

Welcome to Total Joint Replacement at Newport Hospital



Welcome to Newport Hospital. We are honored that you have chosen us for your joint replacement surgery.



Joint replacement is one of the most effective treatments for reducing pain and restoring mobility in individuals living with arthritis. At Newport Hospital, we take pride in offering a comprehensive and collaborative approach to care. Our team of orthopedic surgeons, nurses, physical and occupational therapists, and rehabilitation specialists work together to deliver exceptional total joint services tailored to your needs.

Our Total Joint Replacement Program emphasizes patient education, holistic preparation, advanced surgical techniques, outstanding nursing care, and consistent postoperative therapy—all within a welcoming and comfortable environment. We are committed to supporting you throughout your recovery journey, extending our care beyond your hospital stay to help you regain mobility and return to the activities you enjoy.

At Newport Hospital, we believe in empowering you to understand and participate in your care. This guide is your first step in that process. We encourage you to read it thoroughly, write down any questions, and bring it with you to all your appointments, including the day of your surgery.

Thank you again for placing your trust in Newport Hospital. We are dedicated to providing you with the highest quality care and look forward to supporting you every step of the way.

Warm regards,

Tenny Thomas, MD

President and Chief Medical Officer

Newport Hospital



Total Joint Center
Newport Hospital

BROWNHealth
UNIVERSITY

Prepare Your Home For Your Return

Use this list to make small, simple changes to your home which will ensure you have what you need to recover safely and successfully.

- Remove throw rugs in any room of your home that you will be using during your recovery.
- Be sure you have a cell phone or portable phone to keep at hand.
- Arrange furniture to create space and open up all walkways leading to the main rooms of your home.

Kitchen

- Place frequently used items in accessible cabinets so you won't have to reach too high or low.
- Keep counters clear of clutter.
- Make sure flooring is not slippery.
- Buy juices/milk/etc. in lighter containers.
- Prepare and freeze a few meals before your surgery.

Bedroom

- Have a lamp and telephone on the bedside table.
- Use a nightlight to illuminate the path to the bathroom.
- If possible, arrange a place to sleep on the first floor. This may only be needed for the first few days that you are home.
- Place frequently used clothing in higher drawers.
- Move a chair with arms into the bedroom to use while you are getting dressed.

Bathroom

- Use a nonskid mat in the tub.
- Consider installing fixed or removable grab bars by the toilet and the tub.

Living Room

- Pick out a chair that will be appropriate to sit in when you come home. A firm chair with arms is best. Avoid rockers and chairs on wheels.

Stairways/Halls

- Keep stairs and hallways free from clutter.
- Check to make sure all stairs have sturdy railings.
- Plan to have a loved one or friend be with you as you manage stairs for the first few times.

Outdoor Areas

- Make sure hedges, shrubs and trees do not interfere with outdoor walkways.
- Ensure that outdoor pathways are clear when you return home, especially during autumn (fallen leaves) and winter (snow).

Preparing for Surgery

Use these tips to help give your body a healthy start before you head into the operating room.

Your Health

- **Complete any pre-operative appointments** you have been asked to schedule. Standard appointments are: a pre-op check with your PCP, pre-admission testing, and a pre-op physical therapy assessment. Other specialist appointments may be scheduled as needed.
- **If you smoke**, try to cut back or, ideally, quit. Smoking can increase your risk of infection.
- **If you have diabetes**, check your blood sugar regularly, and monitor what you eat. High blood sugar after surgery can increase your risk of infection, delay wound healing, and impede progress toward your goals.
- **Stay active.** Remain as active as you can in the weeks leading up to surgery. The stronger you are before surgery, the faster you will recover. Physical Therapy will recommend exercises at your pre-op PT visit.
- **Medications:** The pre-admission testing nurse will give you specific instructions about your medications. Follow these instructions.
- **Proper nutrition:** A well-rounded diet pre-operatively and post-operatively is key to a rapid and successful recovery. In addition to maintaining a well-rounded diet, we recommend the following preparations:
 - Consume 25-50 grams of supplemental protein every day for two weeks prior to surgery. Supplemental protein can be found in the form of powders, shakes, or bars, and is readily available at most retail pharmacies and grocery stores.
 - Obtain a six pack of 12-ounce or 16-ounce bottles of a sports drink, such as Gatorade. Drink the first bottle the night before surgery. Leave the rest for when you return home. Please use a sugar-free sports drink if you are diabetic.

Assistance From Your Loved Ones

Ask friends, family, or neighbors for some assistance with the following tasks while you are in the hospital and during the first two weeks after you return home:

- seasonal yard work/snow removal
- help with groceries
- mail and newspaper pickup
- pet care (walking, feeding)
- taking trash to the curb
- carrying laundry to the basement

Designate a Coach or Coaches

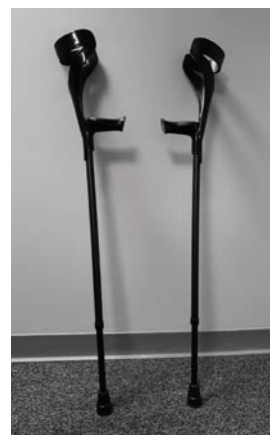
Determine who will be your primary support person. This person should be available for the first 48 hours after you go home. Help them to stay informed of your plan for surgery and discharge. See Coach's Guide insert in this booklet.

Home Equipment for Your Recovery

At your pre-op physical therapy visit, you will be trained to use a walking aid. Our program recommends forearm crutches or a walker. You will be given a walking aid if you do not already own one.

You may choose to obtain the following equipment prior to surgery. They will make your initial recovery easier.

- cane (if recommended by your physical therapist)
-see discussion on page 9
- suction cup grab bar for shower (optional)
- raised toilet seat (optional)
- shower chair (optional)



Insurance Questions

Please call your insurance provider before your surgery, as insurance coverage for doctor visits, hospital visits, surgeries, therapies, and equipment is dictated by your policy. Ask if any of the following apply to your insurance coverage, and get explanations:

- surgery deductible
- hospital stay deductible/copay
- copay for a walking device
- copay for home therapy visits
- copay for outpatient physical therapy
- coverage of anesthesia services for Brown Health Medical Group (BHMGM) anesthesia

You may also reach out to our financial services teams with questions. For same day surgeries, call: 401-845-1490. If you expect to stay overnight, please call: 401-444-4701.

The Week of Your Surgery

- Review the medication instructions given to you at your pre-admission testing visit and at your surgeon's office. Be sure to follow these instructions.
- Eat high-fiber foods in the days leading up to your surgery. This will help prevent constipation after your surgery.
- Continue to consume supplemental protein daily.
- For one week before surgery, do not shave near the area where surgery will be done. Shaving could increase your risk of infection.
- If you have any unresolved questions or concerns, contact your surgeon's office.
- If you develop flu-like symptoms, a congested cough, severe vomiting or diarrhea, new dental pain, or a skin condition near where surgery will occur, please contact your surgeon's office.
- Pack for surgery. Use (below) **What to Bring to With You to the Hospital** as your guide.

What to Bring With You to the Hospital

Information

- Insurance cards and identification (or photocopies of each)
- Payment method for copayment (if not paid in advance)
- Copy of your Health Care Directive, if you have not already provided the hospital with a copy

Medications and Equipment

- If you were issued forearm crutches by PT, bring them into the hospital with you. If you were issued a walker, you may leave it in the car for pick up.
- Please ask a member of the Total Joint Replacement team for the most recent policy on use of your home CPAP, if indicated

Clothing and Personal Items

- Comfortable shoes with nonskid soles. Tennis shoes with laces work well.

- Undergarments and socks
- Loose-fitting pants (Sweatpants work best, as they are easy to get on and off and allow room for the bandages.)
- Loose-fitting blouse or shirt
- Glasses or contact lenses
- Dentures
- Hearing aid
- Chewing gum or hard candy
- Chapstick

Do Not Bring

- Jewelry or other valuables
- Home medications

Please make arrangements for transportation home following discharge. You will NOT be allowed to drive yourself home.

The Day Before Surgery

- Prepare your skin by washing with the Hibiclens soap, following the instructions for use.
- In the evening, drink your first bottle of the carb/electrolyte sports drink of your choice.
- Get some rest—we will see you tomorrow!

Contact Your Surgeon's Office If:

- You cannot make it to your surgery on time.
- You get sick (a cold or flu) or have a fever.
- You have infected skin, a rash, small cut, and/or a wound near the area where your surgery will be done.
- You have questions or concerns about your surgery.
- You have a toothache or other dental problem.

The Day of Surgery

Before you arrive at the hospital:

- **Except sips of water for medications**, avoid all liquids, including clear liquids, beginning three hours prior to your arrival time at the hospital.
- **Enter through the main entrance** of the hospital on Powel Avenue at the time you were instructed to arrive. Very early in the morning, your family can park in the lot directly across the street (patient/visitor parking) after dropping you off. Valet parking is available at the front entrance, 20 Powel Avenue, between 8 a.m. and 4 p. m. Check in at the Guest Services desk. Staff will direct you to Registration.
- **Registration:** The admissions staff will confirm your identity and insurance coverage, give you an identification bracelet, and register you for your surgery and hospital stay.
- **The Surgical Waiting Area:** Our waiting area has free wifi, television and comfortable seating. Surgical Services staff will escort you to the Pre-Op Unit when the team is ready.



- **Pre-Op or Holding Unit:** The pre-operative (pre-op) department completes your preparation for surgery. You will change into a hospital gown, and we will start an intravenous line. Your personal belongings and clothing will be labeled with your name. A team of nurses and anesthesiologists will review your paperwork, vital signs and laboratory results. You will be asked your name, date of birth, and planned surgery by many members of the hospital team. This is a normal part of the routine safety checks done in preparation for surgery. You will see your surgeon in the pre-op area. After reviewing the surgical paperwork and answering any questions, he or she will mark the surgical site with his or her initials.
- **Anesthesia:** Anesthesia is administered to make you comfortable during surgery. The anesthesiologist will talk with you and your surgeon to decide which type of anesthesia is best for you. Depending on your surgery, you may receive a nerve block and spinal anesthesia to help with pain after the surgery. **See the Total Joint Replacement website for descriptions of the anesthesia options that are available.**

- **Surgery:** After all the pre-operative checks have been completed, you will be taken into surgery. You may be given a sedative to make you sleepy. Once you are in the operating room (OR), the OR staff will make you comfortable, the anesthesiologist will administer your anesthesia, and the surgeon will begin the operation.
- **Post Anesthesia Care Unit (PACU):** Once your surgery is completed, you will be transferred to the recovery room. When you wake, you will have an oxygen mask on your face, a blood pressure cuff, a heart monitor, a device on your finger that measures your oxygen level, and devices on your feet that help circulate blood.

The nurse in the PACU will make sure that you wake from anesthesia safely, that your heart and breathing are normal, and that you remain comfortable after surgery.

Your length of stay in the PACU will be dependent on the type of surgery, type of anesthesia, and any medical conditions you may have. Some patients are discharged home directly from the recovery room, if they are able to meet all their goals for discharge. Same-day discharge usually takes four to five hours from the end of your surgery. Please talk to your surgeon to discuss whether or not you are a candidate for this same-day discharge home pathway.

- **Visitors:** Your support person may accompany you to the pre-op area if necessary. Visitors are not permitted in the recovery room (PACU).

- **Physical Therapy:** Once you have been cleared by anesthesia to get out of bed, our nursing and/or physical therapy team will begin to work with you.

This generally occurs within hours of the completion of your surgery. Early ambulation (walking) has been shown to lead to a reduction in post-operative complications and a quicker recovery. The physical therapist will meet with you either in the recovery room or on the inpatient unit.

- **The Turner 4 Team:** The Turner 4 team consists of highly trained providers, registered nurses, certified nursing assistants, and unit secretaries. In addition, physical therapists, occupational therapists, and case managers will be caring for you during your stay.

Pain Management After Your Surgery

Pain after surgery is expected, and is a normal part of the healing process. Redness and warmth is caused by extra blood flow to the area, which is normal. Swelling is caused by extra immune cells, which the body sends out to investigate the surgical site. This is also normal. Pain occurs because this extra fluid puts pressure on the nerve cells. As you recover, these normal responses to surgery lessen over time, and the surgical pain will lessen.

Benefits of good pain control: Pain control and the ability to move will facilitate a faster healing process. Adequate pain control will allow you to participate in therapy and care with your staff and family. Your care team may try different amounts of medication and adjust the time(s) you take medication in order to manage your pain effectively.



Your Hospital Stay

The Pain Scale

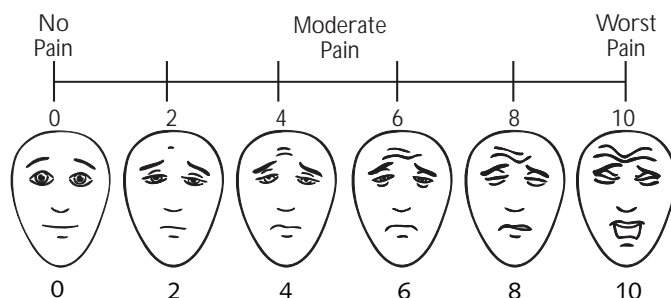
- 0-3 = Minimal/Mild Pain – EXPECTED. Annoying, but you are able to rest, eat, and participate in your therapy and recovery.
- 4-6 = Moderate Pain – Expected to occur periodically. Nagging, may have difficulty resting or participating with therapy.
- 7-10 = Severe/Intense Pain (RARE) – Severe, excruciating, and you are unable to participate in your care, sleep, or eat.

Pain Medications

- Some medications are given on a set schedule, and others are given as you need them throughout the day. Your care team will ask you frequently (about every four hours) about your pain level and they will ask you to rate your pain again after you receive pain medications. The type of pain medication you receive will vary depending on the level of pain that you are reporting.

Side Effects

We will partner with you to monitor and treat pain medication side effects. Side effects include nausea, vomiting, constipation, itching, dizziness, and drowsiness. It is extremely rare that a patient becomes addicted to pain medication if it is taken as prescribed.



This Faces Pain Scale-Revised has been reproduced with permission of the International Association for the Study of Pain® (IASP). The figure may not be reproduced for any other purpose without permission.

Non-medication treatments: There are also non-medication treatments that can be used to control pain:

- **Moving around and changing position** – Your care team might suggest changing positions to help alleviate pain. This might include working with physical/occupational therapy, ambulation with your nurse, or therapeutic exercise.
- **Cold therapy** often works well to control pain. It can also relieve itching and muscle spasms.
- **Relaxation techniques** such as prayer and meditation help relieve anxiety and tension. Doing these activities produces a relaxation response that reduces stress.
- **Distraction therapy** reduces pain by taking your mind away from it. Music is an example of distraction therapy. Newport Hospital offers MedCalm TV on channel 12. Crosswords, puzzles, and adult coloring pages can also be used for distraction.

Frequently Asked Questions About Pain and Pain Medications

Should I be concerned about addiction to pain medications?

Addiction is extremely rare if pain medication is taken as prescribed. Your care providers will be monitoring you closely and you will be on these medications for only a short period of time.

Will I have pain during my hospital stay?

You should expect to feel pain after surgery; however, your care providers will make every attempt to keep your pain at a tolerable level by using a variety of pain medications as well as different pain relieving modalities.

- **Positive thinking** : Individuals who stay positive and hopeful often feel less pain or are less bothered by the pain they feel. Remembering your long term goals can inspire you to think positively about the ultimate outcome of this surgery.

Keeping your pain under control: Everyone feels pain differently and responds differently to pain control treatments. Be sure to:

- Inform your care team about pain control methods that have worked or not worked for you before.
- Talk about any concerns you may have about pain medications.
- Tell your nurse about any allergies to medications you may have.
- Take your pain medications as instructed or ask the nurse for pain medication as needed.
- Set realistic goals for your pain management, with the understanding that pain is expected but should be kept at a tolerable level so you can participate in your recovery.

Blood Work

- Blood will be drawn the morning after surgery. Additional blood will be drawn only as needed during your hospital stay.
- The nursing team and your physician will review your blood work before making decisions regarding your treatment plan.

Preventing Blood Clots

- After surgery you may wear compression stockings and/or have foot pumps while you are in bed. Foot pumps are devices that go around your feet and provide intermittent pulsation, helping to circulate blood and prevent clots.
- Your doctor will also treat you with medications to help prevent blood clots. Your nurse will give you information about the blood thinner your surgeon has prescribed, and he/she will answer any questions you may have.

Urine Catheter

Most of the time, a urine catheter is not needed during or after your joint replacement surgery. If you have a history of difficulty voiding after surgery, let your providers know. In these instances, the need for a urine catheter is temporary. The nurse will monitor your ability to urinate after the catheter is removed. You will need to urinate without the help of a catheter prior to being discharged.

Bowel Management

Some of the medications you receive while you are in the hospital may cause constipation. Your doctor will prescribe medications that prevent constipation and help you to have a bowel movement. These include stool softeners and laxatives. Moving around will help to “wake up” your digestive system. If you have a tendency toward constipation on a regular basis or after surgical procedures, please inform your nurse.

Frequently Asked Question Regarding Your Hospital Stay

How long will I be in the hospital?

We aim to have you return home once you meet the goals for a safe and successful discharge. Some patients progress very rapidly and meet all discharge goals on the same day as surgery. Patients leaving the same day typically spend four to five hours in the PACU getting ready to go home. Almost all other patients meet their goals the morning after surgery. Please make sure to have someone “on call” to pick you up. You are welcome to have this person join you to review your discharge instructions and education. This is the last step before you leave the hospital.

Preventing Falls

No one plans on falling down after having joint replacement surgery, but because of medications and the nature of joint replacement surgery, your balance and strength may be compromised. It is extremely important that you call the nurse for assistance prior to getting out of bed or moving from the bed to the chair or if you feel dizzy. When you are in the bathroom, it is important that you call for the nurse before standing and moving to the sink and into your room.

Physical Therapy

Physical therapy (PT) is an important part of your recovery that helps you regain normal mobility.

Progression: Your doctor will order PT after surgery. The physical therapist will see you to complete an evaluation the day of your surgery or, at the very latest, the following morning. The physical therapist will review an exercise program and ensure that you can get in and out of bed, off a chair, into the restroom, walk typical household distances, and complete stair training if this is needed for you to go home safely.

Follow-up physical therapy sessions: Depending on your progress during your first PT session, the therapist may return a second time if needed, or your nurse may help you get out of bed to take a walk or sit up in a chair later in the evening.



Driving after joint replacement surgery: Safely getting into and out of a car will be discussed during your physical therapy. Your surgeon will determine when you will be able to safely drive again. You may qualify for a temporary handicap parking permit. Your surgeon will be able to address this with you.

About Walking Devices

Our program typically issues forearm crutches as your primary walking aid. If it is unsafe for you to use crutches, you will be issued a rolling walker. If you were issued only a rolling walker in lieu of crutches prior to surgery, your PT may recommend that you purchase a simple cane for stairs. A cane can be purchased at supply stores, pharmacies, and large retail stores. They can also be found online.

Occupational Therapy

What is Occupational Therapy?

Occupational therapy (OT) services may include evaluations of your home and suggestions for adaptive equipment that may make routine tasks easier for you when you return home. Occupational therapists have a holistic perspective, in which the focus is on adapting your environment to fit your needs.

Occupational Therapy After a Total Joint Replacement

After your total joint replacement you may work with an occupational therapist who will assess your ability to complete self-care and home management tasks with the goal for you to return home safely. The occupational therapist will discuss adaptive equipment options to maximize your independence in your home.



Adaptive Equipment Needs

Following your total joint replacement, you may have difficulty performing personal care tasks. You may find it challenging to reach your feet to wash; to put on pants, socks, and shoes; or to bend to pick something up from the ground. Some people find it helpful to use adaptive equipment to perform these tasks while they are recovering from a total joint replacement. The most commonly used items are a reacher, a sock aid, a long shoehorn, a long-handled sponge, and elastic shoe laces. When indicated, your occupational therapist will teach you how to use this equipment to maintain

Goals for Discharge Home

- Get out of bed to the chair
- Pain at a tolerable level
- Walk household distances (50 feet)
- Perform bathroom tasks
- Understand any movement precaution (if applicable)
- Get dressed
- At minimum, pass gas
- Stair training if applicable
- Review discharge instructions with your nurse

your independence while you recover. Newport Hospital aims to provide this equipment free of charge when recommended. If we are unable to provide this equipment, it is available at most retail pharmacies.

Discharge Prescriptions: The Brown University Health Pharmacy

We recommend use of the Brown Health Pharmacy. Brown Health Pharmacy can fill and deliver your discharge medications to your bedside at no extra cost to you. If you prefer, you or a loved one may also pick up your medications at the pharmacy, which is located on the first floor of the hospital near the main entrance.

Your standard prescription copay applies. Medications prescribed after a joint replacement do not have refills. You will receive one from the Brown Health Pharmacy prior to leaving the hospital. Using the Brown Health Pharmacy saves you the inconvenience of stopping at the pharmacy on the way home. You can plan to pick up your second prescription at the pharmacy of your choice.

Brown University Health Pharmacy

Newport Hospital - Main Lobby
401-845-1100

brownhealth.org/pharmacy
Open Monday - Friday, 7 a.m. - 7 p.m.

Planning for Your Discharge and Recovery

The Role of Case Manager

The case manager will:

- review your discharge options and ensure you are prepared.
- see you the day after your surgery and continue to monitor your progress and facilitate your safe discharge from Newport Hospital.

Determining Your Discharge Plan

- It is your right to choose the providers, services and agencies that help you recover after your surgery. Choice can be limited for many reasons, including your insurance coverage and resource availability.
- The team's goal is to identify the best and safest discharge option for you. Case managers work closely with you and with physical and occupational therapists to develop your discharge plan.
- Discharge plans can change for a variety of reasons. We encourage you to maintain flexibility in planning for discharge, and the team will help guide you through this process.

Home Care: Option 1 After Discharge

If you meet all goals for discharge while working with physical therapists in the hospital and have support available at home, you will be discharged to your home and receive therapy there. Going home with home care is ideal. Recovering in your home promotes more holistic and rapid healing. People tend to sleep, move, and eat better in their own homes. During the first two weeks, progressive mobility and strengthening is the priority, and this can be done safely in your own home. You remain in control of managing your medication and other needs, and your surgeon remains in control of your care.

- Almost all joint replacement patients are able to go directly home the day of, or the day after, surgery.

- For questions about what type of support you will need, please see the coach's guide on page 14.
- Plan ahead. Secure a support person who can provide you with a ride home and who is able to stay with you for at least one night after your surgery.

Skilled Nursing Facility: Option 2 After Discharge

- This option is only for patients who cannot safely walk household distances, are having difficulty maintaining their balance, and who cannot safely return home. A list of facilities is available on request.
- There may be an out-of-pocket expense for transportation from the hospital to a skilled nursing facility via ambulance or wheelchair van. Please contact your insurance company for details.
- Case managers are responsible for making referrals to facilities and/or agencies based on your choice. If a bed is not available at the facility of your choice, the case manager will seek alternatives.

Tips for Preparation

- Newport Hospital partners with a local home care agency for most total joint patients. If you have a preferred home care agency, please notify your surgeon's office.
- If your goal is to go to a Skilled Nursing Facility, please contact the admissions department at your preferred facility prior to your surgery.
- Call your insurer regarding copays and other coverage questions.
- Follow the list of tips provided in the Preparing for Surgery section of your patient education materials so your home is set up for your return.

Frequently Asked Questions About Discharge from the Hospital

How long will I be in discomfort after surgery?

Most patients experience pain for two to four months after surgery. Pain is a normal part of the healing process after surgery. Your pain will typically lessen over time and you will usually be able to stop strong pain medications within 10 to 14 days after surgery.

When can I start driving again?

Your surgeon will provide you with a time frame of when you can start driving, which typically ranges from three to six weeks. You must also be off your pain medications before you can resume driving.

When can I resume playing sports such as golf?

You can return to your leisure activities as soon as pain allows. Always remember to follow any movement precautions your surgeon and therapist have reviewed with you. For activities such as swimming, you should wait approximately six weeks. Please speak with your surgeon or rehabilitation providers if you have any questions.

When can I resume sexual activity?

You may resume sexual activities when it is comfortable for you, remembering to follow any precautions.

Do I need antibiotics for dental procedures (cleanings, fillings, etc.)?

Yes, all total joint patients will need to take antibiotics before all dental procedures for a period of time specified by your surgeon. Your surgeon will discuss specifics with you at your post-operative visit.

Will I set off the detector at the airport? If so, do I need a medical ID card?

Patients may set off metal detectors. It's advisable to inform the Transportation Security Administration officer about the implant before screening. No medical ID card is necessary after total joint replacement, but if you travel frequently you may wish to get a TSA notification card. Visit www.TSA.gov.

Will I be able to have an MRI now that I have a total joint replacement?

You can have an MRI safely.

How long will I be on a blood thinner?

You will be on your blood-thinning medication for a period of time that will be determined by your surgeon, usually two to four weeks.

Will I need a hospital bed if I choose to go home instead of to a skilled nursing facility?

Most patients do not require a special bed when they choose to go home. Speak with your therapist about your home setting, and he or she will help you determine if this is needed. Your case manager will arrange for delivery if you decide you will need a hospital bed. Please check with your insurance provider about any out-of-pocket cost associated with a hospital bed.

When can I shower?

Most surgeons allow a stand-up shower within days of surgery. It is encouraged to wait until the home physical therapist evaluates your bathroom for safety and practices getting into and out of your shower with you. Specific instructions from your surgeon will be reviewed before you are discharged from the hospital.

Outpatient Rehabilitation Services After Total Joint Replacement

I can't wait to get back to _____ again!

Outpatient rehabilitation is recommended in order to maximize your new joint's performance and get back to the activities you want to enjoy. You may still need additional strength training, assistance with bending or straightening your new joint, or help weaning off the walker or cane. Outpatient physical therapy can help you accomplish these things. Outpatient physical therapy begins once you are easily able to leave your home and get into and out of a vehicle. Keep in mind that you may still need someone to drive you to outpatient therapy.

On your first visit to the outpatient rehabilitation clinic following surgery, the therapist will

- take a thorough history to learn about your current challenges with physical activity
- assess your pain
- assess your ability to walk and climb stairs
- assess your range of motion, strength, and balance
- determine your personal goals for therapy
- develop a unique treatment plan for you

The frequency and duration of outpatient therapy varies as each patient will progress differently.



In most cases, outpatient physical therapy will begin when you no longer require home-based physical therapy services, typically about three weeks after surgery. It is important to set up outpatient physical therapy shortly after discharge from the hospital to avoid delays or gaps in care. You are free to choose whichever outpatient physical therapy provider works best for you. If you are unsure where to go for outpatient physical therapy following your surgery, please reach out to the Total Joint Center hotline at 401 845 4330 or contact your surgeon's office for guidance.

The Coach's Guide to Joint Replacement Surgery

Coach Definition: A coach is someone who will help you do your best by removing obstacles, helping you set goals, and motivating you to remain active in your recovery.

The coach may be your spouse, child, close friend, or a combination of these people.

Coach Expectations:

A coach should be compassionate and patient, with good observation, organization and listening abilities. Coaches are the cheerleaders for their loved one.

Time Commitment:

- Remind the patient to do exercises at home, two to three times per day, as needed.
- Attend outpatient physical therapy sessions with the patient, if needed (usually three times per week, 30 to 45 minutes per session).

Responsibilities:

- Motivate your loved one to be as independent as possible.
- Encourage the patient to do pre- and post-operative exercises daily.

- Assist with discharge from the hospital (transportation, medication, equipment, etc.)
- Do (or arrange for) the shopping, cleaning, cooking, laundry and errands.
- Encourage adequate pain control both in the hospital and after discharge (medication, ice, elevation, etc.).
- Keep track of medical appointments and provide transportation to and from the hospital, the surgeon's office, the physical therapist's office, and any other appointments.
- Pick up prescriptions or arrange for delivery of prescriptions.
- Manage finances, including paying regular household bills and handling insurance paperwork.
- Communicate with the health care team about any changes or concerns.
- Minimal, if any, lifting, carrying, or bathing will be required of the coach.
- If possible, find an alternate coach if you are unable to attend or assist. (Two are always better than one!)

If you and your surgeon are considering same-day surgery, consider the benefits

- Appreciate the comfort of your own bed and a better night's sleep without being disturbed.
- Have improved control of your own pain management.
- Enjoy your own food.
- Feel more secure and safe in the familiarity of your own environment.
- Going home the same day helps patients move around earlier and spend less time lying in bed, which helps reduce blood clots, urinary tract infections, constipation, and pneumonia. Patients tend to return to activity more quickly.
- Patients report higher satisfaction with the joint replacement process.
- Patients are equally as safe at home as they are in the hospital regarding the risks of readmissions, related ER visits, acute visits to physicians, re-operations, or adverse effects post-operatively.



**Total Joint Center
at Newport Hospital**

20 Powel Avenue, Newport, RI
401-845-4330

Brownhealth.org/NewportJointReplacement