn left up the ramp. Then walk straight ahead toward the information desk and past PJ's Coffee. Turn right after the grand piano and take the Atrium elevators to the 2nd floor. Once on the 2nd floor, proceed down the long hallway and follow the curve to the left. Follow the signs to the Surgery Center and Family Waiting Area (end of the hallway).

Ochsner Hospital for Orthopedics & Sports Medicine

1221 South Clearview Parkway, Jefferson, LA 70121



Ochsner Baptist - A Campus of Ochsner Medical Center

2700 Napoleon Avenue, New Orleans, LA 70115



Financial and Insurance Information

At Ochsner, we realize the financial aspects of hospital services are often complicated and difficult to understand. Try not to worry. Ochsner personnel will contact your insurance company for detailed information about any coverage related to your surgery.

We want to make sure we meet your insurance company's billing requirements. When needed, we will get their authorization for our services. Your insurance company will tell us what your out-of-pocket payment will be. The amount you owe may include co-payments, deductibles, coinsurance, non-covered services or other insurance limitations. Call the phone number on your insurance card if you have additional questions about your coverage.



Ochsner financial counselors are available to assist you whether you have insurance or not.

If your surgery is at Ochsner Medical Center – New Orleans, you may pay your out-of-pocket fee prior to surgery. Cashiers are located on the first floor of the Clinic Tower.

You may want to contact your insurance company to

- Better understand your insurance policy for the expected hospital services
- Make sure the Ochsner facilities and physicians are approved by your insurance company
- Identify any out-of-pocket payments you will have to make
- Know and be able to pay your out-of-pocket payment before services are provided

Ochsner Admitting/Authorization staff will contact your insurance company to

- Obtain insurance coverage and benefit information
- Ask for authorization requirements and take the steps necessary to obtain authorization
- Take steps necessary to get authorization for healthcare services
- Determine your out-of-pocket payment

You may receive a telephone call from an Ochsner representative prior to your admission. This call is to let you know the amount of your out-of-pocket payment. If you have any questions, call the Admitting/Authorization Department at 504-842-3297.

Preparing for Surgery

Attend Orientation and Pre-Admission Appointments

To help you better prepare for surgery and have the best recovery possible, we offer a coordinated orientation class and pre-admission process. Our team will schedule these appointments for you. We make every effort to consolidate the process as much as possible.



We will schedule **3 important appointments** for you. **These must be completed no more than 30 days before your surgery.**

1. In-Person or Virtual: Joint Camp

In this required 1-2 hour orientation class, you will meet several people who will assist you in the hospital after surgery. This team includes nurses, physical therapists, occupational therapists, and social workers.

We offer both in-person and virtual Joint Camp classes. This orientation is mandatory because the more you understand, the more you can aid your own recovery. The more involved you are, the better your joint replacement results are likely to be.

2. In-Person: Pre-Op Center Appointment

At this appointment, a doctor and nurse will review your lab work and previous images. They will also do a medical exam to make sure you are in good health for surgery. They will order any new tests needed and may contact your primary care provider or other specialists.

Additional tests might include blood work, an EKG, a urine test, or others based on your medical exam and health.

Bring a list of all your prescription and over-the-counter medications to this visit. Include the dosage and strength of each medication. Check with your surgeon or anesthesiologist about which medications you should or should not take on the day of surgery.



If you are allergic to any medications, please inform your doctor or the nurse responsible for your care. Be sure to notify your doctor if you are diabetic and what medication you take for diabetes.



Extra equipment you may need at home

While you are in the hospital, we will work with you and your family to ensure you have any equipment you will need at home. Some common items that will help ensure a safe recovery include

- Walker
- Dressing aids (zipper puller, sock puller/aid, shoe horn)
- Raised toilet seat
- Reacher/grabber

Things you can do to help ensure a strong recovery

Quit smoking before surgery.

If you use any kind of nicotine products, try to quit at least 3 weeks before surgery. Nicotine increases your risk of complications after surgery. Smoking slows down wound and bone healing. It also increases your risk of infection, blood clots and other complications. **Ochsner has free programs to help you quit.** Talk to your provider about how to enter one of these programs, or scan the code to the right to learn more.



Limit the amount of alcohol you drink.

Alcohol can impair your ability to heal. Be honest with your care team about how much alcohol you drink. We will keep anything you share confidential. Our goal is to help you prepare and recover from your surgery as quickly and safely as possible.

Fall-proof your home.

- Remove throw rugs.
- Check for cords, foot stools, or any other objects that you might trip over. This includes pets – can they stay out of the rooms you use most until you have recovered?
- Think about how you will use your bathroom. Adding a shower chair, grab bar, and raised toilet seat while you recover can be a big help.
- Set a place near your favorite seat so you can easily access things like a remote control, cell phone, glasses, etc.

Schedule dental work well in advance.

If you need dental work before your surgery, such as having a tooth pulled or gum care, be sure to schedule this at least 1 month before surgery. Do not schedule non-emergency dental for 3 months after your surgery.

Arrange for help after surgery.

You will need help at home after surgery. Be sure to arrange for someone to stay with you for at least the first few days. You may also need home health assistance.

Most patients will have a series of physical and/or occupational therapy appointments to learn to use the new joint. Talk to your care team about who will help you and when you'll need each kind of help.

Keep your appointments.

Before and after your surgery, you'll have a number of appointments scheduled. Be sure to keep these appointments and bring any questions you may have.

Surgery Prep Checklist

4 Weeks Before Surgery

- ☐ Start making modifications to your home that you may need, such as extra supports or aids in your bathroom.
- ☐ Schedule necessary dental work – this should be completed at least 1 month before your surgery.
- ☐ Quit using nicotine – cigarettes, cigars, nicotine gum, vaping (e-cigarettes), patches.
- ☐ Attend your pre-op center, joint camp, and orthopedics clinic appointments.

2 weeks before surgery

- ☐ Arrange for someone to take you home after surgery. You will not be allowed to leave the hospital alone.
- ☐ Arrange for help getting to and from your therapy and follow up appointments until you have been given the okay to drive.
- ☐ Stock up on foods that are easy to prepare. We also recommend a nutritional drink such as Boost® or Ensure®.
- ☐ Begin limiting or stop drinking alcohol.
- ☐ Stop taking all herbal medications, remedies or supplements at least 2 weeks before surgery. Many herbal medications and herbal supplements can interfere with anesthesia.
- ☐ Talk to your doctor about your medications. If you take blood thinners or anti-platelet medications such as those listed below, you may need to stop this medication 3-5 days prior to surgery. Your surgeon and the provider who prescribed the blood thinner will decide when you should restart it.
 - rivaroxaban (Xarelto®)
 - warfarin (Coumadin®)
 - heparin
 - apixaban (Eliquis®)
 - Lovenox®
 - clopidogrel (Plavix®)

1 week before surgery

- ☐ If you take diabetes or weight loss medications (GLP-1 drugs), follow your doctor's instructions about when to stop these medications.

1-2 days before surgery

We will contact you 1-2 days before your surgery to tell you what time to arrive and where for your surgery. **If you have not heard from us by 2:00 PM the day before your surgery, call us at 504-842-3970.**

- ☐ Pack your bag for the hospital. See the list on the following page of things to bring and leave at home.
- ☐ Do not drink alcoholic beverages of any kind 24 hours before or after surgery.

Night Before Surgery

- ☐ **NO FOOD AFTER MIDNIGHT.** This includes gum, hard, candy, and mints.
- ☐ Wash your body with Hibiclens® or other antibacterial soap. You do not need to use Hibiclens on your face or hair.
- ☐ Wash your hair with regular shampoo.
- ☐ Remove nail polish and hair extensions. If you have artificial nails, remove at least one on each hand to enable us to monitor your oxygen level during surgery.
- ☐ Do not take any laxatives or stool softeners.
- ☐ Sleep in clean clothes on clean sheets.

Morning of Surgery

- ❑ **NO FOOD BEFORE COMING TO THE HOSPITAL.**
- ❑ **Medicines:** If your surgeon or anesthesiologist advises that you take medication, swallow only the smallest amount of water with it. Be sure to inform the anesthesiologist or nurse on the day of surgery.
- ❑ **Brush your teeth:** You may brush your teeth and rinse your mouth. Do not swallow any water or toothpaste.
- ❑ **Shower:** Wash your body with Hibiclens® or other antibacterial soap. You do not need to use Hibiclens on your face or hair.
- ❑ **Makeup, Perfume, Creams, Lotions and Deodorants:** Do not use any of these products on the day of surgery, including mascara. Remove any false eyelashes and body piercings.
- ❑ **Clothing:** A button front shirt and loose-fitting clothes are the most comfortable before and after surgery. We also recommend comfortable walking or tennis shoes.
- ❑ **Hair:** Avoid buns, ponytails or hairpieces at the back of the head. Remove or avoid any clips, pins or bands that bind hair. Do not use hairspray. Before going into the surgery room, you will need to remove any wigs or hairpieces. We will cover your hair during surgery. Your privacy regarding personal appearance will be respected.
- ❑ **Glasses and Contact Lenses:** Wear glasses when possible. If contact lenses must be worn, bring a lens case and solution. If glasses are worn, bring a case for them.
- ❑ **Hearing Aids:** If you rely on a hearing aid, wear it to the hospital on the day of surgery. This will ensure you can hear and understand everything we need to communicate with you.
- ❑ **Medical Equipment:** If you have been fitted for a brace to wear after surgery or you have been given crutches, bring those with you.

+ How to shower with Hibiclens

1. Washing your hair is optional. If you do, wash your hair with your normal shampoo. Rinse your hair and body thoroughly afterward to remove the residue.
2. Do not shave the area of your body where your surgery will be performed.
3. Turn the water off. Apply Hibiclens to your entire body from the jaw down. **Do not get Hibiclens in your eyes, ears, nose, mouth or genital area.** Wash thoroughly for five minutes, paying special attention to the area where your surgery will be performed. Do not scrub your skin too hard. Do not use regular soap.
4. Turn the water back on and rinse your body well.
5. Pat yourself dry with a clean, soft towel. Do not apply any lotions, creams, deodorants, perfumes or powders. Put on clean clothes.



What to Bring to the Hospital	What to Leave at Home
<ul style="list-style-type: none"> • Photo ID and health insurance cards • Copy of advance directives, such as a Living Will or Durable Power of Attorney for Healthcare (Ask your care team if you do not have these. They can provide you with Ochsner's forms.) • Up-to-date medication list that includes drug name, dosage, and how often you take it. Be sure to include any over-the-counter medications or herbal supplements. • Inhaler for asthma or COPD • Hearing aids and case • Glasses and case. If you must wear contacts, you will need to remove them before surgery. Bring a lens case and lens solution. • If you use a CPAP/BIPAP machine, bring your mask. • Walker if you have one • Documentation or information card for implants or medical devices such as the following. If the device is controlled by a remote, please bring the remote. <ul style="list-style-type: none"> • Pacemaker • Internal defibrillator • Artificial joint • Internal pain pump • Stimulator • Wire leads • Shrapnel • Insulin pump • Shunt 	<ul style="list-style-type: none"> • Jewelry including body piercings • Valuables • Large amounts of cash • Wigs, hairpieces, hairpins, hair clips • False eyelashes • Remove fingernail and toenail polish. If you have acrylic or gel nails, remove at least one finger on each hand.

What to Expect at the Hospital

Before surgery

- Once you have checked in, a nurse will take your vital signs. Be sure to mention any allergies or medications you have taken that morning.
- You will change into a hospital gown. A member of your care team will clean your skin around the joint to help prevent infection.
- Your surgeon or a member of your surgical team will visit you before surgery.
- A member of the team will start an IV. This will be used to give you pain medication and antibiotics.
- You may receive a nerve block. A member of the anesthesia team will place the block.

If you are wearing any of the following, you will be asked to remove them before surgery.

- All non-permanent dental work.
- Wigs or hairpieces. A head covering will be provided.
- Hearing aids – bring a case if you have one.



Before-Surgery Visiting Policy

You may receive visitors before you go into surgery. Your visitors must follow this policy.

- You may receive a total of 2 visitors, one at a time. Each will be allowed only one visit with you (they can only change places once).
- All visitors must be escorted in and out by a member of the Ochsner care team.

After surgery

Post-Anesthesia Care Unit (PACU or Recovery Unit)

- Once your surgery is complete, a member of the care team will take you to the PACU. Specially trained nurses will care for you as you recover from anesthesia.
- Your nurses will take your vital signs and give you any medication you may need. You may also have x-rays or start physical therapy during this recovery time.
- While you are recovering, your surgeon will contact your loved ones to let them know how the surgery went.
- When your care team determines you are ready to leave the recovery area, they will start the process of either discharging you to go home or transferring you to a hospital room. Most patients who have surgery at Ochsner Hospital for Orthopedics and Sports Medicine go home the same day, unless there is a medical reason for them to stay overnight.



After-Surgery Visiting Policy

You may receive visitors while you recover. They must follow this policy:

- You may receive a total of 2 visitors, one at a time. Each will be allowed only one visit with you (they can only change places once).
- After surgery, your prearranged main caregiver should be your second visitor. That way they can learn your home care instructions when it is time for you to leave the hospital (discharge).
- All visitors must be escorted in and out by a member of the Ochsner care team.

If you remain in the hospital

If your surgeon decides it is best for you to remain overnight, you will be cared for by an experienced team of providers. Each day you may see your surgeon, resident, fellow, or advanced practice provider, along with members of the anesthesia team.



Preventing Falls During Your Hospital Stay

All patients admitted to the hospital are at a higher risk for falls. A fall increases your risk for injury. This could lead to an increased length of stay in the hospital or make your recovery period longer.

In the event that it is in your best interest not to be left alone, we will ask for a family member or friend to stay with you. Having a familiar person present can help to prevent falls. If that is not possible, you or your family may hire sitters to provide this kind of support. The cost for sitters is the responsibility of the patient/family and cannot be added to the hospital bill. A list of agencies offering sitter service is available upon request.

We ask that caregivers notify the nurse prior to leaving the patient's bedside so the nurse can best determine how to prevent falls. Bed exit or chair alarms may be turned on to alert the nurse that you are attempting to get up without help. Do not turn off these alarms; they are for your safety. Wait for staff to assist you in getting up. Do not bring your family member to the bathroom or leave them in the bathroom.

Common Causes of Falls

There are many reasons that patients may be at greater risk of falling while in the hospital, including being in an unfamiliar setting, weakness from surgery or illness, adjusting to new medications, or being connected to medical equipment. **Patients, family members and Ochsner staff each have a role to play in preventing falls.**

Patient/Caregiver Responsibilities



1. Provide Information

- Current medications
- History of falls
- Bathroom routine
- Walking/transferring needs



2. Press the Red Call Button

- For help getting out of bed/chair
- For help to the bathroom
- To grab items out of reach



3. Before Standing

- Call for help
- Wait for your care team even if a caregiver is in the room
- Rise slowly if lying down
- Sit on the edge of the bed



4. Before Walking

- Wear non-skid socks or fitted closed-toe shoes
- Use a walker or cane as needed

Care Team Responsibilities

1. While on Duty

- Orient you to your room
- Place your call light within reach
- Raise your bedrails
- Keep room well-lit and clutter-free
- Give clear medication instructions
- Encourage and assist with movement

2. As Needed

- Place a "Fall Risk" band on your wrist
- Turn on your bed/chair alarm
- Use TeleSitter with camera to monitor you

3. Movement Support

- Stay within arm's length to, from, and during toileting/dressing to ensure your safety
- Provide you with proper assistive devices as needed

Pain Management and Drug Safety After Surgery

Managing your pain

After surgery, it is normal to feel some pain or discomfort. At Ochsner, our goal is to help you manage this pain safely. By controlling your pain, we can help you sleep better, be more active and recover faster. To do this, your physician may prescribe a combination of methods that should help control your pain. These may include

- **Non-medical treatment:** hot or cold packs, deep breathing and relaxation exercises, massage, relaxation, music or other distracting pastimes, positive thinking, or nerve stimulation (TENS).
- **Anesthetic treatment:** includes general anesthesia; spinal anesthesia, or nerve blocks; or pain medicine delivered either by a small tube in your back (an epidural catheter) or by an IV line in your arm.
- **Pain control medication:** measures may include oral medications (pain pills), intramuscular injections, suppositories, or medication delivered through a small plastic tube in your vein (an IV) or through an epidural catheter in your back.

Pain relief medications

If your provider feels you need medication for pain relief, this may consist of

- **Fever reducers (also called Non-Narcotic Analgesics or Antipyretics).** Acetaminophen, (Tylenol®, Feverall®) is given to relieve mild to moderate pain and reduce fever.
- **Non-Steroidal Anti-Inflammatory Drugs (NSAIDs).** Meloxicam (Mobic®) and Celecoxib (Celebrex®) reduce swelling and soreness and relieve mild to moderate pain.

Or, your provider may include a short course of **prescription pain medication**, which can be used if other pain relief methods are not enough. These medications are also called opioids or narcotics.

When taken correctly, opioids are very good medicines for post-surgery pain. But they can be misused. This guide will help you understand how to take your prescription pain medication safely and keep others safe.

How to use opioids safely

- **Take as directed.** Your physician and pharmacist will give you specific instructions for taking this prescription. Follow these instructions.
- **Keep it to yourself.** Don't share - this prescription is only for you. Sharing prescriptions is illegal and can put other people in danger.
- **Ask about your other prescriptions.** Some medications should not be taken at the same time as opioids because they can slow or stop your breathing. Talk to your physician or pharmacist if you are taking benzodiazepines (such as Ativan, Xanax, Valium), seizure medications, muscle relaxers, or psychiatric drugs.
- **Talk to your provider about other health conditions.** Tell us if you're pregnant, have a history of sleep apnea, mental health conditions, or substance use disorder.
- **Stay sober.** It can be very dangerous to use alcohol and other substances while you're taking an opioid pain medicine. Skip the alcohol, sleeping pills, or illegal drugs until you've stopped this medication.

- **Be cautious.** Don't drive or operate heavy machinery until you know how this medication affects you.

How to store opioids safely

- **Keep it in the original container.** Don't transfer the prescription to another bottle or package. This way you will always know exactly what is in the container and who it is for.
- **Keep it where children can't see or reach it.** The safest place to store prescription pain medication is in a locked cabinet or on a high shelf.

How to dispose of opioids safely

- **Discard properly when done.** Immediately after your pain is gone, dispose of any unused prescription pain medication.
 - Contact your local law enforcement agency or pharmacist to find a drug "take back" or disposal location near you. You can also find a location at this website: <https://www.fda.gov/drugs/disposal-unused-medicines-what-you-should-know/drug-disposal-drug-take-back-locations>.
 - If there is no take back or disposal location near you, check the FDA's Flush List. This is a list of drugs that CAN be flushed down the toilet <https://www.fda.gov/drugs/disposal-unused-medicines-what-you-should-know/drug-disposal-fdas-flush-list-certain-medicines#FlushList>
 - If your medication is not on the FDA Flush List, you can put it in the trash. To do so, remove the medication from its container and combine it with something unpleasant such as used coffee grounds or kitty litter. Place this mixture in a sealable bag in the garbage so it cannot leak or break out. Scratch out all personal information on the original container and throw it away or recycle it.

Know the risks

- **If not used correctly**, prescription pain medications can be just as dangerous as illegal drugs.
- **Misuse can have serious consequences** including dependence, addiction, overdose, even death.
- **Get medical attention immediately** if
 - You have taken your medication incorrectly and you have
 - Overall low energy
 - Physical weakness
 - Nausea and/or vomiting
 - Trouble breathing
 - You have taken more medication than your prescription instructs

How Ochsner providers prescribe opioids

We are committed to helping end opioid misuse and its serious consequences. To ensure we play our part, Ochsner providers are very careful about opioid prescriptions and refills. **We have strict policies to ensure your safety and the safety of those around you.**

1. Some opioid prescriptions cannot be refilled through your pharmacy. We may ask you to make a clinic appointment before your prescription pain medication is refilled. That way we can help manage your pain the best way possible and avoid overuse of opioids.

2. We will only consider refills three days (or less) before the end of your medication regimen. Be sure to take your medication as your provider directs.
3. We do not mail or ship prescription pain medication. Opioids are considered “controlled substances” by law and must be picked up in person.
4. We only use prescription pain medications for patients undergoing surgery or other procedures. If you have pain for other reasons, we have many other resources to help you, including our Pain Management specialists, physical therapists, and others.

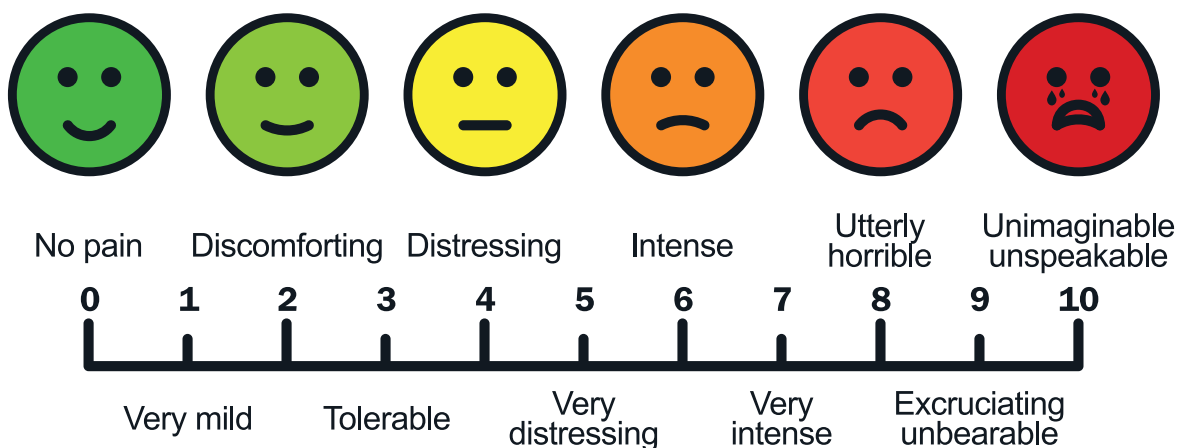
Ochsner does not prescribe medical marijuana, CBD or THC products at this time.

To learn more, visit one of these sites or talk to your Ochsner provider

- www.drugabuse.gov
National Institute for Drug Abuse
- www.samhsa.gov
SAMHSA – Substance Abuse and Mental Health Services Administration or call the SAMHSA National Helpline at 1-800-662 HELP (4357) for treatment referrals
- www.fda.gov/drugs/resources-you-drugs
Find resources to answer regulatory and drug-related questions.

Pain levels

At Ochsner, your well-being is an ongoing concern. Tell the doctor or nurse about pain that does not go away. They need to know how you are feeling. While your comfort is important, your pain may be a signal that you could be having a problem after surgery.



What to Expect as You Recover

Recovering from a joint replacement takes many months. Many patients feel

- Tired and worn down for many weeks or months
- Numbness around the incision
- Joint stiffness
- Clicking of the joint (knee)

Nearly all of these symptoms improve over time.

You can help your recovery and healing go smoothly. As you recover, be sure to

- Rest regularly. Your body needs rest to heal.
- Limit alcohol use.
- Stay nicotine-free. Nicotine products can impair your ability to heal.



When to Call Your Surgeon

Call your surgeon's office right away if you experience any of the following symptoms:

- Drainage from incision that soaks the dressing or leaks out of the dressing (a drop or two of blood is normal)
- Constipation
- Vomiting
- Fever over 101° F
- Your pain is not controlled with ice, elevation, or medication

If you have chest pain or feel short of breath, go to the emergency room or call 911 immediately.

Preventing Blood Clots

It is possible for a blood clot to form in your leg after surgery. This can happen if you are not moving much after surgery.

In the hospital, we will take steps to prevent blood clots after your surgery.

- Get you up and moving as soon as possible
- Apply compression pumps to your legs
- We give most patients aspirin to help prevent blood clots. If you have certain medical conditions or a history of blood clots, we may give you one of the following
 - apixaban (Eliquis®)
 - rivoroxaban (Xarelto®)

Which medication you take will depend on your medical history.



At home, you need to do specific exercises to help prevent clots from forming. These include

- Ankle pumps – these help blood continue to move through your veins
 - Standing and walking regularly
-

Swelling After Surgery

After joint replacement, it is normal for your leg to swell. You may also notice bruises. These are also normal and may last several weeks.

Your body sends fluids to your new joint to help it heal. These fluids can collect in the lowest part of your body – your foot and ankle.

The swelling will probably last a few weeks, then start to resolve. For the first few months after surgery, elevate your leg often.

- Elevate your legs above your heart for 30 minutes at a time. Do this 3-4 times each day.
 - Avoid sitting for long periods. Sitting for long periods with your feet down can make swelling worse.
 - Alternate periods of sitting with periods of walking.
 - Do your ankle exercises.
-

Preventing Infection

Caring for your surgical site

Do not remove the dressing on your own or let anyone else remove the dressing before your post-op visit with your surgeon. A member of your surgery team will remove your dressing at your post-op clinic visit.

Do not get the dressing wet. Do not immerse the joint in water. This means no tub baths until the dressing has been removed. Take sponge baths until the dressing has been removed at your post-op clinic visit.

A drop or two of blood on the bandage is normal. Call your surgeon's office right away if you notice

- Blood leaking out of the dressing
 - Blood saturating the dressing
-

Once the dressing has been removed in your surgeon's office, **do not use any of the following on the surgical site.**

- Rubbing alcohol
- Hydrogen peroxide
- Neosporin® or other antibiotic ointment
- Any other cleaners on the skin

When your surgeon says it is safe, you may wash the incision with soap and water. We recommend Dial® antibacterial soap.

Preventing infection

Infection in a total joint replacement is rare. But it can happen during, right after, or several years after surgery.

To help prevent infection, we will

- Give you Hibiclens (chlorhexidine gluconate) soap at your pre-op visit. Use it the night before and the morning of your surgery.
- Give you IV antibiotics before, during and after your surgery.
- Put a dressing over the incision in the operating room. This must stay on and stay dry until your surgeon removes it. **Do not remove it yourself. Do not let anyone else remove it.** This includes home health nurses or providers. Your surgeon's office is the only place it should be removed.
- Provide an antibiotic prescription for you to take after you go home.

You can help prevent infection

- Follow any wound care instructions carefully.
- Do not get the dressing wet.
- Do not remove the dressing yourself or let anyone else remove it before your post-op visit.
- Take antibiotics exactly as prescribed. Follow the guidelines on the next page for taking antibiotics after joint replacement.

Talk to your provider

Some patients have a higher risk of infection of the new joint through the bloodstream. Be sure to tell your provider before your surgery if you have

- Rheumatoid arthritis
- Lupus
- Immunosuppression
- Previous joint infections
- Diabetes

Guidelines for Antibiotics After Joint Replacement

In rare cases, a replacement joint can become infected when an infection in another part of the body spreads through the bloodstream. That is why **it is important that you see a provider immediately if you suspect you have any kind of bacterial infection.**

This might include

- Respiratory infection (for example, sinus infection)
- Infection in the mouth (tooth or gums)
- Infected severe wound somewhere else on the body
- Urinary tract infection

Once you’ve had a joint replacement, you may need to take antibiotics before other kinds of surgery. **If you expect to have dental work or surgery for another reason, be sure to inform your doctor well in advance that you have a joint replacement. That provider should prescribe an antibiotic before your surgery.**

During an invasive procedure or dental work, bacteria from the skin or mouth can travel through the bloodstream to your replacement joint. That is why we recommend you take antibiotics before your procedure.



IMPORTANT: If at all possible, do not schedule elective surgeries or procedures for 90 days after your joint replacement surgery.

You <u>WILL</u> need an antibiotic for	You <u>WILL NOT</u> need an antibiotic for
<ul style="list-style-type: none">• Any dental work, including routine cleaning• Skin (dermatologic) procedures that involve cutting into the skin (not laser or freezing)• Foot or ankle (podiatry) procedures that involve cutting into the skin, such as corn removal, bunion surgery, ankle surgery, hammertoe surgery, ingrown toenail removal, etc. This includes minimally invasive (robotic, laparoscopic) procedures• Any other kind of surgery or procedure that involves cutting into the skin, even if minimally invasive	<ul style="list-style-type: none">• Injections (vaccines, steroid shots, insulin injections, etc.)• Blood work• Colonoscopy, endoscopy, sigmoidoscopy• Manicure, pedicure• Routine colds or flu• Minor cuts and bruises that are not infected

We recommend these antibiotics for total joint replacement patients

- For dental work, take 1 hour prior to procedure: Amoxicillin 2 grams (If allergic to penicillin: 600 mg clindamycin)
- For procedures cutting the skin, take 1 hour prior to procedure: Cephalexin 2 grams

Frequently Asked Questions

Can I get a flu shot?

Yes! You may have a flu shot any time after your surgery. We recommend joint replacement patients receive a flu shot every flu season. If you are over age 50, talk to your primary care physician about the pneumonia vaccine and any others you may need.

When can I put weight on my joint?

Your surgeon will determine when you can put your full weight on the leg after surgery. Your surgeon and physical therapist will teach you how much weight you can put on the leg. They'll also let you know how to use your walker, cane, or crutches correctly.

When does physical therapy start and what does it involve?

Your first visit from a physical therapist will be in the recovery (PACU) area right after surgery. A physical therapist will also work with you in your hospital room.

A physical or occupational therapist will help you

- Learn how to get in and out of bed safely
- Walk with a walker
- Climb stairs safely
- Perform exercises at home

When you are ready to go home from the hospital, you will also get orders for more physical therapy.

When can I drive after surgery?

Do not drive any vehicle after surgery until your surgeon tells you it is safe for you to do so.

Keep in touch after surgery with patientIQ

PatientIQ helps Ochsner stay in touch with each patient, before and after your procedure. We want to know how you're feeling to make sure we provide you with the best care possible.

How does it work?

PatientIQ will contact you through email and/or text message. You'll be asked questions about

- your health
- how your procedure went
- how you are recovering

You may also receive links to educational videos or instructions for your recovery.

The emails or text messages will have the Ochsner logo. You may also see references to PatientIQ. *This is not a scam. PatientIQ is a trusted Ochsner partner.* The questions come from your care team. By answering all of them, you help us provide you with the best care we can.

Please answer every question you receive.

How long will it take me to answer the questions?

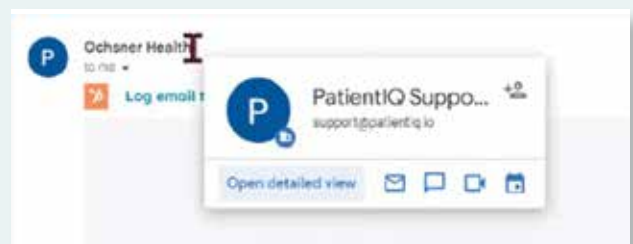
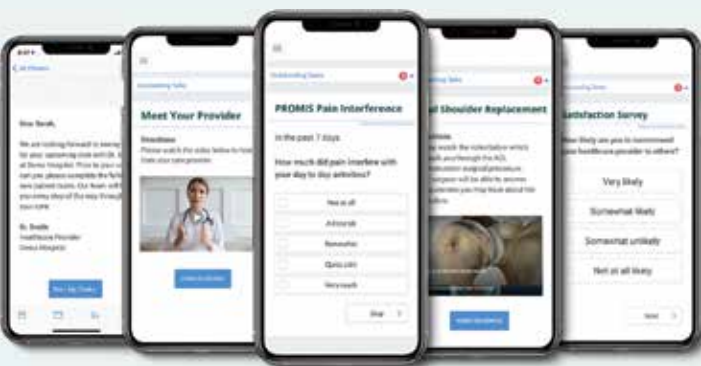
Just a few minutes. We promise not to take too much of your time. That's why we ask only the most important questions.

How often will I get questions from Patient IQ?

Because your health can change often, it's important we check in with you often. PatientIQ and your care team work together to ensure we reach out to you at key times throughout your recovery. PatientIQ only sends text messages and/or emails when necessary.

Are my answers private?

Yes. They are only seen by members of your care team.



Sample PatientIQ email in inbox

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PatientIQ email will include a disclaimer like this example

This image shows a full page of white paper with horizontal blue ruling lines. The word "Notes" is printed at the top left in a dark blue font. There are 21 horizontal lines in total, providing space for writing.

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