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Dear Patient:

On behalf of the Hartford HealthCare Bone & Joint Institute at Hartford Hospital, and our expert doctors, nurses and other professionals, we would like to welcome you and thank you for choosing us for your surgery.

Our team provides the highest standards of care to ensure a quality experience for you and your family. We are committed to keeping you informed, and helping you become an active partner in your health care. We will do everything we possibly can to make your stay with us as pleasant as possible.

You will find important instructions and information to prepare you for your surgery in this education packet. It will answer many of the questions you may have, and clearly outline the things you need to do before and after surgery. Planning tools, advice on medications, diet, and exercise recommendations are also included.

Please take the time to read the materials carefully.

If you have further questions about your surgery, please call your surgeon's office or a member of the BJI team at 860.972.0475, option 2.

Sincerely,

John C. Grady-Benson MD
Physician-in-Chief
Hartford HealthCare Bone & Joint Institute
# Important Phone Numbers

Your Surgeon: ______________________________________________________________

Your Medical Doctor: _________________________________________________________

**Hartford HealthCare Bone & Joint Institute at Hartford Hospital:**

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone Number</th>
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</thead>
<tbody>
<tr>
<td>Bone &amp; Joint Institute</td>
<td>860.972.6533</td>
</tr>
<tr>
<td>Directions &amp; Parking Information</td>
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</tr>
<tr>
<td>Total Joint Class Registration</td>
<td>860.545.1888</td>
</tr>
<tr>
<td>Patient Access/Registration</td>
<td>860.972.2730</td>
</tr>
<tr>
<td>PREPARE</td>
<td>860.972-0475</td>
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<td>Surgery Time-Line</td>
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<td>Integrative Medicine</td>
<td>860.972.4444</td>
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<td>Diabetes LifeCare</td>
<td>860.972.3526</td>
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<tr>
<td>HHC Bariatric Program</td>
<td>860.246.2071</td>
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<tr>
<td>BJI 4th Floor</td>
<td>860.972.6670</td>
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<td>BJI 5th Floor</td>
<td>860.972.6360</td>
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<td>Food and Nutrition</td>
<td>860.972.2604</td>
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<td>Total Joint Coordinator</td>
<td>860.972.6313</td>
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<td>Transition Nurse Coordinator</td>
<td>860.972.6718</td>
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<tr>
<td>Director of Nursing</td>
<td>860.972.5972</td>
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<td>Nurse Manager</td>
<td>860.972.6769</td>
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<td>Hartford HealthCare Billing</td>
<td>860.696.6010</td>
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<td>Patient Relations</td>
<td>860.972.1400</td>
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<tr>
<td>Hudson Suites</td>
<td>860.545.1111</td>
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Directions to the Bone & Joint Institute at Hartford Hospital

**Coming from I-84 East bound:**
Take I-84 East to Hartford. Take the Capitol Avenue Exit 48-B (a right hand exit). At the end of the ramp between the State Capitol Building and the Legislative Office Building, turn left onto Capitol Avenue and turn right onto Washington Street (at the statue of Gen. Lafayette) continuing south to the sixth traffic light. Take a left onto Retreat Avenue. At the next traffic light, take a left onto Seymour Street. Valet parking is available in front of the Bone & Joint Institute on the right-hand side. The entrance to the BJI public garage is on the left. Visitor and patient parking spaces are reserved on the first floor.

**Coming from I-84 West bound:**
Take I-84 West to Hartford. Take the “Downtown Hartford” Exit 54 (a left hand exit) over the Founders Bridge and guide your vehicle to the far left lane. At the bottom of the bridge, turn left onto Columbus Boulevard; travel past the Convention Center and across the Columbus Boulevard Bridge. Continue through five traffic lights (Columbus Boulevard will curve west and uphill, becoming Wyllys St.). At the fifth traffic light, bear left toward Retreat Avenue. At the traffic light on Retreat Avenue, turn right onto Seymour Street. Valet parking is available in front of the Bone & Joint Institute on the right-hand side. The entrance to the BJI public garage is on the left. Visitor and patient parking spaces are reserved on the first floor.

**Coming from I-91 North bound:**
Take I-91 North to Hartford; follow Capitol Area signs to Exit 29A (a left hand exit). Move immediately to the right lane and take the first exit (Columbus Boulevard/Convention Center) and turn left crossing the Columbus Boulevard Bridge. Continue through five traffic lights (Columbus Boulevard will curve west and uphill, becoming Wyllys St.). At the fifth traffic light, bear left toward Retreat Avenue. At the traffic light on Retreat Avenue, turn right onto Seymour Street. Valet parking is available in front of the Bone & Joint Institute on the right-hand side. The entrance to the BJI public garage is on the left. Visitor and patient parking spaces are reserved on the first floor.

(continued next page)
Directions to the Bone & Joint Institute at Hartford Hospital

Coming from I-91 South bound:
Take I-91 South to Hartford. Take the Capitol Area Exit 29A (a right hand exit). Keeping in the right lane, take the first exit (Columbus Boulevard/Convention Center) and turn left crossing the Columbus Boulevard Bridge. Continue through five traffic lights (Columbus Boulevard will curve west and uphill, becoming Wyllys St.). At the fifth traffic light, bear left toward Retreat Avenue. At the traffic light on Retreat Avenue, turn right onto Seymour Street. Valet parking is available in front of the Bone & Joint Institute on the right-hand side. The entrance to the BJI public garage is on the left. Visitor and patient parking spaces are reserved on the first floor.

Coming from Route 2 (Norwich area):
Take the “Downtown Hartford” exit onto the Founders Bridge. At the bottom of the bridge, turn left onto Columbus Boulevard; travel past the Convention Center and across the Columbus Boulevard Bridge. Continue through five traffic lights (Columbus Boulevard will curve west and uphill, becoming Wyllys St.). At the fifth traffic light, bear left toward Retreat Avenue. At the traffic light on Retreat Avenue, turn right onto Seymour Street. Valet parking is available in front of the Bone & Joint Institute on the right-hand side. The entrance to the BJI public garage is on the left. Visitor and patient parking spaces are reserved on the first floor.
Why do I need a shoulder replacement?

**Shoulder Arthritis** – is the most common reason that many patients have a shoulder replacement. When the cartilage in the shoulder wears down, the space between the ball and socket joint becomes smaller, this can cause pain and a decrease in the range of motion in your shoulder. Arthritis can occur due to age related changes, inflammation, or after an injury.

**Fracture** – if you have a fracture that is beyond repair, a shoulder replacement may be a good option that will allow for better function of your shoulder.

**Rotator Cuff Arthropathy** – if your rotator cuff is no longer functioning, you may have poor range of motion of your shoulder. A shoulder replacement can help to restore the function and improve the pain in your shoulder if your rotator cuff is not repairable.

Types of shoulder replacements:

**Total Anatomic Shoulder Arthroplasty** –
This is a ball and socket replacement where the ball is replaced with a metal implant and the socket is replaced with plastic.  
See x-ray examples at right:

**Total Reverse Shoulder Arthroplasty** –
The ball and socket are reversed with this replacement. A metal ball is placed where the socket was and the plastic socket connected to a stem is placed in the arm bone.  
See x-ray examples at right:

**Hemi Arthroplasty** –
This type of replacement is used when there is still good cartilage left in the socket and only the ball is replaced.
PREPARE for surgery

PREPARE Assessment Center

You have been scheduled for your elective orthopedic procedure at the Hartford HealthCare Bone & Joint Institute at Hartford Hospital.

In preparation for your surgery, you must complete a pre-operative medical risk assessment at our PREPARE (Procedure-Related Education and Pre-Anesthesia Risk Evaluation) Center within 30 days of your procedure. Your visit will take approximately 60 minutes. PREPARE is a program that ensures you have a safe and successful surgery.

How PREPARE works

1. Your surgeon’s office schedules your surgery at the Bone & Joint Institute
2. You will receive a call from registration to schedule your PREPARE Center appointment for your anesthesia screening and pre-operative health & physical.
3. A registered nurse (RN) contacts you via telephone approximately 1-3 weeks before your PREPARE Center appointment. During this call the nurse will ask about your medical history. Complete responses are needed for a safe surgery. Your answers are confidential and will not be shared outside your healthcare team.

Questions may include:
- Do you have a health diagnosis such as diabetes, heart disease, or high blood pressure?
- Are you taking any medications, vitamins or supplements?
- How is your general health?
- How well are you walking?

4. Based on your medical history, you may also be advised to visit a specialist physician prior to surgery. For example, if you have a cardiologist (heart doctor) or pulmonologist (lung doctor) that you see routinely, additional testing or clearance may be required.

What to bring to your PREPARE appointment:
- Government issued photo ID
- Insurance cards or forms
- A list of medications, including nonprescription and herbal supplements (include the name, dose and how often you take each one)
During your PREPARE appointment you will:

- Meet with a medical assistant, an Advanced Practitioner (APRN or PA) and if needed, a nurse case coordinator
- Receive instructions regarding your pre-operative medications
- Complete a history and physical examination, blood work and EKG
- Complete airway and sleep apnea assessments for anesthesia
- Receive pre-operative and anesthesia education

After the PREPARE appointment:

- Your healthcare team will provide resources for obtaining medical equipment and confirm your choice of home healthcare provider if applicable
- A member of the BJI clinical team will call you one business day prior to surgery to notify you of your arrival time for surgery, review final instructions, and answer any questions you may have

Post-surgery:

- The team will reinforce your need to prepare for your return home following your hospitalization

PREPARE Center location:
BJI Ambulatory Services Building
2nd Floor, Suite 204A
31 Seymour St, Hartford, CT

Parking is available outside in the lot adjacent to the BJI Ambulatory Services Building and in the parking garage located behind the building on Seymour Street.

If you have any questions about your PREPARE Center visit, please call 860.972.0475
Total Joint Education Class

Preparation for surgery, recovery and a pre-planned discharge are an important part of your care. For this reason, an Education Webinar is available at no cost. The class will give you a better understanding of what to expect before, during and after surgery. It is important that you attend one of these webinars. It would be beneficial to have a family member or friend that is going to assist you in your post-op recovery attend the webinar with you.

The education webinar will review the material in this education packet and include:

- **A review of total joint replacement**
- **Information on preparing for surgery and what to expect after surgery**
- **Nutritional information**
- **An overview of your hospital and surgical experience**
- **Postoperative expectations and recovery**

The webinars are held twice a week. You can register by going to BoneAndJointInstitute.org and selecting ‘Patient Education,’ then ‘Classes & Events.’ Registration is required for access to the webinar.
**Medications**

Be sure to inform your PREPARE team of ALL the medications you are taking, including:

- Vitamins
- Over the counter drugs (such as aspirin, antacids, pain relievers, etc.)
- Herbs and “natural” products

These can all have unwanted effects when combined with medications or anesthesia. You will receive instructions regarding managing your medications before surgery.

**Please note:**
If you are experiencing pain prior to surgery, you are allowed Tylenol up to the day of your surgery.

**Medication list**

Name: ___________________________ DOB: _____________

<table>
<thead>
<tr>
<th>Medication Name</th>
<th>Dosage (mg) (How much do you take?)</th>
<th>Frequency (How often do you take it?)</th>
<th>Reason for medication</th>
<th>Prescribing Doctor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example:</td>
<td>Lisinopril 10mg oral tablet</td>
<td>1 orally once daily</td>
<td>Hypertension</td>
<td>Dr. Smith</td>
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</tbody>
</table>

**Medication allergies:**  

☐ YES  ☐ NO

Allergic to: _____________________________________________________________

Reaction: ____________________________________________________________

**Pharmacy info:**

Name: ________________________________________________________________

Address: ______________________________________________________________

Phone: ________________________________________________________________
Optimizing surgical recovery

TOBACCO
STOP smoking at least four to six (4-6) weeks before surgery. Nicotine hinders the healing process and the bone needs time to heal and to grow on the new implant. Smoking increases your risk for developing an infection after surgery.

ALCOHOL
NO alcohol use two (2) weeks prior to surgery. Please inform your healthcare team of how often you drink alcohol. Alcohol may interfere with certain medications you will be prescribed. Additionally, serious harm can result from alcohol withdrawal when not properly managed.

MARIJUANA
(Medical or Recreational) Please stop all THC containing products 7 days prior to surgery unless otherwise instructed by your doctor. CBD topical products – do not use after your pre-surgical shower. Medical marijuana cannot be used during your time at the hospital. Do not use medical marijuana at the same time as prescription pain medications unless otherwise instructed by your doctor.

DENTAL CARE
If you need dental work (including routine dental cleanings), it is recommended to complete it at least two (2) weeks before surgery. After a joint replacement your surgeon or dentist may want you to take antibiotics before any future dental work. Most surgeons prefer that no dental work be done for three (3) months after surgery (excluding dental emergencies). Please discuss with your surgeon any specific questions you may have regarding dental care.

NUTRITION
Good nutrition is important before surgery. Eating healthy, well balanced meals, and avoiding any unnecessary weight loss or gain prior to your procedure is recommended. This will help make sure you have the strength for recovery.

EXERCISE
Keeping your muscles toned will help you to recover faster after surgery. Be sure to follow the exercise program you have been given by your doctor.
• Pre-habilitation (Pre-hab) is an exercise therapy program started at least two to six weeks before surgery.
Post-hospital plan

Your post-hospital plan will be discussed during your PREPARE visit prior to your hospital admission.

- Following your hospital stay, you will most likely return home.
- Your nurse case coordinator will provide you with a list of choices for you to select a home health care agency, or in rare cases, a skilled nursing facility to support your successful transition from Hartford Hospital.
- We have a network of preferred providers that collaborate with the Bone & Joint Institute to provide seamless orthopedic aftercare.
- If you require follow-up services, a Bone & Joint Institute nurse case coordinator will work with you to arrange your post-acute care needs.

Discharge transportation

Transportation options include:

- Family member or friend
- A wheelchair van can be arranged by a nurse case coordinator however, it is not typically covered by insurance and may require an out of pocket cost.

On rare occasions, you may be transferred to a preferred provider Skilled Nursing Facility (SNF) post discharge. Transportation to a SNF can be by a family member or friend or via wheelchair van (not typically covered by insurance) or ambulance (only paid for by insurance with a certificate of medical need).

Discharge information

Our goal is for patients to be ready for a safe transition home by noon the day after their surgery. This targeted time line is also individualized based on patient circumstances. All patients must meet their individual physical therapy safety goals and be medically cleared by their medical or surgical team before transitioning home.
Your surgical experience

The day before your surgery

Surgical time line

A member from the Bone & Joint Institute team will call you between the hours of 1 pm and 6 pm one business day before surgery to inform you about your surgical time and when to report to the hospital. If your surgery is scheduled on a Monday or after a holiday, you will receive a call 1 business day before your scheduled admission. If you miss this call, they will leave a message or you can return the call to 860.972.0055.

Bathing instructions

Following these instructions will help you to be sure that your skin is clean before surgery to help prevent infection.

Important

You will need to shower with a special anti-bacterial soap called Chlorhexidine Gluconate (CHG). A common brand name for this soap is Hibiclens, but any brand of CHG is acceptable to use.

CAUTION: CHG is not to be used by people allergic to chlorhexidine.

You will take two (2) showers using the Hibiclens soap.
The NIGHT BEFORE your surgery you will shower and do the following:

- REMOVE ALL JEWELRY – must remain off until after surgery
- Take a shower with your normal soap, shampoo & conditioner
- Rinse off your normal soap products & turn off the water
- Using a clean, wet, washcloth, pour some Hibiclens onto the cloth and wash from your NECK DOWN. Scrub gently – focusing on the area of surgery
  
  * Do not use Hibiclens near your eyes, ears, or private parts to avoid permanent injury to those areas.
- Leave the Hibiclens soap on for five (5) minutes
- Rinse off and dry off with a CLEAN towel
- DO NOT use any powders, lotions, oils, deodorants, make-up or hair products after this shower.

Wear clean pajamas and sleep on clean sheets after taking the Hibiclens shower. Please do not allow pets to sleep on or in the bed with you.

The MORNING OF your surgery you will shower and do the following:

- You may wash your hair with your normal shampoo and conditioner
- DO NOT use your normal soap – ONLY use the Hibiclens soap
- Using a clean, wet, washcloth, pour some Hibiclens onto the cloth and wash from your NECK DOWN. Scrub gently – focusing on the area of surgery
  
  * Do not use Hibiclens near your eyes, ears, or private parts to avoid permanent injury to those areas.
- Leave the Hibiclens soap on for five (5) minutes
- Rinse off and dry off with a CLEAN towel
- DO NOT use any powders, lotions, oils, deodorants, make-up or hair products after this shower.

Wear clean comfortable clothes to the hospital.

Nail polish and acrylic (non-natural) nails must be removed prior to surgery.
The night before your surgery

You should not eat anything (including gum or candy) after MIDNIGHT the night before your surgery. You may drink clear liquids (liquids you can see through like water) after midnight until two (2) hours before your arrival time for surgery. DO NOT drink milk, coffee, tea or alcohol. Drink usual amounts of fluid. DO NOT DRINK OR EAT ANYTHING (including water) two (2) hours before your arrival to the hospital.

Medication instructions

During your PREPARE Center visit you will be given instructions on what medications to take the night before and morning of your surgery. Take ONLY those medications you were instructed to take by your provider during your PREPARE Center visit. Take these medications with a small sip of water.

What to bring

- Two forms of identification
  - Picture Identification (Drivers License)
  - Insurance Cards
- Eyeglasses, Hearing Aids, Dentures (& cases)
- CPAP/BiPAP machine settings for patients with Sleep Apnea
- Clothing/Footwear
  - Loose fitting clothing (sweatpants or gym shorts)
  - Slip resistance shoes (rubber soles) with backs; any specialized footwear (orthotics/diabetic shoes); NO sandals, flip-flops, crocs or open back shoes.

What NOT to bring

- Money
- Valuables / Jewelry
- Credit cards
It’s surgery time!

Arrival

Arrive at the hospital on time. When you speak with the Bone & Joint Institute clinical team member the day before your surgery, he/she will let you know when to arrive on the day of admission. For your convenience, we offer valet parking at the BJI main entrance (32 Seymour Street, Hartford).

Upon arrival:

• When you arrive at the Bone & Joint Institute main entrance, immediately proceed to the main reception desk for a visitor badge ID. Once completed, proceed to the right side of the lobby (behind the water wall feature) to access the elevator to the third (3rd) floor for the surgical reception suite.

• Your pre-operative nurse will start your intravenous (IV), ask questions and perform a physical assessment.

• Your surgical site will be identified and marked prior to your surgery.

Anesthesia:

There are several choices of anesthetic techniques that may be chosen for total joint replacement surgery. You and your anesthesiologist will discuss all necessary factors prior to surgery and agree upon a plan for your anesthetic.

• **General Anesthesia**
  - In this case you are completely unaware of your surroundings and will not respond to stimulation.

• **Regional Anesthesia**
  - This is a technique that will anesthetize a particular area or region of the body.
Peripheral Nerve Block

What is a peripheral nerve block?

A nerve block puts a part of your body to sleep by making it “numb” in preparation for surgery. It is a way to block the signals that travel along the nerves. The nerve block does this by keeping the pain sensation from reaching the brain.

Why do I need a peripheral nerve block?

- Surgeries, especially orthopedic surgeries, can be painful. Postoperative pain can limit or slow your recovery by making it difficult for you to participate in physical therapy, walk, go to the bathroom etc.
- Peripheral nerve blocks work together with other pain medications (opioids, muscle relaxers, anti-inflammatories, etc.) to provide optimal pain control.
- The goal is to provide the best possible pain relief with the least opioid use.

Your surgeon and anesthesia team may suggest a peripheral nerve block to control the sensation of pain during and after your surgery. The nerve block is used in addition to standard anesthesia which will keep you sleeping during the surgery. A specialized anesthesiologist performs this using ultrasound to detect the particular nerve or group of nerves supplying the area which you will be operated on.
How and when is a nerve block performed?

- Nerve block procedures are most commonly done in the pre-operative area (before going into surgery).
- You will meet your “regional block team,” led by an anesthesiologist.
- You will be given some relaxing medication through your intravenous line (IV) before the nerve block is performed. You will be placed on a heart monitor and given some oxygen.
- You will first receive a numbing medicine to the skin using a small needle (may feel like a bee sting). Then the nerve block will be given by injection (shot) into the area near your surgery.
- Within a few minutes, your arm or leg will feel numb and weak. After several minutes, it will be difficult to lift or move your arm or leg, and you may feel “pins and needles” in the area. This is means the block is starting to work.
- The entire procedure will take about 10-20 minutes to complete.

What happens when the block wears off?

We strongly advise patients to take pain medication before the block completely wears off to help ease the transition.

- The block may last 24-36 hours
- The block may wear off suddenly or gradually
- You may feel tingling sensations before the block starts to wear off.
- Many patients will feel pain after the block wears off and some may perceive it as significant pain which may cause concern to the patient.

When should I be concerned?

If you continue to feel the effects of the peripheral nerve block for longer than 48 hours, please contact your surgeon’s office.

Duration of surgery:

Your surgery will last approximately 2-3 hours.
Day of Surgery

1. Arrival
   - Two options to park:*  
     1. Valet (Maximum daily rate of $9)  
     2. Parking Garage (Handicap directly on left hand side when entering, validated parking is day of discharge/transition)  
   - Front desk check – in for visitor badge  
   - Take the elevator to the third floor behind water wall  
* Due to COVID-19 restrictions please plan on being dropped off by your friend or family member providing transportation. There is a strict no visitor policy for our pre and post-op areas. We do NOT have a family waiting area available at this time.

2. Pre-op
   - Check-in at Surgical Reception Suite  
   - Change into hospital gown  
   - All personal belongings go in a designated locker  
   - Prepped for surgery by RN  
   - Questionnaire, IV access, shaving

3. Regional Block
   - For Total Shoulder Arthroplasty patients unless contraindicated  
   - Anesthesiologist and team will perform the block at bedside with ultrasound  
   - Oxygen will be administered via nasal cannula  
   - IV medication is administered
4. Operating room
- First five minutes is “busy”
- An epidural (spinal) is administered by CRNA and Anesthesiologist for Total Knee Arthroplasty and Total Hip Arthroplasty patients unless contraindicated

5. Recovery room
- Post Anesthesia Care Unit (PACU)
- Close monitoring of vitals, pain, and waking up from anesthesia
- **Length of Time:** aprox. 1–2 hours

6. Inpatient unit
- Incentive spirometry 10x/hour
- Sequential compression device
- Ice applied (Cold Therapy) applied to surgical site
- Surgical site dressing assessment
- Telemetry and/or continuous oxygen monitoring if needed
Pain Medication Diary
This can help you track your pain after surgery

Pain Scale (0-10)

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<tr>
<th>0</th>
<th>1-2</th>
<th>3-4</th>
<th>5-6</th>
<th>7-8</th>
<th>9-10</th>
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<tbody>
<tr>
<td>Pain is present but does not limit activity</td>
<td>Can do most activities with rest periods</td>
<td>Unable to do some activities because of pain</td>
<td>Unable to do most activities because of pain</td>
<td>Unable to do any activities because of pain</td>
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<tr>
<th>Date</th>
<th>Time</th>
<th>Score (0-10)</th>
<th>Medication Name</th>
<th>Medication Dose</th>
<th>Dizzy, nauseas, sleepy, etc.</th>
<th>What made pain better</th>
<th>What made pain worse</th>
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After surgery – your hospital stay

Recovery—PACU:

The Post Anesthesia Care Unit is also referred to as PACU.

- The PACU is located on the third (3rd) floor of the hospital.
- After your surgery you will be brought to the PACU, where you will be closely monitored as anesthesia wears off.
- The length of stay in the PACU will be determined by many factors including the type of procedure and the nature of the anesthetic used. You may be in the PACU between 2-4 hours.

Pain management: keeping you comfortable

You will experience surgical pain following surgery. However, we will work with you to help manage your pain appropriately. If you are in pain or discomfort, please tell us. We want to help you to feel comfortable. Good pain control is a partnership between you and your caregivers. Managing your pain will help you recover more quickly.

Our goals:

- Develop a pain relief plan
- Decrease pain to a level that is tolerable
- Determine if pain medication is needed and the appropriate amount
- Develop a plan to transition you off narcotic pain medication

Pain assessment:

- To help us minimize your pain after surgery you will be asked to rate the intensity of your pain through the use of a pain scale of 0-10 (0 is no pain, 10 is excruciating pain).
- Knowing that after surgery 0 is not attainable, a score between 4-5 is an attainable and acceptable score for most patients.
- It is best if you obtain medication when your pain level starts to rise. Do not allow your pain to get severe. If you maintain pain control, it takes less medication and less time to manage the pain.
What to do when you are in pain:

- Your nurse will assess you to be sure your pain relief plan is working before and after an intervention for pain (such as pain medicine or an ice pack).
- Please let your nurse know what your own “comfort-function goal” is—the number where you feel comfortable enough to function.
- When you feel pain, and/or an increase in pain, please notify your nurse.

<table>
<thead>
<tr>
<th>PAIN RELIEF PLAN OPTIONS</th>
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</thead>
<tbody>
<tr>
<td>Heat/Ice</td>
</tr>
<tr>
<td>Assisted Mobility</td>
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<tr>
<td>Pain Medication</td>
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<tr>
<td>Reiki</td>
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<tr>
<td>Massage Therapy</td>
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<tr>
<td>Movies/Audio Books</td>
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<tr>
<td>Music Therapy</td>
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<tr>
<td>Meditation</td>
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</tbody>
</table>

Please tell your nurse if you have any side effects from pain medicine like nausea, itching, constipation or drowsiness. Less medicine throughout the day, as you get better, will decrease most side effects.

**Integrative medicine**

Integrative medicine, which offers compassionate care to heal the mind, body and spirit, integrates alternative/complementary therapies into Western medical practice. Integrative medicine at Hartford Hospital provides pain management and relaxation without the use of medications to improve care and healing.

**Benefits of integrative medicine**

- Pain reduction
- Relaxation and stress reduction
- Relief of muscle spasm and soreness
- Improved range of motion and flexibility
- Improved sleep and digestion
- Increased circulation and tissue healing
- A general sense of well-being
**Diet Information**
Inform your nurse of any dietary restrictions and food allergies or intolerances

**Breathing exercises**
Breathing exercises are an important part of your recovery. After your surgery, you will be encouraged to perform simple lung exercises like deep breathing and coughing after your surgery.

You will be given a device known as an Incentive Spirometer. The nurse will instruct you on how to use this device. It is best to use it 5-10 times every hour when awake for the first few days after surgery surgery, even at home. This will help you to fully expand your lungs by breathing deeply and will prevent fluid collection, pneumonia and fevers.

**Blood clot prevention**
Your nurse will educate you on signs and symptoms of blood clots and what precautions we take to prevent them.

**Sequential compression device**
Also known as pneumatic compression stockings or “pneumo-boots,” these stockings inflate and deflate automatically via a pump at the end of the bed. They assist in the prevention of blood clots by squeezing your calves to help the blood in your legs continue circulating throughout your body. They are worn while you are in bed or sitting in a chair until you are walking frequently.
**Anticoagulation**

Prevention of blood clotting is extremely important after total joint replacement. Different medications are used for anticoagulation.

- Medication by be injected or taken by mouth, depending on the type of anticoagulation your physician orders
- If you are on anticoagulation medication during your hospital stay, your doctor will prescribe this medication or a substitute (such as aspirin), upon transition home.
- Most patients take this medication for about one month after surgery. Do not stop taking your anticoagulation medication until directed by your doctor.

**Aspirin**, the popular pain reliever found in our medicine cabinets, can also be used for blood clot prevention!

**Did you know aspirin could do that?**

- Aspirin prevents blood clots from forming in your body.
- Take Aspirin to prevent blood clots after surgery as directed by your doctor.
- Do NOT stop taking Aspirin until directed by your doctor.
- Do NOT substitute Aspirin for other prescribed anticoagulation medication (i.e. Lovenox®/enoxaparin, Xarelto®, Plavix®)

**Lovenox® (enoxaparin)**

Lovenox® (enoxaparin) is an injection that is prescribed by some practitioners to help prevent blood clots. If your doctor prescribes Lovenox® as an anticoagulant your nurse will educate you on proper use including injection techniques and signs/symptoms of blood clots and excessive bleeding before using this medication at home. You (or your caregiver) will be expected to perform these injections at home.
Cold

- **Cold therapy works with your medications to help decrease postoperative pain**
  Postoperative pain is best managed using a multi-pronged approach, including medications, cold therapy, and mobility. The SMI Cold Therapy Wrap provided to you is an important part of your pain control regimen.

- **Cold therapy is an important part of your rehabilitation plan**
  Using cold therapy after your physical therapy or exercise sessions will help to decrease swelling and increase your comfort.

- **Your SMI Cold Therapy Wrap can be used around the clock**
  Unlike traditional ice therapy packs, your SMI Cold Therapy Wrap can be worn continuously. Every 4 hours, simply exchange the gel packs from the wrap with the two gel packs from your freeze. During each 4 hour period, you will experience 3 ½ hours of continuous cold, followed by a 30 minute break from the cold, allowing your extremity to warm back up. You can even sleep with it on. The wrap can be used for weeks following surgery.

- **Your wrap is designed to be left on, even when you’re walking**

**Cold therapy instructions:**

- Place gel bags in a freezer for at least 4 hours. Once frozen, slide the gel bags into the pouch and secure your wrap to the affected area.

- The gel pouch acts as a protective barrier. NEVER place frozen gel bags directly onto skin; this may cause frostbite injury.

- An additional protective barrier such as clothing, a hand-towel, or pillow case may be placed between your skin and the wrap during prolonged treatment applications.

**SMI Wrap and gel bag care instructions:**

- The wrap can be hand/machine washed and air dried.

- The gel bags should never be heated, unless instructed by your healthcare provider. The bags are designed to last for several months following your surgery.

- The gel pouch and wrap are both latex-free. The gel bag ingredients are non-toxic.

If these instructions differ from your provider’s specific instructions, please follow your provider’s instructions upon transition from the hospital.
Length of stay for shoulder replacement

Your hospital stay will most likely be OVERNIGHT. Occasionally, a patient may need a second night depending upon the surgical procedure and other medical conditions. On a daily basis your provider team will assess your condition and communicate with you your expected date of transition home.

Mobility is medicine!

Research has shown that early mobilization following surgery can decrease complications. Expect mobilization (getting in and out of bed, going to bathroom, transferring to a chair) with assistance from staff, will happen the same day of your surgery.

<table>
<thead>
<tr>
<th>MOBILITY INCLUDES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transfers (includes car transfer training)</td>
</tr>
</tbody>
</table>

Getting started

- Mobility will begin on the same day as surgery
- You will receive a Physical and/or Occupational Therapy evaluation and a customized therapy program will be developed if needed.
- DO NOT get out of bed without the assistance of a healthcare team member for toileting or transfers.
- It is best to take your pain medication PRIOR to your physical therapy session to allow better participation.
Nutrition guidelines

After your procedure you may experience constipation. Fluid and fiber have been the foundation for treatment of constipation. You should gradually increase your fiber and fluid intake over the course of your recovery.

**HOW MUCH FIBER DO I NEED**

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>30–38 grams per day</td>
<td>20–25 grams per day</td>
</tr>
</tbody>
</table>

**Fluid needs**

When increasing your fiber intake you must also increase your fluid intake! Otherwise it could potentially make your constipation symptoms worse. Many people will want some more variety in their fluids instead of plain water. If a beverage contains flavoring it may cause you to drink more. Try the list below to increase your fluids daily:

**FLUIDS OTHER THAN WATER**

- Smoothies
- Non-calorie additives (ex. Crystal Light, Hint, Bai etc)
- Low calorie Sports Drinks (<50 calories /serving)
- Electrolyte Beverages (Propel, NUUN tablets, etc)
- Fruit Infused Water

It is recommend to keep a water bottle with you most of the time, so that you will drink more fluids. Remember the old saying: “out of sight out of mind” that holds true for fluid intake too.
Foods with fiber

Here is a list of variety of foods with fiber. When in doubt look at the nutrition facts label to see how much fiber is in each product. We are aiming for at least 3-5 grams of fiber per serving. Pick and choose from the list below to meet your fiber needs!

### FOOD ITEMS WITH AT LEAST 4 GRAMS OF FIBER

<table>
<thead>
<tr>
<th>Grains</th>
<th>Fruits</th>
<th>Vegetables</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/3 to ½ cup of high fiber cereal (check nutrition facts)</td>
<td>½ cup blackberries/ raspberries</td>
<td>1 artichoke (cooked)</td>
<td>½ cup cooked beans (lima, kidney, black, etc)</td>
</tr>
<tr>
<td>½ cup dry oats (makes 1 cup cooked)</td>
<td>4 dried prunes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### FOOD ITEMS WITH 1 TO 3 GRAMS OF FIBER

<table>
<thead>
<tr>
<th>Grains</th>
<th>Fruits</th>
<th>Vegetables</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 slice of whole wheat bread</td>
<td>1 apple</td>
<td>½ cup beets (diced/canned)</td>
<td>2 Tablespoons almond/ peanuts/ walnuts</td>
</tr>
<tr>
<td>4 whole wheat crackers</td>
<td>½ cup apricots (canned)</td>
<td>½ cup broccoli, brussel sprouts or cabbage (cooked)</td>
<td>1 cup plain popcorn cooked</td>
</tr>
<tr>
<td>1 whole wheat English muffin</td>
<td>1 banana</td>
<td>½ cup carrots</td>
<td>2 TBSP Ground Flaxseed</td>
</tr>
<tr>
<td>1 TBSP of rice/bran/wheat cereal</td>
<td>½ cup of cherries</td>
<td>½ cup cauliflower</td>
<td></td>
</tr>
<tr>
<td>1 packet of oatmeal (flavored or plain)</td>
<td>½ cup of fruit cocktail</td>
<td>½ cup of corn</td>
<td></td>
</tr>
<tr>
<td></td>
<td>½ grapefruit</td>
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<td></td>
</tr>
<tr>
<td></td>
<td>1 kiwi</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 orange</td>
<td>½ cup potatoes (baked)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 peach or ½ cup peaches (canned)</td>
<td>½ cup spinach /kale or turnip greens (cooked)</td>
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<tr>
<td></td>
<td>1 pear or ½ cup pears (canned)</td>
<td>½ cup squash (winter/ summer) (cooked)</td>
<td></td>
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<tr>
<td></td>
<td>1 plum</td>
<td>½ cup zucchini (cooked)</td>
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<tr>
<td></td>
<td>¼ cup raisins</td>
<td>½ cup sweet potatoes or yams</td>
<td></td>
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<tr>
<td></td>
<td>½ cup strawberries</td>
<td>½ cup tomatoes (cooked)</td>
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<tr>
<td></td>
<td>1 tangerine</td>
<td>½ cup canned pumpkin</td>
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Welcome to Hartford HealthCare Bone & Joint Institute

Food and Nutrition Services

Your complete satisfaction is our goal. That’s why we’ve designed a room service dining program for just one person – YOU!

Dining on Call puts you in charge of your meals, allowing you to order what you want to eat for each meal at your convenience.

How does it work?

• Upon arrival you will find a room service menu in your room
• To order your meals simply dial 2-MEAL (2-6325) from 6:15 am–6:15 pm daily to speak directly to a nutrition operator
• The nutrition operator will take your meal selections over the phone and work with you to ensure your selections meet your prescribed diet.
• Together, you will decide on a delivery time for each meal that meets your needs.

In order to make sure the nutritional needs are met for each patient at each meal time, if we have not received a call from you by the times listed below, we will send a meal consisting of our Chef’s Special of the Day.

**Breakfast: call by 7am**
**Lunch: call by 11:30am**
**Dinner: call by 4:30pm**

Please note

If you are on a carbohydrate-control diet, please communicate the meal times you have chosen to a nursing care team member daily.
Transitioning home

Post-hospital plan
Your post-hospital recover begins the day you are discharged from the hospital and go home. For the first four to six weeks following surgery, most patients require and receive some form of therapy – either home care therapy or in an outpatient therapy setting or a combination of these. Regular exercise is an important part of restoring your normal joint motion and strength, and plays a key role in returning you to your normal everyday activities. Your surgeon and therapist will develop a plan that is best for you.

Your total recovery period is about one year in which you will have many follow-up visits with you doctor and therapists. Remember to ask lots of questions along the way and to stay on track with you exercise and diet regimen.

Care for your incision
Monitoring for signs/symptoms of infection is very important. Our nursing team will educate you on proper incision site management. We pride ourselves on having exceptionally low infection rates. It is important to keep your surgical incision protected and free from contamination.

Aquacel surgical dressing
- Please cover while showering until told the incision can get wet by your doctor.
- Leave skin glue alone, let it release on its own.
- No creams, powders or lotions to incision or area around it.
- Do not scrub, soak or submerge your incision until cleared by doctor.

Showering/bathing
- You may shower when your physician instructs you to. When you are able to shower, do NOT rub the incision.
- NO tub baths, hot tubs, spas, or pools
- You may shower with your Aquacel dressing on but do NOT remove dressing

Exercise
Please follow the exercise plan that your doctor and physical or occupational therapist have established for you. Your recovery process and continued health depends on good nutrition, rest and proper exercise.
**Medication instructions**

- Take all medication as prescribed by your doctor. You may need to take your anticoagulation medication for about one month after discharge.
- Many people are discharged home with a prescription for injections to prevent blood clots. It is important that you or a family member learn how to perform these injections prior to leaving the hospital. Home care will not come to your home every day for every dose. You must learn how to perform these injections.
- Remind your physician of any medications you were on before your surgery, that were not prescribed for you after your surgery.
- Remember to check with your physician before you begin taking any over-the-counter medications, herbal remedies, and/or supplements.
- Please get all of your medications filled at the same pharmacy so that your pharmacist can properly identify harmful medication interactions. Ask your pharmacist questions you may have regarding your medications and associated side effects.

**Other important information**

- It is essential that you inform your dentist that you have had a total joint replacement, as you may need prophylactic antibiotics prior to having your teeth cleaned or other dental procedures.
- If you have any surgical procedures following your total joint replacement, inform the physician that you have an implant.

**Don’t forget!**

- It is important that you fully understand your discharge plan to ensure your continued healing, safety, and comfort. You will receive these instructions in writing.
- Before you leave the hospital ask questions about all of your medication, and be sure you know what medications are being prescribed, the proper dosage, how and when to take the medication, and possible side effects.
- Be informed about your health condition (ask the care team if you do not understand any information shared with you) and what you can do to help facilitate your recovery.
- No driving while on narcotic pain medication and return to driving will be decided by your surgeon.

Your instructions may include your follow-up appointments with your orthopedic surgeon and/or other specialists or your primary care physician. If you do not have a follow-up appointment with your surgeon, please make one as soon as you return home.
Activity

Please follow the exercise plan that your doctor, physical therapist and/or occupational therapist have established for you. Your recovery process and continued health depends on good nutrition, rest and proper exercise.

It is important to walk daily for short distances and frequently. There are no limitations to walking; however, you should avoid long distances, power walking, and treadmills. Keep pets away from you when you are walking as they may cause falls or twisting.

Transition calls

You will receive a call from one of our Transition Nurses approximately 24-72 hours after your transition home. The nurse will ask about your pain, your mobility, your bowel regimen and other clinical questions. You will also be asked about your stay: what did we do well? What could we have done better? We are committed to making changes that benefit our patients and we value your voice.

You will also receive a follow-up call approximately 30 days after your surgery date and at 60 days after your surgery.
Home Care services

A Nurse Case Coordinator will meet with you after your surgery to assist in arranging any services ordered by your surgeon. Many patients will need a home visit(s) from a home care nurse, physical therapist or occupational therapist after surgery.

Medicare and most private insurers will pay for home physical therapy when you initially come home from the hospital.

You will be made aware of the scope and frequency of services your insurance has authorized for your homecare provider.

While you have a choice for home care agencies, Hartford Healthcare at Home is an affiliate of Harford Healthcare and works collaboratively with the Bone & Joint Institute team.

Rehabilitation at Home

Focus of rehabilitation:

1. Strength        2. Functional mobility        3. Achieving your goals of recovery

What to expect if your physician orders home care services:

- A phone call from your home care agency to schedule times of visits EITHER the same day as discharge from hospital or the following morning
- A initial visit (RN or PT) to assure full assessment of safety, medical and functional status
- Home care services will be provided, on average, 1-2 weeks
- Transition to outpatient rehabilitation as appropriate

What you need

- Additional support at home to assist with activities
- Your medication, equipment, insurance information and caregiver available (in person or by phone) especially on initial visits
- Transportation to get to appointments
- Dedication to your rehabilitation
- Goal for your recovery

Dedicate yourself to your rehabilitation

- Get dressed!
- Get moving!
- Be part of your care plan and partner with your care team!

Thank you for choosing the Hartford HealthCare Bone & Joint Institute at Harford Hospital!
Hartford HealthCare at Home

Hartford HealthCare at Home (Affiliate of Harford HealthCare) provides a partner in your quickest and safest recovery, at home.

What should you anticipate?

- A visit from our transitional care coordinator in the hospital following your surgery to discuss your goals of recovery and plan for transition home
- Initiation of a home visit within 24 hours of discharge, 7 days a week
- An initial visit (RN or PT) to assure full assessment of safety, medical and functional status
- Collaboration with you and your physician in your goals of care
- Consultative services available for Hartford HealthCare at Home programs and service lines as desired
- Discussion of Insurance benefits and copayments required

You will be made aware of the scope and frequency of services your insurance has authorized for your homecare provider.

If needed, home care services will be provided, on average for a period of 1-2 weeks with a transition to outpatient rehabilitation as appropriate. Hartford HealthCare Rehabilitation Network locations will be provided by your homecare therapy team.

Call 1.800.HOMECARE (1.800.466.3227) for more information or to pre-arrange services.

1.800.HOMECARE

Hartford HealthCare at Home
How well are YOU RECOVERING today?

EVERY DAY
Follow your exercise plan
Take your medications as prescribed
Eat healthy meals

RED LIGHT—STOP/EMERGENCY
Go to the Emergency Department or call 911 if you have any of the following:
• Difficulty breathing or shortness of breath
• Chest pain
• Localized chest pain with coughing or when taking a deep breath

YELLOW LIGHT—CAUTION
Call your surgeon’s office or home care agency if you have any of the following:
• Fever of 101.0° or higher
• Uncontrolled shaking or chills
• Increased redness, heat, drainage or swelling in or around the incision
• Increased pain or significant decrease in motion during activity and at rest
• Increased swelling, pain or tenderness of the thigh, calf, ankle or foot
• Abnormal bleeding or any kind, such as increased bleeding from the incision, nosebleed, etc.
• Blood in the urine

GREEN LIGHT—ALL IS GOOD
When your symptoms are under control you experience:
• No difficulty breathing or flu-like symptoms
• No chest pain
• No abnormal bleeding or drainage from incision site
• Slight pain and swelling expected during healing process
Preparing for surgery checklist
PREPARE program

To complete before surgery:
Our PREPARE program will help you gather and complete the necessary information required prior to surgery. This includes:

1. Medical clearance (within 30 days of surgery)
   - History & Physical
   - Lab/blood work
   - EKG

2. Specialist clearance (If you currently see a specialist)
   - Cardiologist (Heart)
   - Pulmonologist (Lung)
   - Endocrinologist (Diabetes)

3. Important paperwork
   - Medication Reconciliation (Please have your medication list ready)
   - Clinical profile/history
   - Anesthesia Questionnaire
   - Surgical Consent Form
   - Insurance Verification

4. Total Joint Education Webinar Attendance
   - Date: _____/_____/_____ (continued next page)

5. Discharge planning
   - Our goal is for you to recover as soon as possible in the comfort of your own home. Your discharge from the hospital should be to go home with home care services. On rare occasions, a skilled nursing facility may be recommended and authorization from your insurance company may be needed. Since more than 80% of our patients will be going directly home, you need to discuss your post-hospital plan with your doctor and family PRIOR to your surgery.

6. Going home
   - Be sure you have all recommended equipment
   - Arrange for transportation from hospital for next day discharge
   - Please have your support person with you to review discharge instructions with your care team.

(continued next page)
Post-acute skilled nursing facility

- Facilitated by nurse case coordinators
- Insurance authorization may be needed for a skilled nursing facility. Authorization cannot be obtained until AFTER your surgery and you have been evaluated by physical therapy and your medical team.
- Transportation from hospital for 11 am discharge

7. Home planning and preparation

- **Sleeping arrangements:**
  Many patients are more comfortable sleeping in a sitting or reclining position after surgery. Having extra pillows available after surgery can be helpful.

- **Decrease fall risk:**
  Remove all throw rugs, loose rugs, electrical cords and clutter from hallways/walking areas. These pose a risk for falling.

- **Out of reach objects:**
  - Check your cabinets for items you routinely use and place them at a level where you will not need to bend or get on a step stool to reach them.
  - Prepare an area for supplies you will need, such as a telephone, TV remote control, radio, tissues, medication, reading materials, etc.

- **Safety bars/rails:**
  Install safety bars in the shower and rails for all stairs (inside & outside) as needed. Do not use suction cup grab bars.

- **Durable medical equipment (DME):**
  You will receive recommendations for equipment prior to admission and prior to transitioning home from your care team.

- **DME insurance coverage:**
  Verify that your necessary DME is covered by insurance.

- **Pets:**
  Make preparations for pets that may be underfoot.

- **Recovery games and entertainment**
  Consider activities that you will be able to engage in during your recovery such as books, movies/DVDs, etc.

- **Company:**
  Make arrangements to have a family member or friend stay with you once you return home for the first few days.
Shoulder exercises

PLEASE NOTE: Your occupational therapist will discuss with you what exercises you are allowed to do AFTER surgery.

You are able to perform all of these exercises (to the best of your ability) PRIOR to surgery. This will aid with muscle memory and help your rehabilitation after surgery.

**Pendulums**

Stand while holding onto a counter or table. Let your operated arm hang down.

Use your body weight to swing it forward then backward.

**Pendulums alternate**

Stand while holding onto a counter or table. Let your operated arm hang down.

Swing your arm in a clockwise circular motion, then try it in a counter-clockwise direction.
Hand & wrist exercises

Finger flexion/extension
Open your hand, spreading your fingers wide. Then curl your fingers into a fist position.

Elbow flexion/extension
- Place your arm on the arm rest with your palm facing up.
- Slowly bend your elbow as far as you can, then bring it back down to the starting position.

Wrist flexion/extension
- Place your arm on the arm rest with your palm facing down, and then flex your wrist up and down.
- Next, turn your arm so that your palm is facing up and flex your wrist up and down.
Lodging near Hartford Hospital

Hudson Suites at the Education & Resource Center
560 Hudson Street
Hartford, CT 06102
860.545.1111

Twelve hotel-like guest rooms on Hartford Hospital’s main campus are available to patients and their families for overnight and short-term stays at modest cost. These units are perfect for patients undergoing early morning surgery or family members who need to be close by and offer an alternative to more costly or less convenient living arrangements.

The Hudson Suites are located on the third floor of the west wing of the Education and Resource Center at 560 Hudson Street, across the street from the 85 Jefferson Street entrance to the hospital.

Features

Each room contains a double bed. Some feature a pull-out sofa to accommodate additional family members. A handicapped-accessible suite is available. Linens, towels, housekeeping services and reservations are provided through Hartford Hospital.

- All private baths
- Telephones with voice mail
- Air conditioning
- Coffee makers
- Easy access to the hospital
- Security guard in lobby 24 hours/day
- Nearby parking
- Cable TV
- Radio alarm clocks
- Refrigerator
- Sitting areas
- Easy access to the hospital cafeteria during regular hours of business
- Local restaurants are listed in each room. (Some deliver.)
- A central snack area is available 24 hours/day

Rates & reservations

- There is a $75 charge for each room
- Rates are per room per night
- We require a credit card on file
- We accept Visa, MasterCard, American Express, Discover, cash, and personal check
- Secured parking is available at an additional cost. When you arrive at the Education and Resource Center at 560 Hudson Street, the security guard at the desk inside will direct you to the hospital garage.
- Weekly and monthly parking passes are available at the Hartford Hospital Cashiers Office from 8am to 4pm or the Hartford Hospital Auxiliary Store.
- Check-in time is 2pm to 11pm; other times by special arrangement.
- Check-out time is 11am, or later by special arrangement.
- Unfortunately, we cannot make baby-sitting arrangements for children. Children may not be left alone in the rooms.
- We regret we cannot accommodate pets.
Other Hartford area lodging

Hampton Inn
351 Pitkin Street
East Hartford, CT 06108
860.282.2500

Hilton Garden Inn Glastonbury
85 Glastonbury Boulevard
Glastonbury, CT 06033
860.659.1025

Hilton Garden Inn
555 Corporate Drive
Windsor, CT 06095
860.688.4600

Holiday Inn Express Downtown
440 Asylum Street
Hartford, CT 06103
860.246.9900

Holiday Inn Express Hotel & Suites Brainard Road
185 Brainard Road
Hartford, CT 06114
860.525.1000
## Home safety checklist

### ENTRANCE

<table>
<thead>
<tr>
<th>POTENTIAL HAZARD</th>
<th>YES</th>
<th>NO</th>
<th>RECOMMENDATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are step surfaces non-slip?</td>
<td></td>
<td></td>
<td>Add adhesive-backed sandpaper stripping</td>
</tr>
<tr>
<td>Are step edges visually marked to avoid tripping?</td>
<td></td>
<td></td>
<td>Add strips of tape in a contrasting color to the edge of each step.</td>
</tr>
<tr>
<td>Are there handrails on the stairs or ramp?</td>
<td></td>
<td></td>
<td>Add handrails at the appropriate height.</td>
</tr>
<tr>
<td>Is there adequate outdoor lighting?</td>
<td></td>
<td></td>
<td>Add lighting as appropriate.</td>
</tr>
<tr>
<td>Do you keep outdoor walkways, steps, and porches free of wet leaves and snow?</td>
<td></td>
<td></td>
<td>Remove wet leaves and snow as necessary. Put down salt, kitty litter, and/or de-icers as necessary.</td>
</tr>
<tr>
<td>Do you sprinkle icy outdoor areas with de-icers as soon as possible after a snow fall or freeze?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### BATHROOM

<table>
<thead>
<tr>
<th>POTENTIAL HAZARD</th>
<th>YES</th>
<th>NO</th>
<th>RECOMMENDATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is the path from the bedroom to the bathroom dark?</td>
<td></td>
<td></td>
<td>Use nightlights in the bedroom, hallway, and bathroom.</td>
</tr>
<tr>
<td>Is the bathtub or shower floor slippery?</td>
<td></td>
<td></td>
<td>Install non-slip decals or a rubber mat.</td>
</tr>
<tr>
<td>Is it difficult to get on and off the toilet?</td>
<td></td>
<td></td>
<td>It may be helpful to raise the seat and/or install handrails.</td>
</tr>
<tr>
<td>Is it necessary to reach far or turn around to get towels, shampoo, or soap?</td>
<td></td>
<td></td>
<td>Keep supplies in an easy to reach receptacle, or in a storage unit that attaches to the tub or shower wall.</td>
</tr>
<tr>
<td>Is it difficult to enter the shower because you have to step over your tub?</td>
<td></td>
<td></td>
<td>Purchase and extended tub seat so that you can sit down and swing your legs over the edge to enter the tub.</td>
</tr>
</tbody>
</table>

### BEDROOM

<table>
<thead>
<tr>
<th>POTENTIAL HAZARD</th>
<th>YES</th>
<th>NO</th>
<th>RECOMMENDATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is it necessary to get out of bed to reach a light, the telephone, or your eyeglasses?</td>
<td></td>
<td></td>
<td>Place a lamp, telephone and your eyeglasses within reach of the bed. Consider attaching a light to your headboard and/or using a cordless phone.</td>
</tr>
<tr>
<td>Is there clutter (clothes, shoes, books, newspapers) on the floor?</td>
<td></td>
<td></td>
<td>Remove clutter to ensure a obstacle-free paths within and between rooms.</td>
</tr>
<tr>
<td>Do you get up during the night to use the bathroom?</td>
<td></td>
<td></td>
<td>Place a portable commode near your bed to eliminate nighttime trips to the bathroom.</td>
</tr>
</tbody>
</table>

### LIVING ROOM

<table>
<thead>
<tr>
<th>POTENTIAL HAZARD</th>
<th>YES</th>
<th>NO</th>
<th>RECOMMENDATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do carpets, rugs and floor coverings have frayed corners or rolled-up edges?</td>
<td></td>
<td></td>
<td>Remove damaged floor coverings or secure them with non-skid backing.</td>
</tr>
<tr>
<td>Are there throw rugs in walkways?</td>
<td></td>
<td></td>
<td>It is best to remove throw rugs or put non-skid backing on them.</td>
</tr>
<tr>
<td>Are chairs and sofas low to the ground?</td>
<td></td>
<td></td>
<td>Use furniture with higher, firm seats and armrests to safely ease into sitting or rise from chairs or sofa.</td>
</tr>
<tr>
<td>Do you need to walk around furniture to get through the living area?</td>
<td></td>
<td></td>
<td>Rearrange furniture to have a straight path, free of obstacles.</td>
</tr>
<tr>
<td>Do you have to reach up to pull cords to lights and/or ceiling fans?</td>
<td></td>
<td></td>
<td>Install longer cords or link ceiling lights/ fans to a switch on the wall. This eliminates the need to look up and reach.</td>
</tr>
</tbody>
</table>
# Home safety checklist

<table>
<thead>
<tr>
<th>KITCHEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>POTENTIAL HAZARD</td>
</tr>
<tr>
<td>Is it necessary to reach far, bend over, or climb on a stool to get commonly used items and foods?</td>
</tr>
<tr>
<td>Is there liquid, food, grease, or clutter on the floor?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OUTDOOR AREAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>POTENTIAL HAZARD</td>
</tr>
<tr>
<td>Are walks and driveways on your property free of cracks and breaks?</td>
</tr>
<tr>
<td>Are lawns and gardens free of holes?</td>
</tr>
<tr>
<td>Do you put away garden tools and hoses when they’re not in use?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OTHER</th>
</tr>
</thead>
<tbody>
<tr>
<td>POTENTIAL HAZARD</td>
</tr>
<tr>
<td>Do you have light switches near every doorway?</td>
</tr>
<tr>
<td>Do you have light switches at both the tops and bottoms of stairways?</td>
</tr>
<tr>
<td>Do you have securely fastened handrails that extend the full length of the stairs on both sides?</td>
</tr>
<tr>
<td>If young grandchildren visit, are you alert for children playing on the floor or toys left in your path?</td>
</tr>
<tr>
<td>If you have pets, are you alert for sudden movements across your path of pets getting underfoot?</td>
</tr>
<tr>
<td>When you carry bulky packages, do you make sure they don’t obstruct your vision?</td>
</tr>
<tr>
<td>Do you take time to get your balance when you change position from lying down to sitting and from sitting to standing?</td>
</tr>
<tr>
<td>Do you keep yourself in good condition with moderate exercise, good diet, adequate rest, and regular medical checkups?</td>
</tr>
<tr>
<td>If you wear glasses, is your prescription up to date?</td>
</tr>
<tr>
<td>If you live alone, do you have daily contact with a friend or neighbor?</td>
</tr>
</tbody>
</table>
For more information please call: 860.972.2245 or visit: BoneAndJointInstitute.org