UNDERSTANDING YOUR JOINT REPLACEMENT
<table>
<thead>
<tr>
<th>Welcome Message</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is a Total Shoulder Replacement?</td>
<td>4</td>
</tr>
<tr>
<td>Understanding Your Shoulder Surgery</td>
<td>5</td>
</tr>
<tr>
<td>Getting Your Medical Visits and Paperwork Done</td>
<td>6</td>
</tr>
<tr>
<td>Get “Pre-Op” Clearance</td>
<td>6</td>
</tr>
<tr>
<td>Go to “Pre-Op” Visits</td>
<td>6</td>
</tr>
<tr>
<td>Take a Total Joint Class</td>
<td>6</td>
</tr>
<tr>
<td>How Surgery Gets Scheduled</td>
<td>6</td>
</tr>
<tr>
<td>What to Do at Home Before Your Surgery</td>
<td>7</td>
</tr>
<tr>
<td>Getting Yourself Ready</td>
<td>7</td>
</tr>
<tr>
<td>How to Clean Your Skin Before Surgery</td>
<td>8</td>
</tr>
<tr>
<td>The Day Before The Surgery</td>
<td>11</td>
</tr>
<tr>
<td>On the Day of Your Surgery</td>
<td>11</td>
</tr>
<tr>
<td>Eating, Drinking and Medicines Before Surgery</td>
<td>11</td>
</tr>
<tr>
<td>Getting to the Hospital</td>
<td>11</td>
</tr>
<tr>
<td>What to Bring to the Hospital</td>
<td>11</td>
</tr>
<tr>
<td>What to do When You Arrive for Surgery</td>
<td>12</td>
</tr>
<tr>
<td>Medications to Avoid Before Surgery</td>
<td>13</td>
</tr>
<tr>
<td>Right After Your Surgery</td>
<td>14</td>
</tr>
<tr>
<td>In the Days After Your Surgery</td>
<td>14</td>
</tr>
<tr>
<td>Equipment to Help You Heal</td>
<td>14</td>
</tr>
<tr>
<td>Handling Pain</td>
<td>14</td>
</tr>
<tr>
<td>Preventing Blood Clots</td>
<td>15</td>
</tr>
<tr>
<td>Managing Blood Loss</td>
<td>15</td>
</tr>
<tr>
<td>Changing Your Bandages or Dressing</td>
<td>15</td>
</tr>
<tr>
<td>Starting to Eat and Drink Again</td>
<td>15</td>
</tr>
<tr>
<td>Eating While in the Hospital</td>
<td>16</td>
</tr>
<tr>
<td>Your Therapy: Physical and Occupational</td>
<td>16</td>
</tr>
<tr>
<td>Your Daily Program in the Hospital</td>
<td>17</td>
</tr>
<tr>
<td>Getting Ready to Leave the Hospital</td>
<td>18</td>
</tr>
<tr>
<td>After You Leave the Hospital</td>
<td>18</td>
</tr>
<tr>
<td>Doctor Visits After Surgery</td>
<td>18</td>
</tr>
<tr>
<td>Your Care After Surgery</td>
<td>19</td>
</tr>
<tr>
<td>When to Call the Surgeon</td>
<td>19</td>
</tr>
<tr>
<td>Eating Well at Home</td>
<td>20</td>
</tr>
<tr>
<td>Your Joint Surgery Checklist</td>
<td>21</td>
</tr>
</tbody>
</table>
Dear Patient, Family and Caregivers:

Thank you for choosing us for your joint surgery. We are excited to work with you and look forward to being your partners during this time. We want to be part of helping you have a quick recovery and a lifetime of good health.

As a partner in this journey, our team is committed to giving you the highest quality of care and support before, during and after your surgery. This book will guide you through the process of getting your new shoulder at Gunnison Valley Health. It covers what you need to know about the surgery, your hospital stay, recovery and getting back to your daily routines.

This guide describes the process most patients go through. But every patient is special. Your experience may be a little different. If you ever feel that something in this booklet disagrees with what you hear from your joint team, please ask about it. We encourage you to take an active role in your treatment. Please ask us any questions you have.

Once again, welcome to Gunnison Valley Health. Thank you for trusting us with your care!

– Your Total Joint Team

GUNNISON VALLEY HEALTH
711 N. TAYLOR STREET
GUNNISON, CO 81230
(970)641-1456
During total shoulder replacement surgery, your damaged shoulder joint is replaced with an artificial joint (called a prosthesis). This surgery almost always reduces joint pain and improves your quality of life.

**Before Your Surgery**
You will most likely arrive at the hospital on the morning of the surgery. Be sure to follow all of your doctor’s instructions to get ready for surgery.

You should stop eating or drinking 10 hours before surgery.

If you take a daily medicine, ask if you should still take it the morning of surgery.

At the hospital, your temperature, pulse, breathing and blood pressure will be checked.

An IV (intravenous) line may be started to give you fluids and medicines needed during surgery.

**During the Surgery**
When the surgical team is ready, we take you to the operating room. There you get anesthesia. The anesthesia either helps you sleep through surgery or makes your shoulders numb from your neck to your fingertips. Then the surgeon makes a cut on the front or sides of your shoulder. The surgeon cleans away any damaged bone, then puts the new joint in place. The surgeon closes the cut with surgical staples or stitches.

**After Your Surgery**
Your surgeon will speak to your family/significant other in the waiting room after your surgery. After your initial recovery, your family may see you in the post-op area. If you have had a general anesthetic, the initial recovery generally lasts about one hour. You may be in the recovery room longer with certain regional blocks.

The recovery area can be cool and bright. If you feel cold we will be happy to provide you with a warm blanket or if the lights are too bright we will be happy to turn them down.

Expect to have discomfort after surgery. Your nurse will ask you to rate your pain on a scale of 0–10 (0 is no pain and 10 is the worst pain). This rating is used to give you the proper pain medication.

You will be discharged from the OR and admitted to your room once you have met the criteria for discharge specific to the GVH recovery room.
**Get “Pre-Op” Clearance**

There are many things you need to do before we can set up your surgery. First, you need to get your other doctors to agree that you are healthy enough to have surgery.

“Pre-op” is short for “pre-operative.” It means “before surgery.” Pre-op clearance comes from your doctor, dentist and other health care providers who know you. It means you are ready for surgery.

**How do I get pre-op clearance?**

* See your primary care doctor. This is to make sure you are healthy for the surgery.
  
  Your doctor may do some or all of these:  
  
  - Physical examination  
  - Blood work  
  - Echocardiogram (EKG)  
  - Chest X-ray  
  - Urine analysis

* You may need to see a heart doctor if your primary care doctor thinks you should. If so, you will need to ask the heart doctor for a letter saying that you may have the surgery.

* See your dentist for a check-up. You may need to have any dental problems fixed before surgery. This helps protect you from infection after surgery.

**Go to “Pre-Op” Visits**

You will have 2 pre-op appointments.

1. Appointment with your surgeon (in your surgeon’s office)
2. Pre-Anesthesia Clinic appointment

Your surgeon’s staff will set up the visits. You can do them both on the same day, or stretch them over more than one day.

**What should I bring to my surgeon’s office?**

* Bring a copy of all your medicines and dosages. Include over-the-counter medicines and herbal remedies.
* Make a list of all your allergies and reactions. Put this with your medicine list.

**What happens at my surgeon’s office?**

Your surgeon will:

* Do a mini physical exam.
* Go over the risks of surgery with you.
* Order more lab tests if needed.
GETTING YOUR MEDICAL VISITS AND PAPERWORK DONE

Ask your surgeon:
• When to stop eating and drinking before surgery.
• If you should take your daily medicines on the morning of surgery. This is very important if you take a blood thinner or blood pressure medicine.

What happens with Anesthesia?
You will meet with an anesthetic provider on the morning of your surgery. They will discuss anesthesia options with you after going over your health history.

TAKE A TOTAL JOINT CLASS

Before your surgery, you will take a class to learn what to expect from the surgery and from us. It will also explain what we expect from you. It's called your Total Joint Class.

Your surgeon's staff will schedule you for a joint class. The class lasts about an hour and a half. It's a good idea to bring your spouse, partner or caregiver with you.

What happens at the Total Joint Class?
• The teacher will tell you what to expect during and after your surgery.
• The teacher will answer your questions and concerns.
• You will meet with a physical and/or occupational therapist. They will show you exercises to do before and after your surgery.
• You will visit the Medical-Surgical Inpatient unit and other parts of the hospital. This will help you feel more at home during your stay.

2017 Class Schedule
• March 22, 2017
• June 28, 2017
• September 27, 2017
• April 26, 2017
• July 26, 2017
• October 25, 2017
• December 27, 2017
• May 24, 2017
• August 23, 2017
• November 22, 2017

We are here for you!
If you have any questions or concerns at any point in your joint replacement journey, please contact us at (970)641-7240.

How Surgery Gets Scheduled
Your surgeon's staff will schedule your surgery after you:
• Have all of your pre-op clearances (from your primary care doctor, dentist and heart doctor, if needed).
• Have taken the Total Joint Class.
What to Do at Home Before Your Surgery
Making simple changes in your home before surgery can make your recovery period easier.

For the first several weeks after your surgery it will be hard to reach high shelves and cupboards. Before your surgery be sure to go through your home and place any items you may need afterwards on low shelves.

When you come home from the hospital you will need help for a few weeks with some daily tasks like dressing, bathing, cooking, and laundry. If you will not have any support at home immediately after surgery, you may want to consider arranging from our Home Health Services or Swing Bed Services. Talk to your surgeon to determine what will be best for you.

Are my floors safe?
- Repair any holes in the floor, loose boards or ragged carpets.
- Remove small throw rugs and other loose objects that could make you trip and fall.
- Tape down electrical cords.
- Make an area for pets to stay where they won’t trip you or make you fall.

Will I be able to shower and use the toilet?
- In the joint class, ask about safe showering.
- A hand-held shower head can help with safe showering.

Learn How to Move to Protect Your New Shoulder
Practice Home Safety
Using the Shoulder Precautions above, practice:
- Sitting down and getting up from a chair.
- Lying down in bed and getting up from your bed.
- Getting dressed.
- Getting into and out of your shower.

Make Plans for Getting Home and Being Home
What will I need after my surgery?
- Who’s going to take you to and from the hospital and appointments? Try to arrange for a back-up driver in case of car trouble.
- What kind of car will you be riding in? Can you get in and out without climbing or twisting?
- Will your bedroom be ready for you when you go home?
- Did you forget about any falling or tripping hazards in your house? Steps, rugs, furniture, cords?
- Did you stock up on canned and frozen food at home?
- Who will help with your pets?
Arrange for the Help You Will Need After Surgery
After you leave the hospital with your new shoulder, you will need help with daily chores and recovery. Talk to your doctor. Ask your health insurance if they will cover these kinds of care.

Home Health Care
You may be able to get home health care 2-3 times per week. Each visit lasts 30-45 minutes.

Check with your health insurance to see if this is covered and if there’s a co-pay.

Most insurance plans don’t pay for someone to stay with you in your home. Check with your insurance plan to be sure.

Skilled Nursing Facility (SNF)
In most cases, your insurance will pay for a SNF. Ask them to be sure. Not all SNFs are nursing homes. Some only do rehab therapy. Most SNFs only keep shoulder patients for up to 2 weeks. Find out what your doctor and therapist recommend, and what your insurance will pay for.

Swing Bed/Acute Rehabilitation
If you qualify, your insurance may pay for an acute rehabilitation/Swing Bed facility. Ask them how you can qualify. In general, you need the following:
- Your medical problem and surgery must meet certain conditions.
- You must show progress with therapy.
- You must be able to do 3 hours a day of therapy (in 1 to 1½ hour blocks).
- You must have a medical condition that needs to be watched by a doctor.

Find out what your doctor and therapist recommend, and what your insurance will pay for.
How to Clean Your Skin Before Surgery

Cleaning your skin before your surgery can reduce your risk of an infection after surgery.

You will receive special soap to clean your skin.

This soap is called chlorhexidine. The brand name is Hibiclens®.

Your Washing Schedule
1 week before your surgery _________________ (date)
   • Stop shaving surgery area.
     Do not shave or use any hair removers (like “Nair” or waxing) on the area.

3 nights before your surgery _________________ (date)
   • Stop shaving any area of the body, including the legs and underarms.
     Men can still shave their face.
   • Put clean sheets on your bed. Use these sheets for all 3 nights.
   • Evening shower.
   • Wear clean pajamas to bed. Wear these pajamas for all 3 nights.

2 nights before your surgery _________________ (date)
   • Evening shower.

1 night before your surgery _________________ (date)
   • Evening shower.

On the day of your surgery _________________ (date)
   • Put on clean clothes and go to the hospital for your surgery.

Under the direction of your doctor, we will instruct you when to clean your body with Hibiclens®.

Be Careful Not to do These Things
• DO NOT use this special soap on your face, head or hair.
• DO NOT let it get into your eyes, ears, nose, mouth or crotch area.
• DO NOT use on broken skin or open wounds.
   If the soap touches these areas, rinse it with water for at least 1 minute.
• STOP using the soap if you have a rash, redness, itching or any other problem with the chlorhexidine.
   You may be allergic to it. Rinse with water for at least 1 minute. And call your healthcare provider.
• Do not use these packets if you know that you are allergic to chlorhexidine. Please tell your healthcare provider. Use another kind of antibacterial soap, such as Dial. Use the other soap as you normally would. Rinse it off your skin each time.
**Steps for Using Special Soap**

Turn shower water off.
- Pour Hibiclens© on a clean dry washcloth.
- Clean your whole body with the washcloth and special soap in the order below.
- Let each area air dry for 1 minute for wash to work.
- Clean each area in a back and forth motion.

Follow Steps 1-7 below.

1. Wipe your neck, chest and stomach.

2. Wipe both of your arms. Start at your shoulders and work your way to your hands and fingertips. Don’t forget to clean your armpits.

3. Wipe both of your legs. Do 1 leg at a time. Start at your upper leg near your crotch. Work your way to your feet and toes. Don’t forget to clean behind your hips.

4. Wipe your back. Start at your neck and work your way down to your waist. You may need help to do this step.

5. Wipe your right and left hips. Avoid your crotch area.

6. Wipe the outside of your buttocks. Do not use like toilet paper.

7. Wait 1 minute to make sure all soap is dry. Then rinse off the soap in the shower. Do not scrub.

Do not use any lotions or make up after you wash your skin.
The Day Before Surgery

Surgery Scheduling Will Call You
The business day* before your surgery, you will receive a call from Surgery Scheduling. They will tell you what time your surgery is, and what time to be at the hospital.

• If you have not received your call by 4 p.m., you may call us at (970) 641-7240.

*If your surgery is on a Monday, you will receive your call the Friday before. Please don’t call over the weekend.

On the Day of Your Surgery

Eating, Drinking and Medicines Before Surgery
• Don’t eat or drink anything for 10 hours before your surgery.
• Follow your surgeon’s orders about whether or not to take your medicines.

Getting to Gunnison Valley Health Hospital
From the North (Crested Butte, Almont)
• Head South on Highway 135.
• Turn left on East Denver Avenue, heading East.
• Go 6 blocks and turn left on N. Colorado St.
• The main entrance and parking area for the hospital will be on your left.

From the South (Town of Gunnison, East and West on Highway 50)
• Head into Gunnison on Highway 50.
• Turn North at North Main Street (Highway 135)
• Turn right on East Denver Avenue, heading East.
• Go 6 blocks and turn left, heading north, on N. Colorado St.
• The main entrance and parking area for the hospital will be on your left.

What to Bring to the Hospital

• A lightweight, short robe that ties or buttons up the front.
• House shoes with soles that won’t slide. Avoid slip-ons. They can make you trip.
• Comfortable socks.
• Comfortable, elastic-waist clothes, shorts or sweat pants, and loose-fitting shirts.
• If you have a front-wheeled walker at home, please bring it in. Our physical therapists will make sure that it is still in good condition and right for your use. If not, we will give you a new walker.
• Personal items such as soap, shampoo, comb/brush, razor, makeup, glasses, dentures, hearing aids, etc.
• This book.

Your things will be left with your family in the waiting room while you are in surgery. They will be taken to your room when you are ready.
**What Not to Bring to the Hospital**

- Don’t bring jewelry, radios, DVD or CD players, cell phones, iPods, etc.

**What to do When You Arrive for Surgery**

From the main lobby at our North Main entrance take the elevator to the second floor and walk to the surgery waiting area. Dial #240 on the phone provided and we’ll begin your preparation for surgery.

**After You Check Into Surgery**

You will be taken to the pre-op holding area when they are ready. They will give you a gown to put on. They will start an IV in a vein. One family member may go with you at this time.

Next, you will meet the anesthesia provider who will give you your anesthesia. Then your surgeon will come see you. The surgeon will answer any last-minute questions you have and prepare you for surgery.
Medications containing aspirin, non-steroidal anti-inflammatories, and blood thinners should be avoided before and after surgery. These medications could significantly increase bleeding during surgery.

If you are currently taking these medications for heart-related conditions, arthritis, chronic pain, or stroke please make someone in your total joint staff aware of the medication and dosage. If you are unsure if your medication contains any of the above, please contact your pharmacist. You should also contact the physician who prescribed the medication and let him or her know of your upcoming surgery in case adjustments need to be made.

**Medications to avoid:**

<table>
<thead>
<tr>
<th>Xarelto</th>
<th>Relafen</th>
<th>Ecotrin</th>
</tr>
</thead>
<tbody>
<tr>
<td>Warfarin (Coumadin)</td>
<td>Carisprodel (Soma)</td>
<td>Excedrin</td>
</tr>
<tr>
<td>Oxaprozosian</td>
<td>Ketoralac (Toradol)</td>
<td>Halfprin</td>
</tr>
<tr>
<td>Aspirin</td>
<td>Diclofenac (Voltaren)</td>
<td>Midol</td>
</tr>
<tr>
<td>Ibuprofen</td>
<td>Advil</td>
<td>Nuprin</td>
</tr>
<tr>
<td>Indomethacin</td>
<td>Aleve</td>
<td>Pepto Bismol</td>
</tr>
<tr>
<td>Motrin</td>
<td>Anacin</td>
<td>Naproxen</td>
</tr>
<tr>
<td>Doan's Pills</td>
<td>Children's Aspirin &amp; Ibuprofen</td>
<td></td>
</tr>
</tbody>
</table>

You may take medications containing Tylenol or Tylenol products.

These might include: prescription medications such as Tylenol with Codeine, Vicodin, Lortab, Percocet, and most migraine headache medications.

If you are unsure if your medications contain Tylenol contact your pharmacist.
• Your surgeon will go to the waiting room to talk with your family about the surgery.
• You will recover from surgery in a special area, called the PACU (postanesthesia care unit).
• After you wake up, you will be moved to your room in the Medical-Surgical Inpatient Unit. But you may stay in recovery for a while first.

**When You Get to Your Room**

• When you get to your room, your nurse and patient care tech will help you get settled.

*Here’s what to expect:*
• You may be on oxygen right after surgery. We will work with you on deep breathing and making sure you don’t have trouble breathing normally.
• There will be a special tool in your room to help you fill your lungs and get more oxygen. This tool is called an IS, or Incentive Spirometer (pictured right). This helps avoid lung problems and fevers after surgery. Plan to take 10 IS breaths every hour that you are awake.
• You will get antibiotics to help stop infection.
• There may be a tube in your bladder which was put in during surgery. We will take it out the day after surgery. This is not typical and is dependent upon your medical history.

**Equipment to Help You Heal**

• When you leave the hospital your arm will be in a sling. You will need to sling to support and protect your shoulder for the first 2 to 4 weeks after the surgery.

**Handling Pain**

• Remember, you’ve just had a big surgery. You will have some pain. We can’t take away all your pain, but we will help you manage it the best you can.
• It is important to take the pain medicine just like your doctor says to. You need it so you can work with physical and/or occupational therapy.
• Pain medicine can make it hard for you to pass stool (poop). You may need a strong bowel treatment or stool softeners while on pain medicine. Tell your nurse if you can’t pass stool.
RIGHT AFTER YOUR SURGERY AND IN THE DAYS AFTER YOUR SURGERY

Preventing Blood Clots
After any joint replacement, you need to take medicine to reduce the risk of blood clots. These medicines are called anticoagulants.

• You may be on this medicine for up to 42 days after surgery.
• You may get this medicine as a shot or in a pill. Your surgeon and your insurance company will decide which one you get.
• We will teach you and a family member why this medicine is important. If we are sending you home with the shot, we will teach you and a family member how to give it.

Important: Use a new needle and syringe each time you give yourself a shot.

Managing Blood Loss
You can lose a lot of blood during surgery. After your surgery, we will check your blood to make sure you have enough red blood cells.

• Lab techs will come and draw blood every morning. It’s important that you let them draw your blood.
• If your levels are low, you may feel weak, tired, light-headed or faint. If that happens, we may have to give you a blood transfusion.

Changing Your Bandages or Dressing
• Your surgeon will tell us when to change the dressing on your shoulder. Your dressing may be changed before you go home.
• Staples or stitches may be removed at your follow-up appointment.

Starting to Eat and Drink Again
• After surgery you may feel sick to your stomach. Please let your nurse or tech know right away if this happens. You can get medicine to help your stomach feel better.
• Eating or drinking too fast can make you feel sick or throw up. Go slowly.
• Usually you begin with ice chips, then water and then regular food. You will slowly get back to eating a normal diet. You will get fluids through a tube in your arm until you can drink water without getting sick.
Eating While in the Hospital
Good nutrition helps with healing. Follow these general guidelines:

- Eat a variety of foods.
- Drink plenty of fluids.
- Maintain your weight.
- Be sure to include calcium rich foods in your diet. For example: low-fat milk, low-fat cheese, yogurt, low fat cottage cheese, and broccoli.

Important: If you have questions about your diet, please ask to see the dietitian during your stay.

Your Therapy: Physical and Occupational

You will likely have physical therapy and occupational therapy the day of your surgery. In order to get better you must work with therapy every day. Once we show you how to protect your shoulder, you will learn the skills needed to return to normal life. You’ll learn how to walk, sit and dress. Important: Ask for pain medicine before each training session. It will help make moving easier.

Physical Therapy is made up of exercises to help you get stronger. Occupational Therapy is made up of exercises that help you do daily activities. Both make you better able to take care of yourself. Both kinds of therapists will give you exercises that help you be safe and protect your joint. They will also tell you things to avoid in the hospital and at home.

Physical Therapy
The day after surgery, a physical therapist will test your strengths and areas of need. This includes questions about your home living set-up, as well as how well you move. This is to find out if you need extra help once you leave the hospital.

The physical therapist will help you get out of bed and begin to walk. You will learn:

- How to protect your new joint.
- How to move safely.
- Things to be aware of for a good recovery.
- Exercises to help your recovery while in the hospital.

The physical therapist will also give you exercises to do at home. It’s important to move and get out of bed early. This helps with your strength and working of your new joint. Physical therapy will help improve your strength.

Occupational Therapy
Occupational therapy will help you move with less outside help. The occupational therapist will give you hints to help you be more independent with your Activities of Daily Living. These are things you do every day: get dressed, take a shower, brush your teeth.

After surgery, an occupational therapist will watch you do your Activities of Daily Living. They will judge your strengths and areas of need. This will include questions about your home life and how you live day to day. They will help you out of bed and help you walk. They will ask you to get dressed or bathe. Seeing how well you do will help the therapist make a plan for you.
YOUR DAILY PROGRAM IN THE HOSPITAL

Starting the day after your surgery, we have a routine we follow with most patients. Here’s what happens during a typical hospital stay after shoulder replacement.

**Day #1 - The Day After Your Surgery**
- Early in the morning, we will remove the tube in your bladder. Lab techs will come and draw blood.
- Your doctors will see you to check on how you are doing. They usually come between 6:30 and 7:30 AM.
- You will work with Physical and Occupational Therapy.
- You will eat all meals in a chair at your bedside, starting with lunch on the day after surgery. Be sure to call us whenever you want to get in or out of bed.
- The planning for you to go home begins. We call this “discharge planning.” Our social worker and discharge planner will talk with you about your plans for leaving the hospital.

**Day #2 and #3** (if suggested by your surgeon)
- You will work with Physical and Occupational Therapy.
- You will take pain pills as needed to control your pain.
- We will teach you how to give a blood thinner (anticoagulant) shot if you are going home with one. The nurse will watch you give yourself a shot before you leave the hospital.
- We will give you prescriptions for your medicines. These will include pain pills, stool softeners, and blood thinner shots.
- Some patients will be discharged in the afternoon of Day #2. Others will need to stay one more night and will be discharged the third day after surgery. This will be decided by your surgeon.
When you leave the hospital, we “discharge” you. That means we go through steps to make sure you are ready to go. We have to fill out lots of paperwork, too. Discharge planning starts the day after your surgery. Our discharge planner will talk with you about your plans for after you leave the hospital.

You will need some special equipment after you leave. The discharge planner can help you find out what types of equipment you will need. They will also help you to see if your insurance will pay for it. For example:

- You may be given equipment supplied by the hospital. You may be billed for this equipment if it is not covered by your insurance.
- Most insurance plans follow the Medicare rules for equipment. This means the equipment must be needed for a medical reason.

Questions with Insurance Coverage or Discharge?
Please call Monday-Friday 7:30 AM - 4:00 PM: (970)641-7209

Doctor Visits After Surgery

You will have several follow-up visits with members of the joint team.

After 10 to 14 days
- Your staples or stitches may be removed and steri-strips applied.
- The doctor will look at your incision, check how you are doing with physical therapy and ask you about your pain.

After 4 to 6 weeks
- We will look at a set of x-rays of your joint. The x-rays help us see how well your new shoulder is working.
- We will answer any questions and help with any needs that you have.

After 3 months, 6 months and 1 year
- Examine joint.
- Look at x-rays.
- Talk about activities you can start doing again.
- Answer questions and help with any needs that you may have.
AFTER YOU LEAVE THE HOSPITAL

Your Care After Surgery

When you leave the hospital to go home be sure to start Physical Therapy as soon as possible.

Taking Care of Your New Joint

An infection in your body could harm your new joint. Talk with your surgeon before planning medical or dental procedures. You may need to take antibiotics first to prevent infection.

To check how stable your new shoulder is over time, you may have x-rays every year or two.

Questions?

For any questions or concerns, please call your total joint coordinator at (970)641-7240.

What to Do On Your Own

Practice walking every day. Try to do more each week. Start by getting your own glass of water. If the weather is good, walk to the corner to mail a letter. Just keep at it! After healing and when you get some shoulder movement back, you may be ready to have sex.

When to Call the Surgeon

Call your surgeon if you have any of these signs:
- Shoulder pain is worse.
- Fever over 100.6°F.
- Unusual redness, heat or drainage at the surgery site.
- Trouble breathing or chest pains.

If you have chest pain or trouble breathing call 911.
Nutrition After Surgery

Some people feel a little nauseous after surgery. This is often due to medicines, water loss or simply the stress of surgery. Don't push yourself to eat. Listen to your body, and you'll know what to eat and when.

Were you on a special diet before surgery, such as low-salt? If so, ask your doctor if you should follow your diet during recovery.

Start Slowly

1. Start off with liquids and soup. They are easier to digest.
2. Move on to soft solids when you feel ready. Try mashed potatoes, applesauce and Jell-O.
3. Slowly move to solid food. Don't eat fatty, rich or spicy foods at first.
4. Eat smaller amounts, more often.

Drink Fluids

- It's normal to lose fluids during surgery. Getting water back in your system helps you feel better. It also balances the chemicals in your body.
- Drink at least 6 glasses of clear liquids like water, apple juice or ginger ale a day. Do this unless your doctor tells you not to.

Good Nutrition

- Good nutrition helps your body build tissue and heal wounds.
- Eat a low-fat, high-protein diet.
- High-protein cereal, fish and chicken help repair tissue affected by surgery.

Guidelines for Weight Gain

- Keep nutritious snacks on hand. Examples include yogurt, juice, cheese, milk and ice cream.
- Eat several small meals and snacks often.
- Use high-calorie, high-protein foods such as yogurt, cheese, pudding, ice cream, peanut butter, cottage cheese or Carnation instant breakfast drink.
- Eat your favorite foods!
- Add diced meat, cheese or vegetables to sauces, soup and casseroles.

Special Note: Be sure to follow any specific post-op instructions from your surgeon, nurse or dietitian.
EATING WELL AT HOME

Guidelines for Weight Loss
• Cut back on portion sizes.
• Use less sugar.
• Avoid fried foods, rich desserts, whole milk, cheese made with whole milk, more than a tablespoon of salad dressing, gravies and sauces.
• Choose lean meats, low-fat milk cheeses.
• Eat plain desserts, angel food cake or fruits.
• Avoid too many sweets such as cakes, pies, cookies, ice cream, candy, soft drinks, donuts and Danishes.
• Eat at regular meal times.
• Avoid eating while watching TV, reading or driving. Sit at the table, eat slowly and enjoy each bite.
• Try reduced-calorie margarine, mayonnaise and salad dressing.
• Choose plenty of vegetables, fruits and whole grain foods.

JOINT SURGERY CHECKLIST

Check off each thing as you get it done
☐ Get medical clearance from primary doctor
☐ Get cardiac clearance from heart doctor (if needed)
☐ Get dental clearance
☐ Go to Pre-Op visit(s)
  Date and Time: _________________
☐ Take a Total Joint Class
  Date and Time: _________________
☐ Have your surgery!
  Date: _________________

If needed...
☐ Call Home Healthcare Agency
☐ Call to Rehab center
☐ Stop taking Coumadin, Plavix or Aspirin
  Date: _________________
☐ Return to work. Date: _________________
☐ Get FMLA papers filled out, if needed