

# Patient Guide

## Shoulder Replacement



ORTHOPAEDIC INSTITUTE

**Our Mission** | To serve through healing, education and discovery

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# Welcome

Thank you for choosing us to take care of you during your Joint Replacement Journey. Preparing for surgery can be overwhelming. Everyone is different. Your care team will create a recovery program just for you.

We are now offering different locations to have your surgery.

- Main Operating Room at UT Medical Center
- UT Day Surgery at UT Medical Center
- Our new orthopaedic surgery center, University Orthopaedic Surgery Center, in the Orthopaedic Institute located at UT Research Park at Cherokee Farm.

Your care team will determine which location is best for you to have your surgery.

This booklet is based on research that helps you recover better and faster after surgery. So, if you had surgery before, some information may be new or different.

We want you, your family, and friends to understand what to expect so everyone can help you have a safe recovery.

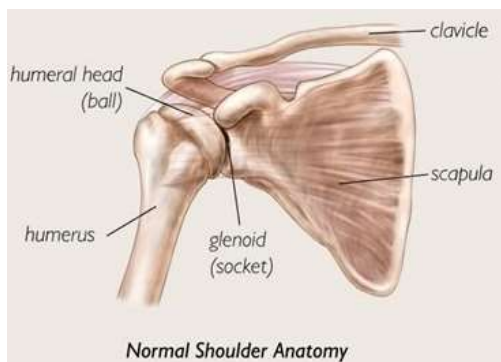
## **This booklet will help you:**

- Get ready for surgery
- Find out what to expect
- Plan for recovery

Near the end of the booklet there are checklists to help you and your family keep up with important steps.

You may call our office at 865-305-8848 for procedures at UT Medical Center or 865-963-4036 for procedures at University Orthopaedic Surgery Center (UOSC) if you have questions prior to arrival.

# Your Shoulder Joint



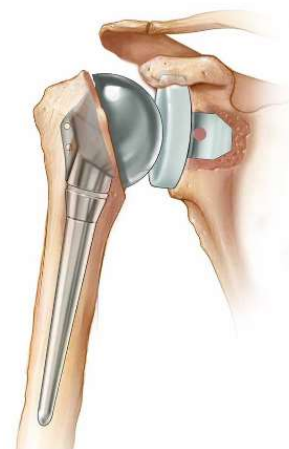
The shoulder is a large ball and socket joint. It is made up of bones, tendons, muscles, and ligaments, which hold the shoulder in place but also allow movement. Bones of the shoulder joint include: the clavicle (collar bone), scapula (shoulder blade), and humerus (arm bone).

The primary indication for a Total Shoulder Replacement is pain which will not respond to non-operative treatment. The primary goal of Total Shoulder Replacement surgery is to alleviate pain with secondary goals of improving motion, strength, and function.

## Total Shoulder Replacement

In a total shoulder replacement, a metal ball is used to replace the humeral head while a polyethylene cup becomes the replacement of the glenoid socket.

Total shoulder arthroplasty



## Reverse Total Shoulder Replacement

Reverse shoulder arthroplasty



The reverse total shoulder prosthesis is designed with a socket where the ball (head of the humerus) is normally located and a ball where the socket (glenoid) is usually located. This configuration adds stability so that the deltoid muscle can power the shoulder.

# Appointments

There are appointments before and after surgery that are necessary for a safe surgery and healthy recovery. Below are common appointments. Be sure to reference your appointments given to you when you registered for surgery.

## Pre-Anesthesia Testing (PAT)- UT Medical Center

First, you will need to check in at the Main Patient Registration (see map on page 34). After getting your patient arm band, you will go to Pre-Anesthesia Testing located in building A, Suite 140.

Pre-Anesthesia Testing (PAT) is a medical evaluation process provided by UT Medical Center to assess patients before they undergo anesthesia for surgery. If you cannot attend this testing, please call 865-305-9641.

**Please arrive 15 minutes before your appointment. You may eat and drink fluids prior to having testing done.**

## Pre-Anesthesia Testing (PAT)- University Orthopaedic Surgery Center

The Surgery Scheduler at the surgeon's office will coordinate with your Primary Care Doctor or utilize the Pre-anesthesia Testing Department at UT Medical Center to arrange for your pre-admission testing. Please notify the scheduler if you are see a Cardiologist or Pulmonologist, as you may need additional clearance for surgery.

## Total Shoulder Replacement Class Video

This video will cover important information to help you prepare for your surgery. If you have issues viewing the class video or have general questions, please call 865-305-8848.

## Surgeon Post-Op Appointment:

You will have a follow up appointment with your surgeon about 2 weeks after your surgery. This appointment will be set up for you when you schedule your surgery. If you need to reschedule this appointment, please call 865-546-2663.

## Outpatient Physical Therapy:

You will require outpatient physical therapy after surgery. If this is not set up for you, you will need to call the office at 865-546-2663.

## Getting Ready for Surgery

The following section will help you and your caregiver plan and prepare for your upcoming surgery.

### Pre-Anesthesia Testing

Bring the following items with you:

- Your insurance cards
- A list of any prescription medications
- A list of any over-the-counter medications you take regularly (like aspirin, Tylenol®, and allergy medication like Benadryl®, eye drops, etc.)
- Name and phone number of your primary care doctor
- Any other important medical information, like allergies to medications, foods, or any kind of metal (like nickel).
- Your Total Joint Replacement Guidebook.

If you take a blood thinner like warfarin (Coumadin®), clopidogrel (Plavix®), apixaban (Eliquis), rivaroxaban (Xarelto) or aspirin, find out if you should stop taking it in the days or weeks before surgery. These medications can cause bleeding during surgery.



If you have problems writing or typing your medication list, you can use a smartphone to take a picture of any medications you take.

You can also ask your pharmacist to print out a list of your prescription medications.

## Dental Checkup

Make sure your mouth is healthy. Significant dental conditions need to be resolved before surgery. Infections in your mouth can travel to your new joint replacement and create an infection there as well. Please let your surgeon know if you have had any recent infections in your mouth, especially your teeth.

**Be sure to see your dentist well before the day of your joint replacement surgery.**

You may need an antibiotic:

- Before going to the dentist
- Before procedures that look at your bladder or colon
- Before surgeries that may let bacteria into your bloodstream, such as lower urinary tract or bowel surgeries
- If you have a bacterial infection on your skin

**Before joint replacement surgery:**

- Patients should avoid all dental work 3 days before their scheduled surgery - this includes cleanings, fillings, and crowns.
- Please discuss any major dental work such as root canals, extractions, and other procedures with your orthopedic surgeon if the need for dental work has been identified. Waiting for some time after your dental procedure to have your joint replacement surgery may be appropriate.

## Losing Weight

If you are overweight, losing **any** weight (even a few pounds) will help you recover better. This takes stress off your new joint and helps it last longer. If ankle or foot pain is the main thing that's kept you from being active, after recovery from surgery it should be easier to be active and lose weight as well.

## Stop Smoking

Smoking, vaping (e-cigarettes), or chewing tobacco can cause serious problems with healing after Joint Replacement Surgery.

Your bones need good blood supply to heal well. Nicotine limits blood flow and makes it hard for your body to heal after surgery. Studies show that people who use nicotine in the weeks before surgery are more likely to have problems with their heart, lungs, or surgical wounds during or after surgery. And they need to stay in the hospital longer.



Talk to your doctor about ways to stop using nicotine.

Your doctor may tell you to stop using any kind of tobacco or nicotine at least 4 to 6 weeks before surgery.

Others should NOT smoke around you in the weeks before surgery.

## Who Speaks for You?

Your doctor and family need to know who speaks for you if a decision needs to be made about your care during or after surgery and you are unable to speak for yourself.

The person who speaks for you needs to know what treatments (like CPR) you would or would NOT want. It is best to create an advance directive (living will) to document what you would want or not want. It is a good idea for everyone to have a Living Will and to talk with their family about it. You can change your Living Will at any time.



If you have an advance directive (Living Will), bring a copy to the hospital with you on the day of surgery.

If you don't have one, we can help you make one.



Find the advance directive forms of your State on the Internet here:

<http://bit.ly/StateForm>

## Pick Your Coach

Choose one friend or family member who can be part of your care team to help make decisions and manage your care before, during, and after surgery.

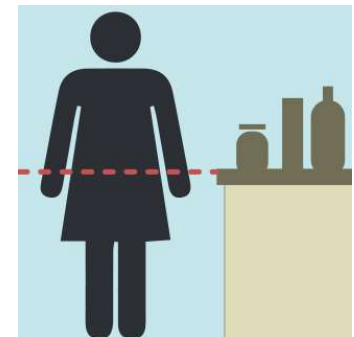
If you take care of anyone (like children or an older parent), you will need help caring for them. If you don't have people nearby who can help you in the first week at home, talk with your nurse navigator. **It's a good idea to have someone stay with you for the first 3 days after surgery.**

## Set Up Your Home

Before you go to the hospital, set up your home to make it safe for your recovery after surgery.

## Move Items and Pick a Space

Store frequently used items such as cleaning supplies, and canned foods, in easy-to-reach cabinets. Avoid very high or very low shelves as these may require you to reach or pull. Remember to do this in the kitchen and the bathroom!



Pick a safe area in your home that you will be recovering after surgery. Have items that you may need close by.

## Eating Healthy

It may be hard to shop after surgery so buy food ahead of time that's easy to make.

Protein can help your body heal. a good idea to eat foods high in protein like eggs, chicken, nuts, beans, and dark leafy greens.



## Other Helpful Tips:

### TIP

- Put a nightlight in the bathroom and hallways so you don't fall.
- Move any throw rugs so you don't trip on them.
- Purchase a laxative or stool softeners to use after surgery. This will help prevent constipation.
- Use ice packs to your operated shoulder.
- Have a phone within easy reach with emergency numbers handy.

## 1 Week Before Surgery

Please call the following numbers if you have not:

- Viewed the Total Shoulder Replacement Class video
- Had an appointment with Pre-Anesthesia Testing
- Received the Benzoyl Peroxide Cream

**Surgery at UT Medical Center:** Please call your Orthopaedic Nurse Navigator at **865-305-8848**.

**Surgery at University Orthopaedic Surgeons (UOSC):** Pre-Admission Nurses at **865-963-4036**.

If you are feeling sick, have a toothache, or have any issues that have changed since your PAT appointment, call your **surgeon's office at 865-546-2663**.

If you need to cancel your surgery for ANY reason, please call your surgeon's office 865-546-2663.

Stop any medications that you were told to stop taking before surgery.

Arrange transportation. You will need someone to drive you to the hospital and pick you up the day you go home. You will need someone to drive you to your post-op appointments until your surgeon clears you to drive.

## Two Days Before Surgery

Two days before your surgery, you will need to use your Benzoyl Peroxide Cream once in the morning and once in the afternoon.

Studies show that applying this cream to the shoulder area greatly reduces the number of bacteria on your skin that could lead to a surgical site infection.

## How to Use the Benzoyl Peroxide Cream

- You will be given your cream from your surgeon's office.
- You will begin using the cream two days before surgery twice a day. You will also need to use the cream the morning of surgery.
- Apply half dollar size amount of Benzoyl Peroxide Cream to the entire operative shoulder and armpit area after bathing.

Seek immediate medical attention if you develop wheezing or difficulty breathing, swelling of the face, hives, or severe rash after using this cream.

If you have ever had an allergic reaction to benzoyl peroxide DO NOT USE this cream. Instead use antibacterial soap.

NOTE- You may have some skin irritation or develop a mild rash after using the product (especially in the armpit). This can be a normal reaction. Please continue to use the cream. If you have questions or concerns call your surgeon's office.

## The Day Before Surgery

- Use the Benzoyl Peroxide Cream once in the morning and once in the afternoon.
- Put clean sheets on your bed.
- Remove any fingernail or toenail polish.
- Pack your bags. Considering bringing clothing such as:
  - Pullover or button up shirts
  - Elastic waist pants
  - Camisoles that have built-in bra

## The Night Before Surgery

- Remove any fingernail or toenail polish.
- **Do not** eat or drink anything after midnight. This includes anything that increases saliva production such as smoking, chewing tobacco, eating mints, candy, gum, etc. This is for your safety during surgery.



## The Day of Surgery

- Shower and use the Benzoyl Peroxide Cream before coming to the hospital.
- Only small sips of water if you have morning medications that you need to take.

**TIP**

**Do not eat or drink anything the day of surgery. If you do, your surgery will be canceled.**

## Medications

Remember to find out what medications you should and should **not** take the morning of surgery.

If your surgical team tells you to take any pills, take them with a small sip of water.

Leave your medications at home. We will give you any medications you need while you are in the hospital.

## Your Belongings

You will most likely be leaving the day of surgery, therefore you should not need to bring much with you to the hospital. Leave your valuables at home or give them to a friend or family member for safekeeping. **Please bring the following with you to the hospital.**

- Your health insurance cards
- A photo ID, like a driver's license
- A list or photos of your medications, including how much you take and how often you take them
- A way to pay your deductible or copay
- A copy of your advance directive (Living Will) if you have one
- If your plan is to stay overnight in the medical center, bring your CPAP machine with settings if you use one for sleep apnea.

What to Wear	What not to Wear
If you wear glasses or use a hearing aid, be sure to wear them.	<b>Do not</b> wear any jewelry, including wedding rings, earrings, or body piercings.
Wear loose, comfortable clothes, like sweatpants.	<b>Do not</b> bring flip-flops or slippers. It's better to have a shoe with a back that's more secure, so you don't fall.
Bring shoes that have a closed back and closed toe, like sneakers or tennis shoes.	Contact lenses cannot be worn during surgery.

# Arrival on Day of Surgery

## Surgery at UT Medical Center Main OR

- Everyone entering the hospital must wear a cloth facial covering or mask.
- Park in Garage H if your surgery is in the Main OR. Arrive at the hospital at the time you were told to arrive.
- Go through the fountain circle main entrance to the Main Registration/Admitting Office on the 1st floor of the hospital in the Heart Hospital Lobby. You will be registered for surgery, go over forms, and receive ID bracelets.
- You will then be directed to the surgery waiting room on 2 North. Your family can go with you to the surgery waiting room area.

## Surgery at UT Medical Center UT Day Surgery

- Everyone entering the hospital must wear a cloth facial covering or mask.
- Arrive at the hospital at the time you were told to arrive. Park in Garage G. Try to park on the east end of the G Garage, then come up the elevators to the 1<sup>st</sup> floor.
- UT Day Surgery lobby is right off the elevator. You will be registered for surgery, go over forms, and receive ID bracelets.
- You will then be directed to the surgery waiting room. Your family can go with you to the surgery waiting room area.

## Surgery at University Orthopaedic Surgery Center (UOSC)

- Everyone entering the surgery center must wear a cloth facial covering or mask.
- Parking the upper parking lot, designated for patient parking.
- Come through the front doors, straight ahead is the main entrance to the surgery center. Please check in with the front desk receptionist.

- You must have an adult over the age of 18 to remain with you until you are discharged. **Your surgery will be cancelled if your driver does not remain at facility.**
- You will be registered for surgery, go over forms, and receive ID bracelets.
- Your family can stay with you in the lobby until you are called back for surgery.

We will do our best to keep things on schedule. Sometimes there are delays and you may have to wait. Bring a book or something to do just in case.

## What to Expect for Surgery

### Pre-Op (Before Surgery)

- A nurse will come for you in the surgery waiting room and take you back to prepare you for surgery. **Usually, family is not allowed back in the pre-op area.** It will be 5-7 hours before you will see your family again.
- In the pre-op area, a small tube (an IV) will be placed in your arm for fluids and medications.
- You will meet your anesthesiologist to begin the anesthesia process.
- Your surgeon and/or mid-level provider will see you before surgery and will mark the location and body part where the surgery will be performed.

### The OR (Operating Room)

- Your surgical nurse will take you from the Pre-Op Area to the Operating Room for your surgery.
- Your surgery will take between 1.5 or 2 hours.
- During surgery, your family will be updated on your status.

## The Recovery Room

- Most people are in the recovery room for about 2-3 hours.
- Once you're awake, you may get something to drink.
- The surgeon will meet your family member in the waiting room and talk with them after your surgery.

## If You Are Going Home Same Day of Surgery

### Surgery at UT Medical Center Main OR

- After the recovery room, you will go to Phase 3 Recovery.
- Your nurse will go over discharge instructions with you and your coach that came with you to surgery.
- The nurse will give your prescriptions to your coach, and your coach can fill them in the outpatient pharmacy on the main floor of the hospital before leaving.
- Most patients stay in Phase 3 Recovery for a few hours and then discharge home.

### Surgery at UT Medical Center UT Day Surgery

- After you wake up and pain is under control, your coach will be brought back to recovery.
- Your nurse will go over discharge instructions with you and your coach that came with you to surgery.
- The nurse will give your prescriptions to your coach, and your coach can fill them in the outpatient pharmacy on the main floor of the hospital before leaving.
- Most patients stay in Recovery for a few hours and then discharge home.



## Surgery at University Orthopaedic Surgery Center (UOSC)

- If your surgery at UOSC, after you recover in the Recovery Room, your coach can join you.
- The nurse will go over discharge instructions and give information about your prescriptions to your coach.

## Overnight Stay at UT Medical Center

### If You Stay Overnight in the Hospital After Surgery

- You will be taken to a hospital room where a family member can be with you.
- Your nurse and nurse technician will get you settled in your room.
- Usually, a family member or friend can stay with you in the room overnight and sleep in a reclining chair.



- You will still have a small tube (IV) in your arm for fluids.
- To help prevent blood clots, you may have compression sleeves on your legs. These inflate like balloons to keep blood moving.

### Recovery in the Hospital

#### Medications you will receive in the hospital

- You will get your regular medications, but the timing of your medication schedule may be different from your schedule at home.
- To help prevent blood clots, you will get a blood thinning medication as a shot or a pill.
- Some of your regular diabetes, blood pressure, and blood thinner medications may be stopped while you're in the hospital.

## Preventing Falls

Your safety is our highest priority. One of the biggest safety risks of joint replacement is falling.

**Do not get up alone. Always ask for help.**



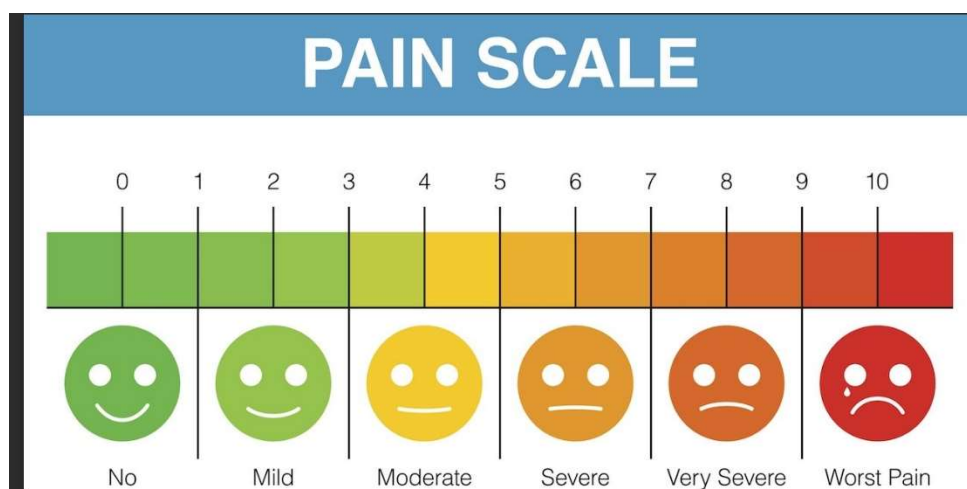
- Always use your call light whenever you need to move, get out of bed, or go to the bathroom.

**“Call. Don’t Fall!”**

## Pain Relief After Surgery

To guide your pain relief, we will regularly ask you about your pain. You will still have some pain, but we want to make sure your pain isn’t too bad. We want you to be able to take deep breaths, cough, move, and walk.

Tell us if the medications help your pain. Let us know if the medications make you feel bad in any way. Talking with your healthcare team will help us manage your pain.



### To help manage your pain:

- You may get opioid pain medications as needed
- You may get medication like acetaminophen (Tylenol)
- You may get cold packs

## Opioid Pain Medication

Opioids [OH-pee-oids] are strong pain medications. You may have heard of drugs like morphine, oxycodone (Oxycontin®), Vicodin®, Norco®, and Dilaudid®. This kind of medication is used only if you need it because:

- It can make people feel sick to their stomach
- It can slow down your recovery
- **It can be addictive**
- It can make it difficult or painful to have a bowel movement or poop (constipation)

Problems like constipation can be painful and serious. So, we will give you other pain medications when possible.

**Let us know if anyone in your family has an addiction.** This way we can make sure we put together the best plan for you.

## Activity after Surgery

- We will help you use the bathroom or a commode.
- To prevent blood clots, we will show you how to keep blood moving in your legs. While you are in bed it is good to move your feet and squeeze the muscles in your legs.

## Deep Breathing After Surgery

To prevent lung infections (like pneumonia), we will show you how to take deep breaths every hour and how to use your breathing device (incentive spirometer pictured to the left).



## The Day After Surgery (if you stayed overnight in the hospital)

You will meet with a case manager or discharge planner to ensure that you have a safe place to go after surgery.

### You may be ready to go home if:

- You can urinate (pee)
- You can eat
- Your blood pressure is okay
- You can do your occupational therapy exercises on your own
- You do not need IV pain medications to control your pain

# Leaving the Hospital (Discharge)

## Total Joint Replacement Discharge Class Video

You and your coach will watch the Total Joint Replacement Discharge Class video from the comfort of your room. This information will also be printed out for you to take home.

### Information reviewed in the Discharge Class Video:

- Activities after surgery
- Hygiene/Incision Care
- Preventing infections after surgery
- Medication management
- Constipation management
- Healthy eating
- When to call your surgeon

## Transportation (Your Ride Home)

- If you must stay overnight in the hospital, make sure someone can take you home. Have your ride come to the hospital at 10:30am the morning after surgery.
- You will **not be allowed** to go home alone or take a taxi by yourself.
- If you need to go to a rehab center, you may need to wait for an open bed or for insurance to approve it.
- We will help you go home as soon as possible, but sometimes there are delays.

## Discharge Instructions

Your nurse will give you the following information:

- Information about your surgery and physical therapy exercises
- Directions for how and when to take medications, like blood thinners
- Prescriptions for any medications you need at home
- Prescriptions can be filled at the hospital outpatient pharmacy.

If you start to run low on any of your medications, call your surgeon's office a few days before you will run out. Your surgeon requires 48 hours (2 Day) notice for all refills.

## Follow-Up Appointment

You will have a follow-up appointment about 2 weeks after surgery with your Surgeon or your Surgeon's Advanced Practice Provider. This should be noted on your appointment sheet in the front of this Guidebook.

## Recovery at Home for All Patients

### Sling Use After Surgery

You will be sent home with your arm in a sling. You are to wear the sling until instructed by your surgeon to remove. Please see below to learn how to put the sling on and how to have a family member assist you in putting the sling on.

#### The Parts of The Sling Include:

- Cushion (or Pillow)
- Wrist strap
- Thumb loop
- Shoulder strap
- Waist strap

### Putting the Sling on by Yourself

**Step 1:** Place your sling on a high table/counter in front of a mirror. Use your opposite arm to gently lift your elbow and position it snug into the back of the sling. Position the cushion next to your hip. Button the top of your sling.

\*Females should make sure the cushion (pillow) is below the breast, so the arm is held close to the body.



**Step 2:** To prevent your hand from sliding out of the sling, place your thumb comfortably inside the black thumb loop. (The thumb can be taken out of the black loop during seated tasks or while resting).

With your arm supported on the table, thread the wrist strap through the metal loop nearest the outside portion of the sling.



**Step 3:** Leaving the shoulder strap connected, lift the strap over your head and across your chest. The padded portion of the strap should sit on the opposite shoulder.

The shoulder strap should fit snug and may be loosened for comfort while sitting.



**Step 4:** Standing away from the table, secure the waist strap snug around your waist.

Your arm should be in a neutral position on the side of your body.



\*Simply reverse steps to take your sling off.

## How Someone Can Help You Put Sling On

**Step 1:** Using your non-operated hand, lift your surgery arm. Have a family member/friend place the sling with your elbow snug into the back of the sling. Rest the cushion on your hip and close to your body. Button the top of your sling.



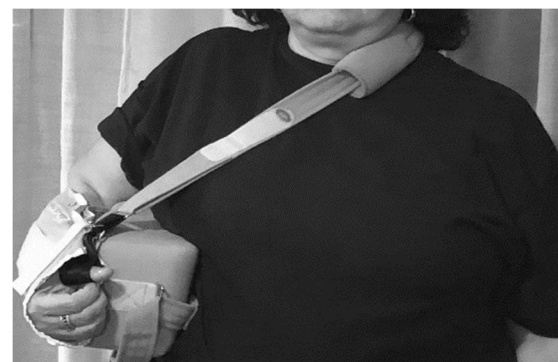
\*Females should make sure the cushion (pillow) is below the breast, so the arm is held close to the body.

**Step 2:** To prevent your hand from sliding out of the sling, place your thumb comfortably inside the black thumb loop. (The thumb can be taken out of the black loop during seated tasks or while resting).



Thread the wrist strap through the metal loop nearest the outside portion of the sling to secure the arm in place.

**Step 3:** Secure the shoulder strap around the neck, avoiding any twists in the strap. Place the padded portion of the strap over the opposite shoulder. Thread the strap through the metal ring closest to you.



When standing or walking, the shoulder strap should fit snug across your chest to hold your operated arm up. The shoulder strap may be loosened for comfort while sitting with a pillow supporting the elbow underneath.



**Step 4:** Secure the waist strap snug around the waist and thread it through the metal loop on the front of the cushion. Your arm should be in a neutral position parallel to your body, and not held at an angle.



\*Simply reverse steps to take your sling off.

## Taking Care of Your Surgical Bandage

- You will have a surgical bandage covering the incision.
- The bandage should absorb the blood and fluid draining from the surgical wound.
- Follow your surgeon's instructions on taking care of the bandage and when you can take a shower.
- **Do not** soak in the bathtub, swim, or sit in a hot tub until your surgeon says it is okay.

If you have any surgical staples, these will be removed in a couple of weeks when you see your surgeon for your follow-up visit.

## When to Call for Help



### Bandage or Incision Issues

- If your bandage is soaked with blood
- If any blood or fluid starts to leak from your bandage
- If the skin around your wound has become red and the red area is getting larger
- If any fluid coming from your bandage smells bad

## Call Right Away

- If you have a fever of 102 degrees Fahrenheit or higher
- If your wound is red and more painful
- If fluid or pus is coming from your wound
- If you feel sick to your stomach or you are throwing up
- If your pain is worse and the pain medication does not help.
- If you have pain or swelling in your foot, ankle, thigh, or calf (back of your lower leg)
- If it is painful or hard to urinate (pee)
- If you have chills and you are shivering
- If you have pain in your belly (may be constipation)
- Call early if you think something is wrong. Do not wait!

### Call 911 or go to the Emergency Department

- If you have chest pain
- If you have trouble breathing

## Sleeping

Good sleep will help you heal and gives you the energy you need for physical therapy. Sometimes pain and even pain medication can make it hard to sleep well. Below are tips on how to get better sleep while recovering from your joint replacement surgery.

### Avoid alcohol

- Even though alcohol can make you feel sleepy, you are more likely to wake up and have trouble sleeping.
- Do not drink alcohol while you are still taking pain medication. It is not safe.

### Avoid caffeine, it will keep you awake

- Only drink a little coffee, tea, or soda during the day.
- Do not drink coffee, tea, or soda in the evening or at night.

### Use cold packs to help with your pain

- Ask the nursing and physical therapy staff to show you how to use ice or cold packs.

#### TIP

If you have tried the above and are still unable to sleep, try the following:  
Take ½ to 1 Benadryl tablet at night to help you sleep.

## Shoulder Replacement Sleeping Positions

It is best to sleep on your back with your upper body supported by pillows. Some patients choose to sleep in a recliner the first few nights.

- Be sure to always **wear your sling while sleeping**.
- Use a pillow for support under your surgical arm and behind it. This will help support your arm while you sleep and help with blood flow and healing.



#### TIP

For the first 3 months, it is best to sit in chairs with arms, so you can lift yourself out of the chair with your non-surgical arm.

## Eat Healthy

### Your body will heal better and faster if you eat healthy.

Sometimes people do not feel like eating after surgery. In the days after surgery some foods may taste different and certain smells may make you feel sick to your stomach. If this happens, eat a lot of small meals throughout the day. Over time, you will be able to eat more.

## No Smoking or Vaping

Do not smoke, vape (use e-cigarettes), or chew tobacco for at least 4 weeks after surgery. These products limit blood flow and make it hard for your body to heal well. They also make it hard to sleep well.

## Your Mood

Joint replacement surgery usually gives people more movement and freedom. But keep in mind, your body has been through a lot. And it may take a while before you feel like yourself again. You may feel sad or upset. These feelings usually go away as you heal. **Call friends and family to talk.**

If you feel very sad, overwhelmed, or helpless, and these feelings do not go away for many days or weeks, please let us know so we can make sure you recover well.

## Driving

**Do not drive until your surgeon says it is okay.**

- Do not drive while taking pain medication
- It may take longer before you can drive a stick shift.

## Returning to Work

Returning to work is very “individual” and often depends on the type of work you do. Talk with your surgeon at your first follow up appointment.

- If your job involves heavy, physical work, like lifting, talk to your surgeon.
- Ask your employer if there are any rules about when you can return.
- If you need a return-to-work form or disability papers, get them to us as soon as possible or fax them to our office (see phone and fax numbers at the end of this booklet)
- The sooner you bring your forms the sooner the office staff can get them filled out.

## Travel and Metal Detectors

When going through security at the airport or at a building with a metal detector, let them know you have a shoulder replacement before you go through it. It is not a problem — and they may just use a wand to scan your shoulder.

## Activities

Your doctor will let you know when you are ready to increase your activity. Physical Therapy will give you exercises and more clarity on any restrictions in your movement.

### If you feel tired or worn out:

- Take afternoon naps.
- Set small goals and try to do a little more each day.

Ask your surgeon when you can do other low-impact activities (like swimming, biking, or golfing) in the months after surgery.



**If you have questions or concerns, ask** your surgeon or physical therapist. It is important to feel safe and get your questions answered.

## Dental Procedures after Joint Replacement

- Avoid all dental work for 3 months. Contact your surgeon if you urgently need dental work during this 3-month period to discuss antibiotics.
- After 3 months, all dental work is allowed.
- We recommend that before any dental work, preventive antibiotics should be given to all patients who have had a joint replacement for a minimum of 2 years after surgery (regardless of the type of dental procedure or patient health status).

# Joint Replacement Information and Phone Numbers

## University Orthopaedic Surgeons (UOS)

Call if you have a question about:

- Medical Concerns
- Medication Refills
- Surgery Cancellations
- Billing and Insurance
- FMLA

Your doctor's office at	Phone
University of Tennessee Medical Center	(865) 546-2663 Fax:865-546-9047
Parkside Plaza – Turkey Creek	(865) 218-9300
Sevierville-UT Medical Center Regional Health Center	865-546-2663

## PAT – Pre-Anesthesia Testing

Call if you have any questions about your medications before surgery or if you need to re-schedule this visit:

PAT- UT Medical Center	Phone
Pre-Anesthesia Testing (PAT) Scheduling	(865) 305-9641
Pre-Admission- University Orthopaedic Surgery Center	Phone
Pre-Admission Nurse	865-963-4036

## Advanced Orthopaedic Center

Call if you have general questions:

Amber Gass, RN	Nurse Navigator	865-305-8848
Keekey McKissick, RN	Orthopaedic Coordinator	865-305-3270
Prescription Refills	Surgeon's Office	865-546-2663

## University Joint Replacement Center 7 East

Call if you have questions related to your stay on the Joint Replacement Unit:

	Phone
Inpatient Unit	(865) 305-9871
Whitney Owen, RN Nurse Manager	(865) 305-6110
Case Manager	(865) 305-9871

## University Orthopaedic Surgery Center (UOSC)

Department	Phone
Main/Front Desk	865-963-4120
Billing Enquiries	865-293-4027
Insurance Enquiries	865-293-4908
Pre-Admission Nurse	865-963-4036
Miranda Smart, RN Clinical Manager for Pre-Op and Recovery	865-963-4032

**TIP**

You may download the “UTMC Way” App to your phone to help find your way around campus.



## Directions for Your Surgery

Parking Garage G & H (\$3)

Hospital Valet Parking (\$5) is available at the Fountain Circle entrance.

Orthopaedic Institute Parking - Free

- A** Parking Garage H
- B** Parking Garage G
- C** Patient Registration
- D** Pre-Anesthesia Testing
- E** Main or 3rd Floor
- F** UT Day Surgery - Bldg. D
- G** Orthopaedic Institute, UOS Clinic & Physical Therapy, University Orthopaedic Surgery Center



Orthopaedic Institute, UOS Clinic & Physical Therapy, University Orthopaedic Surgery Center



# Checklists

Tear out these checklists to put on your refrigerator or to share with a family member who is helping you.

## One Month Before Surgery

- Get a copy of your medical records to bring to your appointments.
- Choose who speaks for you if you cannot speak for yourself. Talk with them about your wishes. And create an advance directive: <http://bit.ly/StateForm>
- Meet with your healthcare team to review your medical history.
- Eat healthy. Protein (chicken, eggs, fish) can help your body heal.
- If you are overweight, losing any weight will take stress off your joint.
- If you smoke, vape, or chew tobacco, work with your doctor to quit in the weeks before surgery.

## A Week Before Surgery

- Make sure you have the Benzoyl Peroxide Cream
- Put things where they are easy to reach (waist or shoulder height)
- Move furniture and rugs out of the way to prevent falling after surgery.
- Buy food and other supplies
- Put nightlights in the hallways so you do not fall
- Find out if you need to stop any medications before surgery
- Do not** shave under your surgical arm.

## Two Days Before Surgery

- Use your Benzoyl Peroxide Cream twice a day

## The Day Before Surgery

- Use your Benzoyl Peroxide Cream twice a day
- Pack clean, comfortable clothes, a bathrobe, and any toiletries, if your plan is to stay overnight in the medical center.
- Pack your photo ID, a list of your medications, your health insurance card, and this booklet
- Pack a copy of your advance directives (living will) if you have one
- Nothing to eat or drink after Midnight the night before your surgery.**

## The Morning of Surgery

- Shower and use the Benzoyl Peroxide Cream
- (If your plan is to stay overnight in the medical center) Bring your belongings and CPAP machine (if you use one for sleep apnea). Remember to write down your CPAP settings and bring it to the hospital with you.
- Take any medications with a sip of water
- Leave your medications at home



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ORTHOPAEDIC INSTITUTE