



**Calvary**

Lenah Valley Hospital

## Your Joint Journey Total Knee Replacement

Continuing the Mission of the Sisters of the Little Company of Mary

# Total Knee Replacement

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## Introduction

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If you are reading this booklet, it means you have recently seen your Orthopaedic Surgeon.

This booklet aims to give you an insight into your upcoming admission to Calvary Hospital for Joint Replacement Surgery and what to expect during your hospital stay.

It is important to read all of the information provided for you before coming into hospital to ensure you have the best possible outcome.

To access the videos go the Calvary internet page and follow the link to ‘My Joint Journey’ video:

[www.calvarycare.org.au/lenah-valley-private-hospital-hobart/](http://www.calvarycare.org.au/lenah-valley-private-hospital-hobart/)

Please watch these videos before coming into hospital.



## Pre-Admission

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- You will attend our pre-admission joint clinic before coming into hospital where one of our nurses will assess you and explain your admission details.
- It is VERY important to think about the functional aspects of your home such as access, rails in the bathroom/toilet and to ensure items that you will need are located at waist height and easily accessible. This includes items such as plates, cups, cooking essentials and food.
- We also ask you to think about who is going to be at home with you after you have been discharged from hospital. If you live alone, we strongly suggest you organise a friend or relative to stay with you once you are discharged home. Organising your home environment before coming into hospital allows a smooth transition from hospital to your home and avoid delays in your discharge.
- You can expect to stay for up to five days in hospital.
- It is also important that your bowels are working normally before your admission and that you have a bowel movement the day before or the day of admission.



- We also recommend that you purchase or hire elbow crutches and before coming into hospital as the hospital has a limited supply of equipment for hire.
- It is important to remember that most wards contain a mixture of shared and private rooms. We acknowledge the request for a private room, however, it is important to understand that the level of your care and the needs of the ward could mean it may be necessary for you to reside in a shared room.

## Day of Admission

- We recommend that you only bring a small bag containing your toiletries and medications (including Arnica cream) on the day of your operation. Your friend or relative may then bring the remainder of your belongings once you have returned to the ward after your operation. We understand that this is not possible in all cases but ask that you please keep in mind that storage in our Day of Surgery Admissions (DOSA) unit is limited.
- On your day of surgery, please present yourself to the front desk where your admission process will commence.
- You will then be escorted to our DOSA unit. You will be requested to have an antiseptic shower and be prepared for theatre.
- We ask that you please show your medications to the admitting Nurse in case you have medications, such as Endone or other pain relief medications, which are required to be locked up in our safe.
- We also ask that you please bring your medications in their original packaging and NOT in a blister pack or dosette box. This helps your nurses to identify your tablets more easily.
- Once ready for theatre, you will be taken to the waiting bay on a trolley where the staff will apply a warming blanket.
- You will then be transferred to the operating room where you will see your Surgeon, Anaesthetist and the Theatre Staff caring for you during your operation.

## Recovery

- Following your operation, you will be transferred to the recovery room where you will wake up with intravenous fluids running into a vein in your arm or hand.
- You will have a blood pressure cuff on your arm, a pulse oximetre attached to your finger and a mask on your face delivering oxygen.
- You will also have foot pumps attached to your feet which intermittently squeeze to ensure proper blood circulation in your legs.
- You may also have a urinary catheter, a wound drain, or a handset/button you can press to deliver pain relief.
- Once your vital observations are stable and pain levels are manageable, you will then be transferred to your room on the ward.



## On return to the Ward

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- Once you are transferred to your room, you will once again be attached to an observation machine so that your blood pressure, heart rate and oxygenation can be monitored by the nursing staff.
- Vital and neurovascular observations are recorded frequently within the first night following your surgery.
- You also have local anaesthetic infiltrated into your joint during the time of surgery. This provides some pain relief and we encourage you to move your operated limb regularly whilst the local anaesthetic is in effect. You may also have had a spinal block.
- Ice packs will be applied to your wound area regularly to aid with pain relief and decrease swelling. We encourage you to ask for ice packs at any time throughout your hospital stay.
- Panadol will be given to you regularly every six hours, which acts as a baseline cover for your pain. You may be given a slow release pain medication every twelve hours.
- Your nurse will assess your pain levels regularly by asking you to score your pain from zero to ten. If your pain score is greater than 3/10, stronger pain medication will be offered.
- Some medications may cause side effects such as dizziness, nausea, or feeling generally unwell. It is important that you report any “off colour” feelings to your nurse.

## Post-Surgery – Day One

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- You will have a hot towel wash in bed.
- If you have a pain button, your nurse will disconnect this as soon as possible and encourage oral pain relief.
- If you have a wound drain, this will be removed (or on day 2, depending on your Surgeon’s preference). Your dressing may be reduced.
- You will mobilise with a frame. Your nurse or physio will explain the correct walking technique.
- The physiotherapist will also show you exercises which you will need to complete at least three times each day. Your goal is to achieve a 90-degree bend and full extension by the time you are discharged home from hospital.
- The nurse will continue to apply an ice wrap to your knee regularly throughout the day. Arnica Cream should be massaged around the operated area two to three times per day to help reduce bruising and swelling.
- Your foot pumps need to be worn when you are in bed for your length of stay. This helps reduce swelling and your risk of acquiring a clot.
- We recommend you do one to two short walks with plenty of rest in between on this first day. We encourage you to keep your leg elevated and wear your foot pumps while resting.
- Your nurse will elevate the end of your bed to decrease swelling as it inhibits your ability to bend your knee.
- We aim to manage your pain with Panadol, anti-inflammatories and ice packs, and only use stronger medications if required.

## Post-Surgery – Day Two

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- Your main focus this day is on improving your bend, extension and mobility whilst maintain adequate pain relief.
- The physiotherapist will take you for a longer walk. If you are confident and progressing well, you will try walking with the crutches.
- It is important that you learn to get in and out of bed independently by day three post-op. Your physiotherapist or nurse can show you techniques to facilitate this. Due to your operation, lifting your leg can be quite difficult initially but will improve with exercise and time.
- Your physiotherapist will also discuss your equipment needs at home. You may wish to hire frame/crutches, a toilet or shower chair.
- Your local anaesthetic will have worn off by this day and you may experience more pain. Please let your nurse know if you have pain so that they can discuss and plan with you how to best address your pain management.
- If you have yet to have a bowel movement, your nurse will encourage you to take medication that will help prevent constipation. We recommend that you have your bowels open prior to being discharged home.
- It is important to continue with the exercises but it is also equally important to rest. As you are moving around more freely, it is essential to keep in mind that it is necessary for your recovery to spend time, at least two hours each day, in bed with your leg elevated (we can elevate the end of your bed) and have your foot pumps on.

## Post-Surgery – Day Three to Day Four

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- Over the next two days, your main focus is on gaining more independence and improving your mobility in preparation for discharge.
- If your Surgeon and physiotherapist are happy with your progress, you may be able to discharge home on day four.
- If you have yet to progress onto the elbow crutches, your physiotherapist will assist and work with you to achieve this goal.
- If you have steps/stairs at home, it is important for you (during your hospital stay) to master them. Your physiotherapist will demonstrate techniques and supervise you while you trial our stairs to ensure you gain confidence.
- It is also important that you are able to shower independently before your discharge. Your nurse will show you ways to achieve this while ensuring your safety. You may require a shower chair for home.
- Your nurse will encourage you to sit out of bed (on a suitable chair that is adjusted to the appropriate height) for short periods of time. We also encourage you to elevate your leg on a foot stool when sitting out of bed.
- Your pain will continue to be managed regularly with analgesia, but it is important to inform your nurse when you are experiencing pain.
- You may notice more swelling in your knee, which is normal. However, you must continue to rest regularly with your leg elevated and your foot pumps and ice packs on.

## Post-Surgery – Day Five/Day of Discharge

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### **This day is your planned day of discharge.**

- If you have achieved all of your goals, as outlined on your goals of care board displayed in your room, you are ready to discharge home. Your nurse and physiotherapist will have updated this board daily to track your progress.
- By discharge, it is important that you can do the following:
  - 1. Get in and out of bed independently**
  - 2. Shower by yourself (with minimal help)**
  - 3. Dress yourself (with minimal help)**
  - 4. Walk up and down the stairs with the crutches**
  - 5. Manage your pain with oral analgesia (if necessary)**
- Discharge time is between 9.30-10.00am. Please organise for a friend or relative to collect you as close to this time as possible. During this time, our staff are also busy with incoming joint replacement surgeries and we need to prepare your room for the next patient.
- Your physiotherapist will see you before you go and can clarify information and/or answer questions you may have.
- Your nurse will go through the discharge information, explain your discharge medication and organise your follow up appointment to review your wound. This will either be on the ward or in the doctor's rooms (depending upon your Surgeon's preferences).
- Your nurse or the hospital assistant will escort you to the front entrance in a wheelchair and ensure you get in the car safely.

## Things to remember once you are home

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- It is important to continue your exercises, as outlined by the physiotherapist, at least three times per day (with rests in between).
- It is important to remember that your bend must be achieved early and that the bend you have by week six is the bend you have for life.
- It is also important that you don't over-exercise or walk too much.
- Please do not forget to elevate your leg on a foot stool when you are sitting.
- You should also be having a rest in bed in the middle of the day by using several pillows to elevate our leg above your heart.
- Continue to use your Arnica cream and ice packs.
- We encourage you to continue taking pain relief regularly as per your discharge information. We also encourage you to record and track your medications.
- It is also important to leave your wound dressing intact until your follow up appointment. If your dressing comes off, gets wet, or you have any other concerns regarding your wound, please phone the ward. One of our nurses will explain what to do next.
- We encourage you to ask as many questions as possible before you leave the hospital. However if you have any concerns or questions once home, please phone the ward anytime on 6278 5168. Our nursing staff will be more than happy to assist you.