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Welcome to the Joint Care Center

Aloha,

I would like to personally welcome you to the Joint Care Program at Castle Medical Center. Our Joint care program offers a team approach consisting of extraordinary physicians and associates. Our commitment is to provide quality, safe and compassionate care to you and your family. This comprehensive care extends before and long after your joint replacement surgery.

At Castle Medical Center we offer the highest quality of surgical expertise with state of the art operating room suites and a dedicated surgical team. Outside the surgical suites, our nurses and therapists work with you and your physician to provide comprehensive education and care before your procedure and long after your recovery to wellness.

We at Castle Medical Center are proud to deliver exceptional customer service. This commitment has made us a recipient as a top performer in quality measures and patient satisfaction and excellence in patient care. We are proud of our accomplishments and are committed to providing quality healthcare and are devoted in achieving the best clinical outcomes for our joint care patients.

I would like to thank you for choosing Castle Medical Center - Welcome to our 'Ohana!

Feel free to contact us at 808-263-5220 should you need further information about our services.

A handwritten signature in blue ink that reads "Suzanne Asaro". The signature is fluid and cursive, with the first name "Suzanne" being larger and more prominent than the last name "Asaro".

Suzanne Asaro, MPT, MBA
Director, Joint Care Center
Castle Medical Center

Welcome to the Joint Care Center



Thank you for choosing Castle Medical Center for your total or Makoplasty® partial joint replacement surgery. In addition to providing excellent care, We Promise to:

- Tell you who we are and what we are doing
- Partner with you to plan your care
- Listen and respond to your needs
- Round on you hourly
- Safely control your pain
- Respond to your call button in a timely manner
- Wash our hands and check your ID band for your safety

The Joint Care Center is a collaborative team consisting of Surgeons, Physician Assistants, Nurses, Nursing Assistants, Physical and Occupational Therapists and Case Managers. Ho'okipa is a dedicated surgical patient care unit for Joint Care patients.

Please read all the information provided to you by your orthopedic physician and the hospital. We hope that this information will assist you in your preparation for surgery and your recovery.

Preparing For Surgery

Prior to surgery, your physician will need to complete a history and physical examination, order routine lab tests and may order a chest X-ray, EKG and other special lab tests as needed. These tests must be completed prior to your date of surgery.

Exercise: It is important to practice a couple of exercises at home prior to coming to Castle Medical Center for your Joint Replacement Surgery. These will assist in your recovery for early mobility and to help blood circulation in your legs as well as to strengthen your muscles.

Leg Exercise: Quad Sets

- Lying on your back or sitting with legs straight
- Bend your ankles and push your knees down firmly against the bed
Tighten thigh muscle - relax
- Repeat 10 times



Leg Exercise: Straight Leg Raise

- Lying on your back or seated with one leg straight and the other leg bent
- Exercise your straight leg by pulling the toes up, straightening the knee and lifting the leg off the bed. Hold 5 secs - slowly relax.
- Repeat 10 times



Preparing For Surgery

Leg Exercise: Short Arc Quad

- Put cheat sheet under your foot and hold on to the ends
- Straighten and bend your leg. Keep your thigh still, move only from the knee to the foot
- Repeat 10 times



The purpose of deep breathing exercises is to keep your airways open and to promote good oxygen exchange. It also assists to decrease the chance of developing pulmonary problems after surgery.

Breathing Exercise:

- Inhale slowly and deeply through your nose
- Hold your breath for a second
- Cough deeply using your abdominal muscles

The Joint Care Center Pre-Operative Teaching Class

Our Joint Care Center class gives our Joint Care Team an opportunity to meet with you and assess your pre-operative and post-operative needs. You will be meeting with several of our team members. This time will also give you an opportunity to ask questions and to be more prepared for your joint replacement surgery.

If you have a family member or friend that you would like to attend with you to assist as your coach, we highly recommend you bring this person to the Pre-Operative Class. The role of the coach is to be someone to offer you support and encouragement and be another set of ears to assist you with instructions. Your coach will be able to help you during your recovery with exercises, mobility, getting dressed, applying your compression stockings and using the incentive spirometer after you go home. While you are in the hospital your coach will receive instructions from our nurses and physical and occupational therapists so they can assist you when you go home. Therefore, it would be helpful for them to attend some of your physical and occupational therapy sessions while you are in the hospital.

When you arrive for your Pre-Operative class:

- You will receive a phone call prior to your class instructing you where to report

You will be taken to your Pre-Operative Teaching Class.

Please plan to be here for 1-2 hours.

You are scheduled for your Pre-Operative Teaching Class

on: _____

and Pre-OP visit with Liz

on: _____

Anesthesia

The anesthesiologist will use medication to prevent pain during your surgery. There are two main categories of anesthesia that we use for our Joint Replacement surgery:

- 1. General Anesthesia:** this is given either by an inhaled gas or an injection into your I.V. (intravenous medication). This will cause you to go to sleep and you will not feel anything.
- 2. Regional Anesthesia:** involves numbing a cluster of nerves using a local anesthetic, if only a regional anesthesia is used, you would also be given a mild sedative so you would be sleeping lightly and unaware of the surgery.

Type of regional anesthesia we use:

- **Spinal:** involves injecting local anesthetic medication into the spinal space in the back, causing your lower extremities to be numb for a period of time. You may also receive a long acting narcotic in the spinal which will provide additional pain relief for 12 to 14 hours.

Sometimes the anesthesiologist will use a combination of the above types of anesthesia. Your anesthesiologist will review your medical history and discuss with you what options are the best for you.

Important Information on Blood Thinners & Herbal Supplements

It will be important that you stop taking any herbal supplements two weeks prior to your surgery. The following is a suggested list of herbal supplements to avoid prior to your surgery, but it is not all-inclusive. ***Inform your anesthesiologist if you have been on any blood thinners such as Plavix, Xorelto, Pradaxa, Coumadin, Aspirin, etc. and what day you took your last dose.*** It is also important to discuss with your physician what medications and supplements you are taking.

Ephedra: Ephedra sinica, (Ma-Huang, Ephedrine, Chinese Joint Fir, diet pills)

Possible Side Effects- Can cause irregular heart rates, strokes and heart attacks when taken with cardiac glycosides.

Feverfew: *Taraxacum parthenium* (Feverfew, Featherfew, Midsummer Daisy) Inhibits platelets and can cause excessive bleeding.

Garlic: *Allium sativum* (Clove garlic, Ajo) Enhances warfarin effect

Ginger: *Zingiber officinale* (Black Ginger, African Ginger) Inhibits thromboxane synthetase and causes bleeding.

Ginkgo: *Ginkgo biloba* (Maidenhair tree, Fossil tree) Can lower platelet count causing excessive bleeding

Ginseng: *Panax ginseng* (American Ginseng, Chineseginseng, Korean Ginseng) Can cause fast heart rate and high blood pressure

Goldenseal: *Hydrastis Canadensis* (Orange root, Yellow root, ground raspberry, turmeric root, Eye root) Can cause high blood pressure and edema

Licorice: *Glycyrrhiza glabra* (Licorice root, Sweet root) Can cause high blood pressure and edema

St. John's Wort and Valerian: *Valeriana officinalis* Can prolong the effect and intensity of some narcotics and anesthetic agents

Preventing a Surgical Infection (SSI)

You can reduce the amount of germs on your skin and prevent surgical site infections by carefully washing before surgery and using the antimicrobial wash provided to you.

A Surgical Site Infection (SSI) is an infection that occurs after surgery in the part of the body where the surgery took place. Most patients who have surgery do not develop an infection.

Preventing SSI: How can you help prevent surgical site infections?

Your skin needs to be as free of germs (bacteria) as possible before your surgery or procedure. Thoroughly washing the skin with Chlorhexidine Gluconate 4% (CHG) soap can greatly reduce the number of germs to help us prevent infection. Some patients who are MRSA/MSSA positive may need to use Mupirocin (also known as Bactroban) antibiotic ointment in each nostril as well. CHG and Mupirocin Ointment are medications. For certain procedures, your health care provider will test you and tell you if you are MRSA/MSSA positive. In this case, you will receive special instructions for showering and use of Mupirocin (Bactroban.)

Before your surgery:

*Tell your doctor about other medical problems you may have. Allergies, diabetes, and obesity are some of the health conditions that may affect your surgery and treatment.

*Patients who smoke get more infections. For some surgeries, it is recommended to stop smoking at least four weeks prior to your surgery. Talk to your doctor about how you can quit smoking.

*Do not shave anywhere on your body with a razor for 24 hours before your surgery. Shaving with a razor can irritate your skin and increase infection risk.

Showering Instructions for CHG wash:

Note: Do not use Chlorhexidine Gluconate 4% if you are allergic to it. Please follow the instructions from your healthcare provider.

1. In the shower or tub, wash our body with regular soap and water.
2. Wash your hair with your normal shampoo.
3. Rinse your hair and body thoroughly to remove any soap residue.
4. Turn the water off (this is to avoid rinsing the CHG off too soon).
5. Using a clean wash cloth apply the CHG soap to your entire body only from the neck down. (DO NOT use the CHG soap above the neck, keep away from eyes, ears, and mouth.)
6. Take extra time to gently scrub the area of the body that you are having surgery on.
7. Turn the water back on and rinse your body thoroughly.
8. Use a clean towel to dry off.
9. Do not use any lotions, powders, or oils on your skin after bathing.
10. Rinse your shower/tub after your CHG shower as the surface can be slippery.
11. Place clean sheets on your bed and wear clean night clothes for sleeping.

STOP using the soap and call your doctor if you experience a skin reaction such as severe burning, itching, redness, blistering, peeling, swelling, rash or any other irritation.

Preventing SSI

To Prevent SSIs, the surgical team will:

- Clean their hands and arms up to their elbows with antiseptic agent just before surgery.
- Clean their hands with soap and water or hand sanitizer before and after caring for you and every patient.
- Wear special hair covers, masks, and gloves during surgery to keep the surgery area clean.
- Remove some of your hair before surgery if it is in the same area where the procedure will occur, using an electric clipper.
- Give you antibiotics before your surgery starts. In most cases, you should get antibiotics within 60 minutes before the surgery starts.
- Clean the skin at the site of your surgery with a special soap that kills germs.

The Day of Surgery

Most Important: Please remember you may not eat or drink anything after midnight the day of your surgery. There is one exception, if you are instructed by your physician to take your morning medications; you may do so with a **SIP** of water. Diabetic patients should check with their primary care physicians for instructions on taking your diabetic medication. Otherwise, no solids or liquids which include hard candy and chewing gum. You may brush your teeth and rinse your mouth, but do not swallow the water.

What to Bring with you:

Please bring this Joint Care book

- For Registration: please first register at the admitting area when you enter the hospital. If you have not pre-registered prior to your surgical date bring:
 - Insurance Card
 - Driver's license or photo ID
 - Any co-payments required by your insurance company

- A list of your current medications including the dosage and when you last took them
- A copy of your advance directives and/or your medical power of attorney
- Personal Items: hair comb and brush, tooth brush and tooth paste, make-up, etc.
- Sleepwear and undergarments
- If you use a CPAP machine for sleep apnea, bring your mask with you
We will provide the machine
- Glasses, contacts, hearing aids and the appropriate container to keep them in as needed
- Please bring casual comfortable clothing such as, shorts with elastic waistbands, loosely fitting T-Shirts and muumuu. Keep in mind that your bandage will need to be changed and you will be attending group therapy in our activity room
You will need clothing for two days
- Sturdy shoes (like athletic shoes). We provide nonskid socks that you can also wear
- Bring your walker if you have one
- You may bring your cell phone or lap top, but CMC cannot be responsible for damage or loss (Please ensure that you have a responsible friend or family member to hold these items during your surgery)

What NOT to Bring:

- Do not bring valuables such as jewelry, large sums of money or credit cards
- Leave all medications at home unless instructed by the nurse to bring in a medication that we do not carry
- Personal appliances such as hair dryers, electric razors, radios or TV's

Arriving to Castle Medical Center

The Pre-Op Nurse will tell you what time to arrive to Castle Medical Center. Typically you are asked to arrive one and one half hours prior to your surgery time. Please be aware that we strive to have you in surgery on time; however unforeseen emergencies or prior surgeries taking longer might delay your start time. We will keep you informed of any delays. By the same token, the surgery schedule may change and you could be asked to come in earlier. Your confirmed time of arrival will be given at the pre-operative class. You may park in the parking lot in front of the hospital's main entrance.

Registration

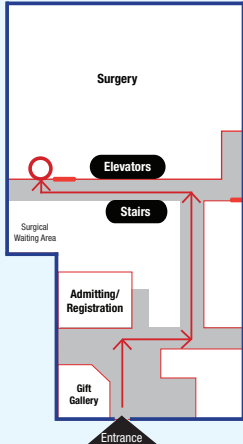
Ambulatory Surgery Facility (Pre-Op)

You will check in and register at the front lobby where you will be given a wrist band with your identification information. You will then come to the Ambulatory Surgical Facility (ASF) where the staff will update your medical history, complete some forms, start your intravenous medication (IV), apply compression stockings, and sequential compression devices (SCD's) to your legs. You will also see your surgeon, anesthesiologist and OR Nurse. Your surgeon will mark the site of your surgery at this time. If you have any questions, please do not hesitate to ask anyone from our surgical team, we are here for you.

Directions to Pre/Post Surgical Care

Step 1

Follow the arrows on the map.



Surgery

Elevators

Stairs

Surgical Waiting Area


Admitting/Registration

Gift Gallery

Entrance

Step 2

Pick up the phone to announce your arrival.



Pre/Post Surgical Care

Step 3

Have a seat in the Surgical Waiting Area.

- Surgical staff will update you periodically with information
- For questions or concerns please use the phone next to the surgery entrance.

Visitors

You may have one or two visitors stay with you in ASF. When you are taken to surgery, they will be directed to wait in our waiting room. Your visitors will be given a number that represents you, they may track your progress by your number on our tracking board to know when you are in surgery and when your surgery is completed and when you are taken to the Post Anesthesia Care Unit (PACU), as well as when you will be transferred to your inpatient room on Ho'okipa. Your surgeon will update your visitors after your surgery is completed.

Your Recovery

You will be taken to PACU where you will be monitored for one to three hours depending on your progress. Here is what you can expect in PACU:

- The nurse will closely monitor your vital signs and your oxygen level: you will have a blood pressure cuff on your arm and a clip on your finger
- You will be receiving oxygen from either a mask or nasal prongs in your nose
- You may have a Foley catheter that drains the urine from your bladder this will be removed in one or two days
- You may have a cold pack to your surgical site that is attached to a large thermos filled with ice water, that will sit on the side of your bed
- You may have a hemovac drain that helps to drain off excess blood from your surgical site
- You will still have an IV drip to help replace your body fluids
- They will x-ray your new joint
- They will be asking what your pain level is so that we can give you pain medicine through your IV to keep it under control. Please let us know if you are having pain, so we can relieve your discomfort
- You may still have the compression stockings and compression devices on your legs. We will put these on your legs when you are in bed until you are up and walking around. These are to help improve your circulation and prevent blood clots. You will feel them inflate and deflate continuously while on
- You will be asked to take slow deep breaths, cough, and will be instructed to use your Incentive Spirometer device to clear your lungs and help to prevent pneumonia

When you are stable, you will be transferred to your inpatient room.

Information on Pain Management

We are committed to doing all we can to keep your postoperative pain under control. The type of anesthesia you received during surgery will have an influence on how your postoperative pain is managed. If you are experiencing any pain, please let us know so that we can meet your pain goal.

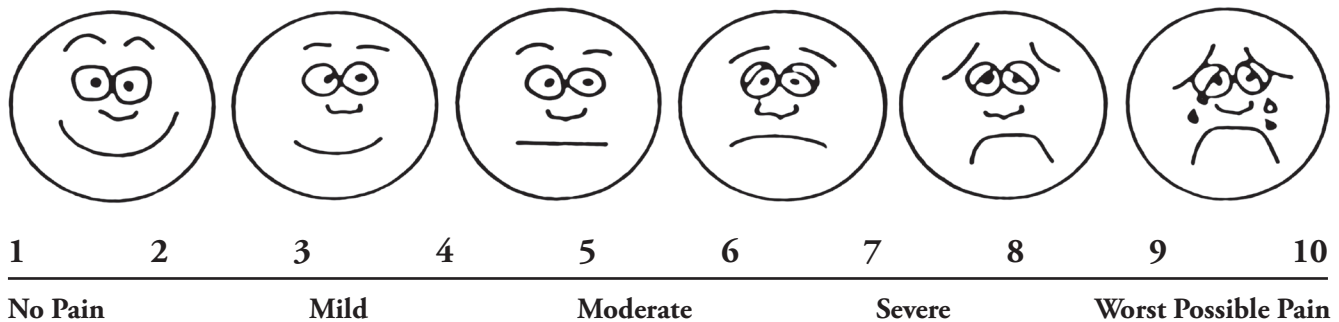
Patient Controlled Analgesia (PCA)

A PCA is connected to your IV, the nurse programs the delivery pump to regulate the amount of medication you receive and the time interval to ensure you do not get too much medication. You will be given a cord with a button on the end so that you can press the button to give yourself a small dose of pain medication. It is important that only you press the button, as it could lead to overdosing if your visitors press it for you.

Neuraxial Analgesia

If you received a spinal anesthetic for the surgical procedure, a long acting pain reliever can be injected at the same time into the spinal space. This is usually used for pain control for total joint surgery.

Pain Rating Scale



We are committed to safely controlling your pain during your hospital stay as well as teaching you how to properly take your pain medication once you have gone home. We strive to achieve optimal pain management not only to keep you comfortable but so you are able to do your physical and occupational therapy safely. Your Physician will order medication to manage your pain while you are in the hospital. Your nurse will be assessing your pain regularly and will discuss with you which medication option will best treat your degree of pain. Your nurse will ask you what pain medication you take at home to assess your opiate tolerance. We ask that you either leave your prescribed medication at home or have a family member take them home, for safety reasons we do not allow medications at the bedside or let patients take their own medications.

Your Postoperative Care

You will be transferred from PACU to your inpatient room on the Ho'okipa unit - in your bed.

Your nurse and certified nursing assistant will:

- Continue to monitor your vital signs and oxygen level
- Will check your circulation and neurological status
- Encourage you to cough, deep breath and use your Incentive Spirometer
- Ask you what your pain level is
- Measure your intake and output
- Apply a cold pack to your surgical area attached to a thermos that sits on the side of your bed
- Monitor your surgical site
- Check your drains
- Will teach you to do ankle pumps and ask you to do 20-30 every hour
- Check on you frequently
- Will start you on clear liquids and advance your diet as tolerated

You will:

- Continue to receive IV fluids
- Continue to receive oxygen
- Continue to have compression devices on your legs
- Continue to be medicated to control your pain
- Need to let your nurse know if your pain is not being kept under control
- Need to let your nurse know if you are nauseated, as often pain medication and/or anesthesia can cause nausea, and your nurse can give you medication to decrease nausea

Your Recovery Continues...

Your surgeon has replaced your joint and our Joint Care Team is here to help you during your recovery phase. It is very important for you to actively participate in your recovery program. Exercise is important towards your recovery.

The Day of Surgery

When you arrive on the Ho'okipa unit from surgery your nurse will complete their initial assessment. A physical therapist will come to your room and get you out of bed if the nurse deems that you are ready for your physical therapy evaluation. If you are not yet ready, then your nurse and/or CNA will get you up to the side of the bed or chair in the evening and your physical therapy will begin the next morning. You will be asked to cough, deep breath, use your incentive spirometer, and perform ankle pumps throughout your stay.

Post-Op Day 1 (day after surgery)

Our goal for today is to control your pain and begin getting you mobile, and to prepare you for discharge on post-op day 2.

If you had Makoplasty® partial joint replacement surgery, knee revision, or total hip replacement surgery, our goal for you today is pain control, evaluating and assisting you with your mobility to determine if you are safe and ready for discharge today!

Lab Tests

- The lab or nursing will draw your blood in the morning around 5 AM so your doctor can assess and treat you in a timely manner

Diet

- You may eat a normal diet
- You will be encouraged to drink plenty of fluids
- Every morning nutritional services will place a menu on your tray
Make your selections and return it to one of our staff members

Assisted Care

- The CNA or RN will assist in getting you set up to bathe and brush your teeth
- You should change into the comfortable loose fitting clothing that you brought with you
- Our CNA will make your bed while you are in physical therapy
- Don't hesitate to ask the staff for assistance as needed

Nursing Care

- The nursing staff will continue to monitor your vital signs
- They will monitor your drains, IV's and operative dressing/site
- If you need additional pain medication please let your nurse know
Also, if there is other medication that you usually take that we aren't giving you, please make your nurse aware and she will call your physician to obtain an order if it can be given
- You may be switched from IV pain medication to oral medication
- Your nurse will medicate you for pain prior to physical therapy
- Your Foley may be removed
(if you had MAKoplasty® partial joint replacement, knee revision, or total hip replacement your Foley will be removed)
- When you are in bed or sitting in a chair you will have the compression devices on your lower legs, and a cold pack on your surgical site
- When you get up, you should have compression stockings on if ordered by your surgeon and non-slip socks

Post-Op Day 1 (day after surgery)

Physical Therapy

- You will be required to use a walker during your hospital stay and when you go home
- The physical therapist will work with you in the morning
- Occupational Therapy will evaluate you in the late morning or early afternoon to assess your activities of daily living including bathing, dressing, grooming and toileting
- The therapists will be getting you out of bed, evaluating your mobility and developing a care plan
- You will walk to the Joint Care Activity Room to enjoy a group luncheon at noon. You may invite your coach/advocate to join you
- In the afternoon, you will attend group therapy in the Joint Care Activity room
- Your coach/advocate is encouraged to attend therapy with you

If you are ready for discharge:

- After your physician writes discharge orders, your nurse will review your discharge instructions with you to be sure you are prepared to go home

Post-Op Day 2 (second day after surgery)

Lab Tests

- The lab or nursing will draw your blood in the morning around 5 AM so your doctor can assess and treat you in a timely manner

Diet

- You may eat a normal diet
- You will be encouraged to drink plenty of fluids
- Each morning nutritional services will place a menu on your tray. Make your selections and return it to one of our staff members

Assisted Care

- The CNA or RN will assist in getting you set up to bathe and brush your teeth
- You should change into the comfortable loose fitting clothing that you brought with you
- Our CNA will make your bed while you are in physical therapy
- Don't hesitate to ask the staff for assistance as needed

Nursing Care

- The nursing staff will continue to monitor your vital signs
- They will monitor your drains, IV's and operative dressing/site
- Your hemovac drain at the surgical site may be removed if you do not have continued bleeding
- Your Foley will be removed
- They will continue to medicate you for pain and dispense other medications as ordered by your physician. If you need additional pain medication please let your nurse know. Also, if there is other medication that you usually take that we aren't giving you, please make your nurse aware and she will call your physician to obtain an order if it can be given
- You may be changed from IV pain medication to oral medication if you weren't on post-op day 1
- Your nurse will medicate you for pain prior to physical therapy
- When you are in bed or sitting in a chair you will have the compression devices on your lower legs, and a cold pack on your surgical site
- When you get up, you should have compression stockings if ordered by your surgeon and non-slip shoes

Post-Op Day 2 (second day after surgery)

Physical Therapy

- You will be required to use a walker or crutches during your hospital stay and when you go home
- You will have individualized therapy in the morning
- Your coach/advocate is encouraged to attend therapy with you
- Occupational Therapy may work with you again dependent on your progress yesterday.
- You are ready for discharge today in the afternoon!
- After your physician writes discharge orders, your nurse will review your discharge instructions with you to be sure you are prepared to go home
- You should arrange for transportation to pick you up

Our goal for today is to control your pain and increase your mobility, and to prepare you for a safe discharge today!

Preparing for Discharge

Equipment

- You will be required to use a walker or crutches when you go home. This is for your safety! For the first few weeks after surgery you may experience moments when you will need a support device for balance
- Additional equipment needs will be determined as you work with your physical and occupational therapist during your stay. Purchase equipment only after you and your therapist know what you will need
- We suggest that you browse around ahead of time so that you know what kind of equipment is available and how much it costs
- You may want to call your insurance company to inquire what they will cover for you

Going Home on Medications

- Your Physician will write prescriptions for the medications that you will need to take at home
- We can send these prescriptions to the Ko'olau Pharmacy along with your medical insurance information. Your coach/advocate can pick up your prescriptions from the pharmacy. You will be asked to pay your co-payment for your medications at the time of pick-up, so ensure that your coach/advocate has your payment
- The Koolau Pharmacy is located in the Weinberg building next door to the main building; enter the Weinberg building through the glass doors, the pharmacy will be directly in front of you. The phone number for the Ko'olau Pharmacy is 263-5060. They are open Monday - Friday from 8:30AM - 5:00 PM. If you prefer to fill your prescriptions at a pharmacy of your choice, we can send your prescriptions to them electronically so that they are ready for pick up when you leave. However, we are not allowed to send Narcotic prescriptions electronically, we will give you a paper prescription for you to take to the pharmacy of your choice to be filled.
- You will be instructed to take Aspirin daily for three to six weeks after your surgery, depending on your surgeon's orders.
(see 'preventing blood clots' below)

Your Dressing

- You can leave your dressing on for seven days. You will be provided instructions regarding your dressing. You may shower with the dressing on. After seven days remove your dressing. Please keep the surgical area clean after removing the dressing.

Preparing for Discharge

Preventing Blood Clots

Blood clots are one of the possible complications that can occur following any surgery including joint surgery. We have taken many precautions during your hospital stay to reduce that risk. Upon discharge you will be instructed to:

- Take one Aspirin daily for three to six weeks, depending on your surgeon's orders. If you are allergic to Aspirin you may be given a blood thinner. Your doctor will provide this prescription
- If your surgeon orders compression stockings (TED Hose) for you, wear them for three weeks these should be removed several times a day and left off for approximately 30 minutes each time)
- Walk
- Continue exercising such as 30 foot pumps every hour and other exercises that your physical therapist will teach you

Signs of leg blood clots

- Pain, heat and tenderness in your calf, back of knee or groin area in either leg
- Swelling in the thigh, calf or ankle that does not decrease with elevation in either leg
- Contact your physician immediately if you suspect a clot or go to the emergency room

Pulmonary Embolus

An unrecognized blood clot that breaks off from the vein and travels to the lung may cause a pulmonary embolus. Signs of a pulmonary embolus include:

- Sudden Chest Pain
- Difficult or rapid breathing
- Shortness of breath
- Sweating

If you have any of these symptoms call 911 immediately.

Preparing for Discharge

Physical Therapy

- You will most likely be instructed to attend outpatient therapy to continue to increase your strength and mobility after your knee replacement. You may need outpatient physical therapy if you've had your hip replaced. Your physician and physical therapist will make this recommendation with your input.
- Castle Medical Center offers outpatient physical therapy at Castle Medical Center or at Castle Professional Center in Kaneohe. Our Castle inpatient and outpatient therapists collaborate closely together for a seamless transition of care.
- You also have the option to attend an outside physical therapy facility of your choice. Please arrange your appointments ahead of time so you do not have a delay starting your outpatient therapy after discharge. The important message is you will need to continue therapy
- Some patients may need Home Care or physical therapists to come to their home. If you qualify for Home Care our Case Manager will assist with setting this up for you.
- On occasion, a patient may need to be discharged to an inpatient skilled nursing facility. Our Case Manager will assist with setting this up for you.

As part of our goal to provide the highest level of care for our joint care patients we continuously assess our program and make improvements. We incorporate best practices to benchmark ourselves nationally and utilize standardized functional assessment outcome surveys. You will be contacted after your surgery to assess your outcome at scheduled intervals. We want to ensure that you are continuing to have the best outcome after surgery. You will be asked the same survey that you completed prior to surgery. Your data is compiled into a confidential database and utilized to make improvements in our Joint Care Center.

Helpful Information

Visiting Hours: Daily visiting hours are from 11AM to 8PM. Family and friends are encouraged to visit during these times. Remember, that you will be participating in Physical therapy two times a day.

Telephone: Telephones are at all patients bedside. For local calls, dial “9” and then dial the phone number. For long distance calls dial “0” and the hospital operator will assist you. You are welcome to bring your cellular phone to the hospital, remember to bring your phone charger. However, we cannot be responsible for loss or damage of your phone/charger.

Approximate Meal times:

Breakfast: 7:30 AM

Lunch: 12:00 PM

Dinner: 5:00 PM

The Bistro:

The Bistro Cafeteria is located on the lower level of the hospital and serves a variety of vegetarian foods. Hours: Monday - Friday 6:30 AM - 6:30 PM,
Weekends 11:00 AM - 6:30 PM

All of us at the Joint Care Center look forward to taking part in your experience. We strive to provide excellent quality compassionate care. If there is anything that we can do for you and your families during your hospital stay, please let us know, we are happy to assist you.

