

Guide to home rehabilitation after joint replacement surgery



How this guide can help you

A joint replacement surgery can significantly improve your quality of life. But planning for your recovery and rehabilitation can be just as important.

Use the information in this guide as a reference to help you through your surgery from start to finish. It will also assist you in planning for any anticipated needs so you will be better prepared after surgery, which can help ensure a smooth recovery.

This guide will explain how—in the comfort of your own home—a team of skilled clinicians can provide you with care that you need to rehabilitate and recover so you can get back to doing the things you love.

Table of contents

Page	Content
2	How this guide can help you
3	Patient information
5	Frequently asked questions
7	Preparing for your surgery
8	Preparing your home checklist
11	Caring for yourself at home
13	Home healthcare expectations
15	Your outcome
16	Do's and don'ts
17	When to call



“As far as a recommendation of home healthcare to others, I think it’s a must. It’s the best way to proceed after the operation because you’re in your home environment. That, to me, is very important.”

—Former CenterWell Home Health™ patient

Patient information

This guide will help you provide your surgeon and medical staff with answers to some of their questions, such as who they should call to set up your home health service. You can also use this patient information sheet to write down any special discharge instructions you receive from your surgeon, nurses or therapists.

Patient name: _____

Date of birth: _____ Phone: _____

Family member/caregiver name: _____ Phone: _____

Primary healthcare provider: _____ Phone: _____

Special instructions after surgery:

Lab tests I will need when I go home after surgery:

Name of preferred home healthcare agency: _____

Agency's phone: _____

Follow-up appointment date to see surgeon: _____

Medication information

Drug name (brand/ generic name)	Time of day	Amount (measurement such as mg)	Method (by mouth, topical, etc.)	Why am I taking this medicine?	Stop date	Medicine concerns
	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> As needed					
	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> As needed					
	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> As needed					
	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> As needed					
	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> As needed					
	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> As needed					
	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> As needed					
	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> As needed					
	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> As needed					

Frequently asked questions

General information

What can I expect from home health?

Within 24 hours of your discharge to home, you can expect a welcome call from your home health provider. Depending on the type of surgery and your surgeon's preferences, you may receive visits from nursing, physical therapy and/or occupational therapy. If you need help with personal care, such as bathing or dressing, a home health aide can also be provided.

At the first visit, your clinician will:

- Examine you to assess your current status, review your post-discharge instructions and answer any questions you may have
- Discuss any surgery-specific precautions you may need to consider
- Review your current medicines to make sure you understand what they are and how to properly take them
- Examine your wound dressings, teach you about wound care and dressing changes and order the proper supplies
- Assess your current level of function, evaluate the safety of your home and make recommendations for improvement. The home health clinician will work with you to establish your goals and treatment plan together with your surgeon's orders.

What is expected of me?

Our team is here to help you every step of the way. But it is very important that you and your family are also an active part of your rehabilitation. Being involved will help you to achieve the best possible outcome.

You will receive treatment and instruction in managing pain, preventing complications and taking medication. We will also give you a comprehensive home exercise, activity

and care program to perform on your own between visits. Following the instructions provided by your home health clinicians and participating in your rehabilitation is critical for a successful recovery.

What if I live alone?

It is best to make arrangements for family members or friends to stop by and spend time with you each day. They can assist you with meal preparation, laundry and other activities that you will be unable to perform when you first return home. They can also help by running errands for you as it will be quite an effort for you to go out, initially.

Before returning home, your surgeon and facility discharge planner will recommend the most appropriate place for your rehabilitation, including home if appropriate. If you are unable to safely return directly to your home, a short stay in a rehabilitation facility may be suggested.

Will my insurance pay for home health?

Most insurance plans provide some coverage for home health services. But plans, deductibles, out-of-pocket expenses and provider networks vary. It is best to contact your home health provider of choice before surgery to see if it is in network with your insurance company. You should also contact your insurance company to find out if a preauthorization is required for home health.

Medicare Part A typically covers home health services at 100%, provided the services are ordered by your surgeon, are performed by skilled professionals, and are medically necessary. If you have questions about your Medicare plan coverage, contact your home health provider of choice and/or Medicare at **1-800-MEDICARE (1-800-633-4227)**.

Frequently asked questions

Joint replacement surgery

What is a total joint replacement?

A total joint replacement is a surgical procedure to remove a diseased or injured joint and replace it with an artificial joint called a prosthesis, which is typically made of plastic, metal or ceramic material. The prosthesis is designed to work like a normal, healthy joint. Hip and knee replacements are the most common joint replacement surgeries. Joint replacements can also be performed on other joints like the ankle, shoulder and elbow.

What are some of the reasons a joint replacement is performed?

A joint replacement is most often performed to alleviate pain and disability due to arthritis. In your joints, there is a smooth layer of cartilage that allows for smooth and pain-free motion. Arthritis causes this lining to wear away or roughen, resulting in pain and limited motion. Your healthcare provider may suggest a joint replacement when pain and stiffness limit normal activities and are not relieved by other measures such as rest, medications or physical therapy.

What happens during the procedure?

The surgeon makes an incision along the joint, moves aside muscles, and removes the damaged bone and cartilage. The remaining bone is prepared, and the new joint is placed in position. Depending on the type of prosthesis, the surgeon may use bone cement to hold one or both parts of the artificial joint firmly in place. The incision is commonly closed with staples, stitches or glue. These will be removed—typically in 10 to 14 days—if ordered by your surgeon.

How long will the surgery take?

A joint replacement procedure usually takes one to two hours to perform.

How can I prepare for the procedure?

If you are overweight, shed excess pounds to decrease the stress on your new joint and make the surgery easier to perform. Review your medications with your surgeon to determine if any of them, such as anti-inflammatories, should be stopped before surgery. You will also want to review and follow any applicable recommendations in the “Preparing your home” section of this booklet.

How long until I return home following surgery?

Some patients may have their joint replacement performed in an outpatient surgical center, while others may be admitted to the hospital for surgery. If you are admitted, you can expect your stay to be two to three days. Depending on your progress, care needs and ability to perform activities of daily living, you may require additional time to recover. Your surgeon will determine when you are able to return home and if you would benefit from home healthcare.

Will I have any restrictions after surgery?

Whether or not you have weight-bearing or other restrictions will depend on the type of surgery and the prosthesis your surgeon chooses. If you have home healthcare services after you are discharged, your clinicians will reinforce these with you. Your home health clinicians may also develop strategies to help you adapt to your home environment. It is important to follow all instructions about any precautions you need to take. This will help prevent injury and avoid complications so you can heal properly and get back to doing the things you love.

Preparing for surgery

Plan ahead

Prior to your surgery, make sure your home is ready for your return. Run any errands, clean your home, do laundry and put clean linens on the bed.

Medications

Plan to have a 30-day supply of your regular medications on hand. If you have any prescriptions you will need after the surgery, fill them before your procedure to ensure you have them when you return home.

Nutrition

You will also want to have plenty of easy-to-prepare meals and nutrition-rich snacks available. Prepare meals ahead and freeze them in individual serving containers. Eating a well-balanced diet that includes ample amounts of protein will help with healing. In addition, some surgeons may recommend an iron supplement prior to and following surgery

Fiber intake

You may want to give special consideration to your fiber intake. A high-fiber diet can help prevent and treat constipation. This is important because decreased mobility and many pain medications can cause constipation. The foods that supply the most fiber are whole grains, fruits and vegetables.

Hydration

You will need to get plenty of fluids after your surgery. Dehydration slows metabolism, which can slow healing. It can also lead to fatigue, decreased blood pressure and constipation. Drink six to eight 8-ounce glasses of water daily unless you have other medical conditions that restrict your fluid intake.



Preparing your home checklist

After your surgery, you can expect that your mobility will be decreased and that you will likely be using an assistive device such as a walker. With that in mind, there are many things you can do now to better prepare your home for your return. Use the checklist below to assess your home ahead of time. The suggested changes can improve your safety and decrease the risk of a fall when returning home.

✓	General considerations
<input type="checkbox"/>	Remove small throw rugs. Ensure area rugs have nonslip backing or are taped down with double-sided tape.
<input type="checkbox"/>	Reattach or remove any loose flooring. Repair holes or rips in carpet or other flooring material.
<input type="checkbox"/>	Remove cords such as electrical, cable, phone, etc., from all walkway areas. If cords cannot be removed, cover with a cable concealer sold at office supply stores. (Note: Running a cord under carpet or tape may lead to cord failure and result in fire.)
<input type="checkbox"/>	Remove items from your hallways. Be sure you have room to move and turn around.
<input type="checkbox"/>	Use a night light in your hallway. If there is no outlet, consider leaving a nearby light on to improve visibility.
<input type="checkbox"/>	Move furniture, baskets or other items that may block your path.
<input type="checkbox"/>	Ensure doorways are wide enough to allow you to move through with a walker or other assistive device. You may have to remove the door.
<input type="checkbox"/>	Be sure you have access to a phone in each room. Make sure cordless and cell phone chargers are within reach. Keep your phone fully charged.
<input type="checkbox"/>	Make sure light switches and lamps can be reached without leaning outside the base of your walker. Place night lights in darker areas and where lights are more difficult to reach.
<input type="checkbox"/>	Ensure handrails in stairways are secure and that you can turn on the light from the top and the bottom of the stairs.
<input type="checkbox"/>	Figure out which entrance to your home is safest to use, even if it's not your usual entrance.
<input type="checkbox"/>	Ensure any steps inside or outside of your home are sturdy and well-supported. Make sure all handrails are secure. Consider having additional handrails or grab bars installed.
<input type="checkbox"/>	Remove equipment, furniture and other items from the pathways through your garage or patio.
<input type="checkbox"/>	Organize equipment, tools or other items in the garage so you can easily reach them while using your walker. Trim any bushes or hedges that may be blocking a safe path to your car, especially if using a walker or other assistive device.

Preparing your home checklist

✓	Living room/family room
<input type="checkbox"/>	Make sure your chair is comfortable and firm enough to allow you to easily stand up and sit down. You may need to move a chair from another area of the house. Chairs with armrests can be very helpful for pushing out of a chair. (Note: Recliners are often too low and soft to use.)
<input type="checkbox"/>	Use a firm pillow or foam square to make your seating higher.
<input type="checkbox"/>	Remove casters or wheels from any chairs you may use.
<input type="checkbox"/>	Make sure your hips are higher than your knees when you sit to limit bending.
<input type="checkbox"/>	Establish a “command center” near the chair you will be using most often. Place remote controls, books, a water bottle and other items you use often nearby.
<input type="checkbox"/>	Keep a small cooler with premade ice packs, beverages and snacks within reach, especially if you will be alone during part of the day.
✓	Bedroom
<input type="checkbox"/>	If your bedroom is upstairs, consider setting up a temporary bedroom on the main level. Make sure there is also a bathroom nearby.
<input type="checkbox"/>	Keep bedspreads and linens from touching the floor to prevent tripping.
<input type="checkbox"/>	If it is difficult for you to get out of bed, raise the bed by using bed risers sold at bed-and-bath stores. Keep your hips the same height as or higher than your knees when you sit on the edge of the bed.
<input type="checkbox"/>	Lock or remove any casters from your bed.
<input type="checkbox"/>	Make sure you can get around your bed with your walker. You may need to move the bed or other furniture to give you enough space.
<input type="checkbox"/>	Consider temporarily placing socks, undergarments, pants, shirts and other frequently used clothing items all in a top drawer. Move shoes from the floor to an easy-to-reach shelf or the top of the dresser.

Preparing your home checklist

✓	Bathroom
<input type="checkbox"/>	Be sure you have enough room to move around your bathroom using your walker. Your home health clinician can help you figure out how to arrange your bathroom space. In some instances, a bedside commode might also be an option.
<input type="checkbox"/>	Consider getting a raised toilet seat with arms to help you stand up and sit down. Keep your knees above your hips to limit bending.
<input type="checkbox"/>	Use a stool or other assistive device to help you while bathing and dressing.
<input type="checkbox"/>	Consider installing a grab bar to make it easier to get in and out of your bathtub or shower.
<input type="checkbox"/>	Apply nonslip strips to your bathtub or shower floor. Strips can be found at most home improvement and hardware stores.
<input type="checkbox"/>	Rearrange towels, toilet paper and other frequently used items in linen closets or on bathroom shelves so they are at your hip level or above.
<input type="checkbox"/>	Install a night light. It is especially important to see clearly when using your walker or other assistive device.
✓	Kitchen
<input type="checkbox"/>	Move items you need to make simple meals to the counter near the stove. Make sure you can easily reach pantry, refrigerated and frozen ingredients that you use often.
<input type="checkbox"/>	Keep precooked microwavable meals that are easy to heat within reach. Choose nutritious foods high in protein.

Caring for yourself at home

Medical equipment and assistive devices

You may want to talk with the hospital therapist, discharge planner or home health therapist about equipment or assistive devices you may need when you return home.

Pain management

Your surgeon will prescribe pain medicine to help keep you comfortable after your surgery. In the hospital, you may have intravenous (IV) pain medications, a pain pump or some other form of pain medication in combination with oral medications. When you return home, you will most likely be taking oral medications. Taking your medications as prescribed is very important for controlling your discomfort. It is a good idea to time your therapy or exercise sessions so that they begin about 30 to 45 minutes following your dose of pain medication. This will enhance your ability to fully participate in your exercises.

The use of ice according to your hospital discharge instructions will also help to alleviate discomfort. Changing positions and moving frequently throughout the day will also help.

Mobility

It is very important to move and change positions frequently throughout the day to help speed your recovery. You should interrupt sitting every 45 minutes or so to move about unless otherwise instructed. When you move, your muscles contract and relax, assisting blood flow to your legs. Actively “pumping” your foot and ankle up and down can also assist with blood flow.

Rest

Medications, discomfort and a change in routine can all lead to some initial difficulty with sleeping. This is normal. Try to get into a bedtime routine at home to help prepare you for rest. Try not to sleep too much during the day, as this can disrupt nighttime sleep.

Breathing

It is important to use your breathing exerciser or incentive spirometer if you were given one in the hospital. Be sure to ask your home health clinician if you have any questions about its use.

If you were not provided an incentive spirometer but your mobility and activity are decreased, be sure to breathe deeply 10 times every hour to decrease the risk of fluid buildup in the lungs to prevent pneumonia. You may also be instructed to cough 10 to 20 times per hour.

Appetite

Your appetite may be low when you first return home. Drink plenty of fluids to stay hydrated, and try eating small, frequent meals. Your appetite will improve over time.

Constipation

Pain medication and decreased activity levels can cause constipation. Your hospital discharge instructions will include your surgeon’s recommendations for dealing with this problem. To help prevent constipation, make sure you get plenty of fiber and fluids.

Caring for yourself at home

Incision care

Proper incision care is important to help prevent infection. Your hospital discharge or post-procedure instructions will contain specific information on caring for your surgical incision and wound dressings. Your home health clinicians will review these with you and make sure you are comfortable with incision care.

Support stockings

Depending on the type of procedure you have, you may be sent home with support (anti-embolism) stockings. Your surgeon will prescribe how often and how long you should wear these. The stockings provide compression and are designed to prevent blood clots. Your home health clinician can give you tips on the easiest way to get the stockings on and off. When washed, these stockings should be line or air dried. Heat from the dryer can break down the compression components.

Medication management

Following your procedure, your surgeon may prescribe an anticoagulant medication, which people often refer to as a “blood thinner.” This type of medication is frequently used following joint replacement surgery to help prevent the formation of blood clots. Your surgeon will determine if this type of medication is right for you.

Activity

After your surgery, you will experience some discomfort and may feel tired or weak. The nurses in the hospital will work with you on managing the pain and making sure that you are as comfortable as possible. The nurses and therapists will explain your daily schedule, your therapies and how to do basic activities of daily living.

Once you are home, be aware of the precautions and the limitations you have been given for your daily activities. For example, you will need to learn how to put on shoes and socks, make a bed, reach into a low cabinet and perform other activities. Your activities may be limited at first. It is very important to think before you move.

If your surgeon orders assistive devices like a walker or crutches, you should always use them for standing or transferring from one surface to another, such as from bed to chair, sitting to standing, and for walking. Your home health clinicians will help you learn how to safely use these devices to accomplish your daily necessities. For example, doing things in the kitchen, like getting your dinner from the counter to the table, can be difficult. Your therapist can help you assess and address your particular situation.

After you have mastered how to safely carry out daily activities, you can feel confident in resuming most of your daily routine as your physical endurance increases. You will be expected to follow the provided exercise schedule on your own.

Home healthcare expectations

Within 24 hours of your return home, a home health nurse and/or a physical therapist will contact you and visit you in your home.

During the physical therapy visit, the therapist will:

- Assess your physical and functional status and determine if you need other home healthcare services, including additional equipment
- Begin your physical therapy treatment
- Instruct you and your family in the care of your incision, and how to prevent and recognize infection and complications
- Instruct you on your medical follow-up schedule

If a nurse is needed, the nurse will:

- Determine if you have ongoing nursing needs in addition to those provided in your rehabilitation program
- Assess your physical status
- Assess your understanding of your medications and diet, and provide information and instruction about them if needed

If you are on anticoagulant medication (medicine to prevent blood clots), your home health clinicians will instruct you and your family in your anticoagulation therapy. If your surgeon orders that the anticoagulation medicine be delivered by injection, the nurse will teach you and your family how to give injections.

If an occupational therapist is needed, the therapist will:

- Assess your physical and functional status related to your activities of daily living (ADLs) and formulate a plan to help you achieve optimal functional independence
- Begin your occupational therapy treatment
- Instruct you and your family on how to modify your activities, conserve your energy and use required equipment

If a home health aide is needed, the aide will:

- Assist you with personal care tasks (e.g., bathing, dressing, toileting, etc.) as indicated after your nursing and/or therapy evaluation and assessment



Home healthcare expectations

The rehabilitation process

Your orthopedic rehabilitation will consist of nursing visits (if ordered by your surgeon), therapy sessions, education and self-exercise. A physical therapist—and, if needed, occupational therapist—will visit you in your home to prescribe an activity and exercise program specific to you and provide treatment that will help you progress through your program. Your clinicians will also educate you about your condition and changing needs.

Most often, visits are made frequently for the first two weeks with a decreased frequency the third week. The services you receive will be specific to your surgery, your needs and goals, and your surgeon's orders, so the frequency and overall number of your visits may vary.

For you to progress successfully through your rehabilitation, it is vital that you commit to a treatment schedule with your rehabilitation team. Your participation is essential to successful rehabilitation.

Home exercise program

Your rehabilitation team will teach you exercises that are critical to your recovery. They will include strengthening your muscles, increasing the range through which your joints and muscles can move, and increasing your ability to move safely and tolerate activities. Specific activities and exercises will be reviewed and progressed as your condition and ability improves. You will be expected to regularly perform your activity/home exercise program (HEP) as prescribed.



Your outcome

Within six weeks of your surgery, you should be able to resume normal light activities. To speed your recovery and protect future function, follow your recommended activity, care and exercise program.

As your rehabilitation and recovery progresses, you may feel ready to resume many of the activities that you participated in before surgery. Your surgeon and therapist will provide you with information that is specific to you and your particular condition, and will guide you in determining when it is appropriate to resume your previous activities.

The exercise and treatment program you will be completing with your rehabilitation team is very important to your recovery.

It is equally important that you are as active as possible within the limits of any precautions or restrictions and that you continue your exercises even after you complete your home health treatment. Your surgeon may prescribe continued therapy in an outpatient environment once you are discharged from home health.

The healing and recovery process will continue long after therapy ends. You will become stronger and more capable if you stay active and do your exercises routinely.



Do's and don'ts

Healing from a joint replacement takes time. During your recovery, it is important that you move your body correctly. Your recovery and success are dependent upon remembering the following do's and don'ts.

Do:

- DO remember to balance periods of exercise with periods of rest.
- DO change positions and move about frequently.
- DO always use a walker or crutches, as prescribed by your surgeon, for walking or moving from one place to another.
- Do observe weight-bearing precautions as instructed by the physical therapist.
- DO avoid bending and stretching by keeping frequently used objects at a level between your shoulders and thighs, or by using a reaching device.
- DO wear low-heeled, non-skid shoes any time you are on your feet.
- DO wear your support stockings, if instructed by your surgeon.
- DO elevate your legs above the level of your heart if your legs swell.
- DO take all of your medicines exactly as ordered by your surgeon.

Don't:

- DO NOT cross your legs or ankles.
- DO NOT stand in one place for more than five to 10 minutes at a time.
- DO NOT sit on low or soft chairs or beds.
- DO NOT use a whirlpool, hot tub, swimming pool, exercise bike or bicycle until instructed by your physical therapist or surgeon.
- DO NOT drive a car until your surgeon gives approval to do so.
- DO NOT take chances. Ask for help when you need it.



When to call your surgeon, 911 or your home health provider

Since we do not provide emergency care, if you experience any of the following, **please call 911 or go to the nearest emergency room:**

- Severe chest pain
- Difficulty breathing
- Excessive bleeding
- Excessive pain
- A fall or inability to get up

Tell ER personnel

Your surgeon's name:

Surgeon's phone number:

Your home health provider:

Although you probably will not experience any unusual problems or complications after you return home from your surgery, it is important to be aware of signs that warrant a call to your home health provider or surgeon.

Call us first if:

- You have pain that is not relieved by your pain medicine
- You develop increased swelling
- You develop a fever
- Your incision begins to drain fluid
- You have increased redness and/or puffiness around your incision

We may be able to address your concerns within the orders we have already obtained from your surgeon. If not, we will reassess your condition and contact your surgeon for further orders.

You can rest assured with us

Patients' lives are centered around their homes, where they can feel most comfortable and safe. That's why we are dedicated to our patients' recovery and return to a fulfilling life. Every year, CenterWell Home Health™ serves more than 350,000 patients across the country— helping them recover and rehabilitate with confidence so they can remain independent and achieve better health.

We know that we have to earn your trust every time we enter your home. Because our patients' safety and security are very important to us, we put our clinicians through a stringent and thorough employment screening process to ensure the quality of our home health team.

You can be sure of our dedication to clinical excellence and commitment to your well-being. We bring great healthcare home to you.



**For more information,
speak with one of our nurses 24/7 by calling**

833-453-1108

CenterWellHomeHealth.com

Home health services are available for all eligible patients with a healthcare provider referral. CenterWell™ does not discriminate on the basis of race, color, national origin, age, disability or sex. ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al **877-320-2188 (TTY: 711)**. 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 **877-320-2188 (TTY: 711)**.

1900848-V