

General Guidelines for Returning Home After Total Joint Replacement

In these past weeks, you have been waiting to enter the hospital for surgery. Now your surgery is done and you start a period of readjustment as you return home. For the next 6 to 8 weeks, your new joint will continue to heal. You will need to learn to balance your exercise periods and with your rest periods.

Do not overdo or push yourself beyond the limits of pain!

Discharge Instructions

- You will be discharged about 1 to 3 days after surgery. When you leave the hospital will be decided by all of your team members including doctors, nurses, case manager or patient care resource manager (PCRM), and physical therapists. We will go over your discharge instructions with you and a follow up appointment will be scheduled. Your follow up appointments are very important.
- You will be given prescriptions for medicines you will need at home. Start taking any medicines you were taking before surgery unless your doctor instructs you not to take them.
- You may need some help when you go home. We will help you decide what is needed. Some patients need to enter an extended care facility for additional therapy. If you need such therapy, your case manager and nurse will help with the arrangements. It is also very important to use your walking devices as instructed. While you are in the hospital, you may be provided with either special equipment for home use or given a prescription to get the equipment from your local medical supplier.

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Learn more about your health care.

- You must be home bound to receive home care services for nursing or therapy. Tell your home care therapist or nurse if you will be out for any doctor's appointments so they can adjust the time of your visit.

Care of Your Wound

- Your incision may be closed with staples or stitches you can see, or be closed under the skin.
- Your wound may have special tapes called steri-strips holding the incision edges together. These will loosen and peel off in 4 to 10 days. If the tapes have not peeled off after 10 days, you should remove them.
- Please follow instructions for care of your wound as ordered by your doctor.
- **Please report any of these signs to your doctor:**
 - ▶ Redness
 - ▶ Swelling
 - ▶ Drainage at the incision site
 - ▶ Fever of 101 degrees or more
 - ▶ Edges of the wound start to separate
 - ▶ Coldness of the leg
 - ▶ Leg turns pale or blue in color
 - ▶ Tingling or numbness
 - ▶ Leg pain

Your Care after Discharge

- Be sure to tell all doctors or dentists you see that you have had a joint replacement.
- An infection in another part of your body such as in the lungs, kidneys, mouth or skin can spread to the new joint through the bloodstream. Contact your family doctor for general medical problems such as any infections. As a preventative measure, you may need to take an antibiotic.
- You will need antibiotics before having any surgical procedure and some medical procedures.

- Dental care on a regular basis every 6 months is important to prevent infection from your teeth. Do not neglect this important aspect of health care. Before your dental appointment, contact your dentist to get a prescription for a preventative antibiotic.

Swelling

- Swelling (edema) is common following total joint replacement. Some people have swelling while still in the hospital. Others may notice it once they are home and become more active. Still others never have swelling. Areas most likely to become swollen are the foot, ankle, knee and at times, the thigh.
- To prevent swelling, elevate your feet higher than heart level while you are lying down. **Your toes should be higher than your nose.** Do not place pillows under bent knees. Do this during rest periods for 45 minutes to 1 hour, 2 to 3 times a day. If your swelling does not decrease after sleeping all night and elevating your legs during the day, please **call your doctor's office.**



- You may have white elastic stockings to help reduce swelling. Please wear the stockings during the day and remove them at night. Wash the stockings regularly with soap and water and hang them to dry over a towel during the night.

Anticoagulation medicines, also called blood thinners

- Some patients will leave the hospital with a prescription for an anticoagulant medicine. This decision is made by your surgeon. Anticoagulants slow down the process of blood clotting. Using controlled amounts of medicine reduces the risk of blood clot formation. This medicine is often taken for 1 to 6 weeks, but your doctor will decide how long you should take it.
- Aspirin and other arthritis medicines are also anticoagulants. Therefore, **do not take aspirin or products with aspirin while you are on anticoagulants.** Two anticoagulants should not be combined without a doctor's approval.

Sitting

Do not sit longer than 30 minutes at a time. Get up often, walk and change your position. During long car trips, stop every 30 minutes to get out of the car and move around. If you do not take breaks, you will become stiff and have swelling, which may lead to blood clot formation.

Walking

Do not walk without your walker or crutches until your doctor tells you that it is allowed. You may feel you can do without these devices, but remember that healing is occurring and it takes time. Use of an assistive device protects the healing of your joint. Walk often on level ground and go outdoors if weather permits or choose a large indoor area such as a shopping mall.

Water walking

When your doctor feels your incision is well healed (often 6 weeks after surgery), water walking may be recommended. **Do not walk in water unless you have your doctor's permission.** If you have access to a pool, water walking is relaxing and strengthens the muscles in the hip and leg. Enter the pool to chest high water. Hold onto the side of the pool and walk for 15 to 20 minutes. Repeat 3 to 5 days each week.

Climbing stairs

Stair climbing is allowed in moderation. Follow the directions you have been given on how to climb stairs. During the first few weeks at home, limit climbing of stairs to one round trip a day.

Driving and riding in a car

If you are riding in a car, stop every 30 minutes and get out of the car to stretch. Do your ankle pumping exercises while you are riding in the car.

You may drive a car in about 6 weeks after your release from the hospital, with your doctor's permission. Only drive if you can completely control your operative leg and you are no longer taking pain medicine.

Air travel

For the first year after your joint replacement, use these precautions to protect your new joint and reduce your risk of problems.

- When booking your flight, tell them you have a total joint in place and request a bulkhead seat so you have more room to stretch out your leg.

- Be sure to tell the officers at the security check points that you have a total joint in place.
- Request assistance to travel through the airport.
- Wear your TED stockings during any flight.
- Stand frequently and do your ankle pumping exercises during the flight as you are able.

Long term activity restrictions

Your new joint can be damaged or worn out by rough treatment. You will always need to exercise to keep your muscles and ligaments strong. You will need to avoid activities that may cause excess stress to the joint and thus cause it to loosen.

- **Activities to avoid include:**

- ▶ Jogging or running
- ▶ Contact sports
- ▶ Jumping rope
- ▶ Racket sports
- ▶ Pushing weights with your leg
- ▶ Lifting objects that weigh more than 35 pounds

- **Recommended activities include:**

- ▶ Exercises taught by your physical therapist
- ▶ Swimming
- ▶ Bike riding
- ▶ Walking or using treadmill
- ▶ Golf

- Excess weight on your joint also should be avoided. Try to keep at a healthy weight. Talk to your doctor about strategies.

Participating in sports

Do not participate in any sports until you have your doctor's approval.

Sports may eventually include golfing, swimming, bowling, bicycling and dancing. Please ask about other sports in which you are interested. **Do not** use exercise equipment, whirlpools or spas until approved by your doctor. Talk with your doctor about weight lifting with your operative leg.

Using water beds

Do not use a water bed until approved by your doctor.

Sexual activity after total joint replacement

Many patients and their partners have a great deal of anxiety about resuming sexual activity after a total joint replacement. This section will address these issues and hopefully relieve your anxieties and answer your questions.

- **Knee Replacement**

After knee surgery you may return to sexual activity as soon as you feel able.

- **Hip Replacement**

- ▶ **What affect will total hip replacement have on sexual relations?**

Patients who need total hip replacement often have a great deal of pain and stiffness before their joint replacement that can interfere with their sexual activity. Total hip replacement will relieve a lot of the pain and stiffness so sexual activity is more comfortable.

- ▶ **When may I resume sexual intercourse?**

The soft tissue around the hip, namely the skin incision and the muscles, require about 4 to 6 weeks for healing. It is most often safe to resume sexual activity in about 4 to 6 weeks after surgery. However, if you have no problems after surgery and have little to no hip pain, you may resume sexual activity at an earlier time. Please openly discuss this issue with your doctor.

- ▶ **What positions are safe and what precautions should be followed during sexual activity?**

Total hip replacement precautions have been outlined for you by your surgeon, nurse and physical therapist. These precautions should be followed in all activities of daily living. As your hip heals, you may assume a more active role.

After several months you can resume sexual activity in any comfortable position.

- ▶ **What should I tell my partner?**

Your partner should know the hip precautions and should understand the effect of those motions. Tell your partner openly and freely about your level of comfort, concerns and anxieties.

Information to Remember

- Name of your surgical procedure: _____
- Doctor's name and phone number: _____
- Physical therapist's name and phone number: _____
- Care Manager or PCRM's name and phone number: _____
- Equipment supplier's name and phone number: _____
- Emergency Number: _____

Questions, Concerns, Issues

If you have any questions or problems, write them down and call your doctor, nurse, case manager or PCRM, or therapist.

☒ **Talk to your doctor or others on your health care team if you have questions. You may request more written information from the Library for Health Information at (614) 293-3707 or email: health-info@osu.edu.**