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Dear Patient:

On behalf of the HHC BJI 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 care to ensure the highest quality experience for you. 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, during and after surgery. Planning tools, advice on medications, diet, and exercise 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,

Theodore A. Blaine, MD
Physician in Chief
Hartford Healthcare Bone & Joint Institute
## Important Phone Numbers

Your Surgeon:

Your Medical Doctor:

<table>
<thead>
<tr>
<th>Service</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bone &amp; Joint Institute</td>
<td>860.972.6533</td>
</tr>
<tr>
<td>Directions &amp; Parking Information</td>
<td></td>
</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>
</tr>
<tr>
<td>Surgery Time-Line</td>
<td>860.972.6754</td>
</tr>
<tr>
<td>Integrative Medicine</td>
<td>860.972.4444</td>
</tr>
<tr>
<td>Diabetes LifeCare</td>
<td>860.972.3526</td>
</tr>
<tr>
<td>HHC Bariatric Program</td>
<td>860.246.2071</td>
</tr>
<tr>
<td>BJI 4th Floor</td>
<td>860.972.6670</td>
</tr>
<tr>
<td>BJI 5th Floor</td>
<td>860.972.6360</td>
</tr>
<tr>
<td>Food and Nutrition</td>
<td>860.972.2604</td>
</tr>
<tr>
<td>Nurse Manager</td>
<td>860.972.6769</td>
</tr>
<tr>
<td>Patient Relations</td>
<td>860.972.1400</td>
</tr>
<tr>
<td>Hudson Suites</td>
<td>860.545.1111</td>
</tr>
</tbody>
</table>

Guest suites/overnight accommodations
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 Ge. 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 1-91 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.
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 90 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)
- A family member or friend to accompany you if possible

(continued next page)
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- and post-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 20A | 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 St.

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 Class 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 classes. It would be beneficial to have a family member or friend that is going to assist you in your post-op recovery attend the class with you.

The education class 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 classes are held weekly at the BJI Ambulatory Services Building, 31 Seymour Street, Hartford, 4th Floor Auditorium. Please call to make a reservation before attending class by calling 860.545.1888.
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) <em>(How much do you take?)</em></th>
<th>Frequency <em>(How often do you take it?)</em></th>
<th>Reason for medication</th>
<th>Prescribing Doctor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example:</td>
<td>Lisinopril 10mg oral tablet 1 orally once daily Hypertension Dr. Smith</td>
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<td></td>
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</tr>
</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 one (1) week prior to surgery. Also, please inform your healthcare team of any alcohol intake. Alcohol may interfere with certain medications you will be prescribed. Additionally, serious harm can result from alcohol withdrawal when not properly managed.

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. Since you will be having a surgery that affects your legs it is important to strengthen your upper body and core to improve your ability to move after surgery.
Home Planning and Preparation

It is a good idea to prepare your home for your hospital discharge BEFORE you go to the hospital. The following is a list of suggested items that may be recommended to help you during your surgical recovery.

- Check with your insurance plan to verify which items are covered.
- You may find these items at medical supply companies or some stores like Walmart or online (Amazon). Many town senior centers have DME lending programs.
- In the unlikely event that you are going to a nursing facility with a rehabilitation program, the facility will order the equipment for you.
- If you are unable to obtain the needed equipment prior to your surgery, the nurse case coordinator will assist in ordering your equipment. You may be responsible for any co-pays or for the full cost of the equipment if it is not covered by your insurance.

<table>
<thead>
<tr>
<th>Durable Medical Equipment (DME)</th>
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</thead>
<tbody>
<tr>
<td>Personal Aids</td>
</tr>
<tr>
<td>Walker w/2 wheels</td>
</tr>
<tr>
<td>Elastic shoe laces</td>
</tr>
<tr>
<td>Long-handled reacher/grabber</td>
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<tr>
<td></td>
</tr>
</tbody>
</table>
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 11 am 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 860.972.6754.

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.

Purchase Hibiclens at the local pharmacy.
If you do not see it on the shelf, ask the pharmacist if they carry it.
It may need to be ordered so please keep this in mind.

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 Hibiclense onto the cloth and wash from your NECK DOWN. Scrub gently – focusing on the area of surgery
  * Do not use Hibiclense near your eyes, ears, or private parts to avoid permanent injury to those areas.
- Leave the Hibiclense 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 Hibiclense 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 Hibiclense soap
- Using a clean, wet, washcloth, pour some Hibiclense onto the cloth and wash from your NECK DOWN. Scrub gently – focusing on the area of surgery
  * Do not use Hibiclense near your eyes, ears, or private parts to avoid permanent injury to those areas.
- Leave the Hibiclense 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 Mask & Machine for patients with Sleep Apnea
  • If you do not bring your machine, please bring your CPAP/BiPAP settings
✔ 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 family/friend will be asked to wait in the waiting lounge located on the third floor while the nurse prepares you for surgery. Please note that no food or drink is allowed for visitors in the pre-operative area.
- Your preoperative nurse will start your intravenous (IV), ask questions and perform a physical assessment.
- Only one (1) family member/friend will be allowed to join you in the pre-operative area while you wait to go to surgery but that individual must be at least 18 years old.
- 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.

Duration of Surgery:

Your surgery will last approximately 2-3 hours. If you are having bilateral joint replacement it may be 1-2 hours longer.
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.
- Visitors are limited to one (1) family member/friend at a time for approximately 5 minutes at a time. It is recommended that family members and friends wait to visit their loved ones until they are settled in their hospital room on the 4th or 5th floor.

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 takes 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 the pain intensity is higher than your comfort-function goal, we will try to help you feel better.

<table>
<thead>
<tr>
<th>PAIN RELIEF PLAN OPTIONS</th>
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<tbody>
<tr>
<td><strong>Pain Management</strong></td>
</tr>
<tr>
<td>Heat/Ice</td>
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<tr>
<td><strong>Pain Management</strong></td>
</tr>
<tr>
<td>Reiki</td>
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<tr>
<td>Music Therapy</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

You may find an intervention such as Reiki, massage, guided imagery or acupuncture beneficial. Ask a clinical team member for more information on these offerings.
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. 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.
Length of Stay for Total Joint Procedures

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>
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<tbody>
<tr>
<td>Transfers (includes car transfer training)</td>
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</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.
- DO NOT get out of bed without the assistance of a healthcare team member for toileting or transfers until you are cleared to safely do so.
- It is best to take your pain medication PRIOR to your physical therapy session to allow better participation.
Transitioning Home

Post-Hospital Plan
Your post-hospital recovery 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
- You may shower after three (3) days if no drainage is present with Aquacel dressing in place.
- 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

- Swelling is not uncommon after total joint surgery. Elevation, ice and motion are helpful in decreasing the swelling. You should elevate your ankles above your heart during the day to decrease swelling. If swelling persists, call your doctor.

- 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.*
60-Day Follow-up Phone Call

A member of our quality team will follow up with you regarding the following topics during your 60-Day follow-up phone call. Feedback from this call will help us improve our program.

- Your surgical recovery
- Pain management and medication use
- Walking and mobility
- Return to work/driving
- Complications & re-admissions
- Staff feedback

Home Care Services

- Will conduct a home visit within 24 hours of discharge
- Provide care on weekends

Medicare and most private insurers will pay for daily 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. Most insurers will initially allow for 4-6 days/week of rehabilitation services, but your specific plan will be discussed with you upon initiation of your home care services.

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. Range of motion (ROM)
3. Functional mobility
4. Achieving your goals of recovery

Home care services will be provided, on average for a period of 1-2 weeks with a transition to outpatient rehabilitation as appropriate. Your orthopedic surgeon will determine your needs for outpatient rehabilitation services.

What To Expect:
- 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 2-hour 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 diligent about your home exercises!
- 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!
Hip Precautions following Total Hip Replacement

- Don’t cross your legs at the knees for at least 8 weeks
- Don’t bring your knee up higher than your hip
- Don’t lean forward while sitting or as you sit down
- Don’t try to pick up something on the floor while you are sitting
- Don’t turn your feet excessively inward or outward when bending down
- Don’t reach down to pull up blankets when lying in bed
- Don’t bend at the waist beyond 90°
- Don’t stand pigeon-toed
- Don’t kneel on the knee of the non-operated leg (the good side)
- Don’t use pain as a guide for what you may or may not do
- Don’t sit in a low chair, soft chair or sofa
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 ER 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 above 101.0°
- 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 Class Attendance
   - Date: _____/_____/_____

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 11 am discharge

OR

(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:**
  If your bedroom is upstairs, you may need to set up a temporary sleeping area on the first floor. Stairs are not impossible but are difficult until you have full mobility.

- **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.

- **Proper hip alignment:**
  Have extra pillows or pads for chairs, sofas, and automobile seats to elevate the seat to insure proper hip alignment (not greater than 90°).

- **Safety bars/rails:**
  Install safety bars in the shower and rails for all stairs (inside & outside) as needed.

- **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.
To Improve My Health Before Surgery:

- I have stopped smoking to help improve my healing and recovery.
- I eat healthy, balanced meals. I have also increased my fluid intake.
- My dental care has been completed prior to surgery.
- My diabetes has been checked and is in control.

What to Bring to the Hospital:

- Two forms of identification (picture ID and insurance cards)
- Eyeglasses, hearing aids, denture cases
- Loose clothing (shorts) and slip resistant shoes
- CPAP/BiPAP mask and machine
Resources

1. Top 10 Things to Know About Surgery at the Bone & Joint Institute
2. Hartford HealthCare at Home
3. Exercises After Your Joint Replacement Surgery
4. Bone & Joint Dining on Call (Food & Nutrition Program)
5. Home Safety Checklist
6. Notes Section
7. Center for Medicare Services (CMS) Website: https://www.cms.gov/medicare
8. Bone and Joint Website Link: Boneandjointinstitute.org
Top 10 Things to Know About Surgery at BJI

1. Participate in our PREPARE program
2. Attend the Total Joint Replacement Education Class
3. Prepare and plan for your arrival home
4. Complete an updated medication list
5. Complete our “Preparing for Surgery Checklist”
6. Know what to bring and what NOT to bring to the hospital
7. Do your part to help optimize your surgical recovery
8. Understand the signs/symptoms of a healthy recovery
9. Follow your rehabilitation, exercise, and physical therapy program daily
10. Review and understand the topics reviewed during your 60-Day Follow-Up phone call
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
- A 2-hour 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. Most insurers will initially allow for 4-6 days/week of rehabilitation services, but your specific plan will be discussed with you upon initiation of your home care services.

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.
Exercise – After Your Joint Replacement

One of the most important ways you can help speed your recovery and increase mobility after your knee or hip replacement is to complete your exercises and to challenge yourself a little bit each day. This booklet will help you strengthen and improve the muscles around your new hip or knee. Typically, you will complete 10 to 15 repetitions of each exercise two to three times each day. While you will be focusing on the leg with the hip or knee replacement, you might want to do the exercises with both legs. Follow all of the precautions outlined here and explained to you by your therapist, and remember to breathe in deep, regular breaths.

**Quad Sets**

While lying on your back in bed, press your knee into the mattress and tighten your muscle on the top of your thigh. Hold for a count of 5-10 seconds.

**Ham Sets**

While lying on your back in bed, keep your affected leg bent and the other leg straight. Tighten the muscle on the back of your affected leg. Push the heel down into the bed with the affected leg. Hold for 5 seconds.

**Gluteal Sets**

While lying on your back in bed, squeeze your buttock muscles together and hold for a count of 5-10 seconds.

**Heel Slides**

While lying on your back in bed, bend your knee and slide your heel to your buttock. Slide it back out straight. Tie a plastic bag around your foot if it makes the foot easier to slide.

**Straight Leg Raises**

While lying on your back in bed, tighten your thigh muscles and lift the leg up several inches off the bed. Keep your knee straight and toes pointed up. Hold the leg up for 5-10 seconds and then lower it back onto the bed. Do not continue if this hurts your lower back.

**Lying Knee Extension**

Lie on your back in bed. Place a towel rolled up or in a ball under the lower part of your thigh. Lift your foot and straighten knee. Do not raise your thigh off the rolled up towel or ball.
Sitting Knee Extension
While sitting in a chair with your back against the chair back, straighten your knee and hold for a count of five to 10 seconds. Lower your leg back down to the floor.

Ankle Pumps
While sitting in a chair or lying on your back in bed, straighten your knee and slowly push your foot forward and backward. Repeat 20 times with both ankles, every hour while away.

Heel Raises
While standing up, hold on to the back of a chair. Raise up on your toes.

Toe Raises
While standing up, hold on to the back of a chair. Lean body weight onto your heels. Toes should be off the ground. Slowly lower toes back to the ground.

Standing Knee Flexion
While standing up, hold on to the back of a chair. Bend your knee back behind you. Slowly lower it back to the ground.
Knee Raises
While standing up, hold on to the back of a chair. Raise one knee at a time as if marching in place. Do not lift your knee higher than your waist. Hold your knee up for 2-3 seconds. Slowly lower it back to the ground.

Standing Hip Abduction /Adduction
While standing up, hold on to the back of a chair. Move one leg out to the side. Keep hip, knee, and foot pointed straight forward. Slowly lower it back down to the ground.

Standing Hip Extensions
While standing up, hold on to the back of a chair. Bring your leg backwards as far as you can. Keep your knee straight.

Mini Squats
While standing up, place your back against a wall. Slide down the wall until your knees are bent at 30-45 degrees. Slowly raise up to the straight position.
Exercise – After Your Hip Replacement

Preventing Dislocation

Your therapist will work closely with you and teach you precautions about your hip replacement. It is important to keep these precautions in mind as you do the exercises that will help you strengthen the muscles and adjust to your new hip. Follow these precautions until your surgeon indicates that changes in the following activities depicted below are safe.

- Do not bend forward more than 90 degrees
- Do not lift your knee higher than your affected hip
- Do not bring legs together or cross your legs
- Do not turn your affected leg inward
- Do not twist your body when standing
- Do not reach across your affected leg
- Do not put more weight on your affected leg than instructed

Setting milestones will help you keep track of your improvement and help keep you motivated to move to the next level.

By the end of the week two you should be able to:
- Walk at least 500 feet or more with your walker, crutches or cane as instructed.
- Go up and go down 12-14 steps with a rail, one foot at a time, as tolerated
- Bend your hip 90 degrees
- Straighten your hip completely by lying flat for 30 minutes several times per day
- Shower and dress by yourself. (with adaptive equipment if you had your hip replaced)
- Gradually resume light home duties with help as needed

By the end of week four you should be able to:
- Complete any remaining goals for week 1-2
- Walk the distance of 4 blocks or greater without an assistive device
- Go up and go down 12-14 steps with a rail more than once per day
- Bend your hip to 90 degrees unless told otherwise
- Resume all light home duties with help as needed without bending forward beyond 90 degrees unless cleared by your doctor
By the end of week six you should be able to:

- Complete any remaining goals from weeks 1-4
- Walk without an assistive device for 4 or more blocks
- Go up and down stairs – with a rail – from one foot to another in a normal fashion
- Bend your hip to 90 degrees
- Resume all light home duties by yourself
- Return to light work duties if approved by your surgeon

By the end of week twelve you should be able to:

- Complete any remaining goals from weeks 1-6
- Walk independently without a limp
- Go up and down stairs with a rail
- Resume all home duties and low impact activities

Complete 10 to 12 Repetitions of each exercise 2 to 3 times per day working up to 20 repetitions as tolerated

**Lying Hip Abduction /Adduction**

While lying on your back in the middle of the bed, slide affected leg out to the side as far as you can. Keep your knee straight and toes pointed up. Slide it back to the center. Tie a plastic bag around your foot if it makes the foot easier to slide.

**Side Lying Hip Abduction**

Place two pillows between your knees and turn to your unaffected side. Tighten the thigh muscle of your affected leg. Lift the leg 8-10 inches up from the pillow

**Single Leg Step-Up**

While standing on the bottom step, hold on to the stair rail. Slowly lower one leg to the floor. Body weight should be supported by the leg on the floor. Slowly straighten the leg on the step. Body weight should be supported by the leg on the step.

*Ask your therapist when you are ready to start this exercise.*
Exercise – After Your Knee Replacement

Knee Replacement Exercises

One of the most important ways you can help speed your recovery and increase your mobility after your knee replacement is to complete your exercises and to challenge yourself a little bit each day. The exercises you will learn with your therapist and outlined in this booklet will help you strengthen and improve the muscles around your new knee and will help you gain mobility in your knee. Typically, you will perform your exercises 10 to 20 times, 2 to 3 times each day. While you will be focusing on the leg with the knee replacement, you might want to do the exercises with both legs. Follow all of the precautions, and remember to breathe in deep, regular breaths.

Setting milestones will help you keep track of your improvement and help keep you motivated to move to the next level.

By the end of **week two** you should be able to:

- Walk 500 feet or more independently, with your walker, crutches, or cane as instructed
- Go up and go down 12-14 steps with a rail as tolerated
- Bend your knee 90 to 105 degrees
- Straighten your knees completely by lying flat for 30 minutes several times per day, place a towel under your ankle
- Shower and dress by yourself
- Gradually resume light home duties with help as needed

By the end of **week four** you should be able to:

- Complete any remaining goals from week 1-2
- Walk the distance of 4 blocks
- Go up and go down 12-14 steps with a rail more than once per day
- Bend your knee to 105 degrees or more
- Straighten your knee by placing your foot on a stool for half an hour several times a day
- Resume light home duties with help as needed

By the end of **week six** you should be able to:

- Complete any remaining goals from weeks 1-4
- Walk the distance of 4-8 blocks or more
- Go up and down stairs with a rail
- Resume all light home duties by yourself
- Return to light work duties if approved by your surgeon
By the end of **week twelve** you should be able to:

- Complete any remaining goals from weeks 1-6.
- Walk independently without a limp the distance of 8 - 16 blocks or more.
- Go up and down stairs with a rail.
- Bend your knee 105 degrees or more.
- Straighten your knee by placing your foot on a stool for half an hour several times a day.
- Resume light home duties with help as needed.
- Resume all work duties and low impact activities.

**Complete 10 to 12 repetitions of each exercise 2 to 3 times per day working up to 20 repetitions as tolerated.**

**Downward Kneecap Push**

With thumbs on upper border of kneecap, gently push kneecap toward foot.

**Upward Kneecap Pull**

With thumbs on lower border of kneecap, gently pull kneecap toward hip.

**Sitting Knee Extension with Stool**

While sitting in a chair, place the foot of your affected leg on top of another chair, seat or stool. Press your knee down and hold for 30 seconds. Repeat 10 times, 2-3 times per day.

**Sitting Knee Flexion**

While sitting in a chair, scoot a little forward. Place a belt or towel under your foot while holding the edges in your hands. Bend your knee as far as you can with the belt or towel. Scoot forward a little more to feel more of the stretch at your knee. Hold for 30 seconds.
Welcome to Hartford Hospital 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 7:00am
  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.
## 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

## Kitchen

<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 reach far, bend over, or climb on a stool to get commonly used items and foods?</td>
<td></td>
<td></td>
<td>Arrange cupboards and drawers so that frequently used items are stored waist high. Use a sturdy step stool with a grab bar (never a chair) to reach overhead items.</td>
</tr>
<tr>
<td>Is there liquid, food, grease, or clutter on the floor?</td>
<td></td>
<td></td>
<td>Sweep often and wipe up spills immediately.</td>
</tr>
</tbody>
</table>

## Outdoor Areas

<table>
<thead>
<tr>
<th>POTENTIAL HAZARD</th>
<th>YES</th>
<th>NO</th>
<th>RECOMMENDATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are walks and driveways on your property free of cracks and breaks?</td>
<td></td>
<td></td>
<td>Patch unsafe areas on driveway and walks to avoid tripping.</td>
</tr>
<tr>
<td>Are lawns and gardens free of holes?</td>
<td></td>
<td></td>
<td>Patch areas or avoid entering these areas if unsafe.</td>
</tr>
<tr>
<td>Do you put away garden tools and hoses when they're not in use?</td>
<td></td>
<td></td>
<td>Always store tools in their appropriate places to avoid floor clutter.</td>
</tr>
</tbody>
</table>

## Other

<table>
<thead>
<tr>
<th>POTENTIAL HAZARD</th>
<th>YES</th>
<th>NO</th>
<th>RECOMMENDATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you have light switches near every doorway?</td>
<td></td>
<td></td>
<td>Add lighting to improve visibility at thresholds and flooring changes.</td>
</tr>
<tr>
<td>Do you have light switches at both the tops and bottoms of stairways?</td>
<td></td>
<td></td>
<td>Add lighting to improve visibility on stairs.</td>
</tr>
<tr>
<td>Do you have securely fastened handrails that extend the full length of the stairs on both sides?</td>
<td></td>
<td></td>
<td>It is important to make sure handrails are the full length of the stairs to avoid over reaching.</td>
</tr>
<tr>
<td>If young grandchildren visit, are you alert for children playing on the floor or toys left in your path?</td>
<td></td>
<td></td>
<td>Keep all floors clean of toys.</td>
</tr>
<tr>
<td>If you have pets, are you alert for sudden movements across your path of pets getting underfoot?</td>
<td></td>
<td></td>
<td>Keep pets out of very narrow/small spaces. Keep pet food dishes in an easily accessible area.</td>
</tr>
<tr>
<td>When you carry bulky packages, do you make sure they don’t obstruct your vision?</td>
<td></td>
<td></td>
<td>Divide large loads into smaller ones whenever possible.</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>
<td></td>
<td></td>
<td>If you feel dizzy upon sitting wait one full minute after dizziness passes before you stand.</td>
</tr>
<tr>
<td>Do you keep yourself in good condition with moderate exercise, good diet, adequate rest, and regular medical checkups?</td>
<td></td>
<td></td>
<td>Make regular appointments with your medical provider. Complete all exercises prescribed by your therapist. Keep hydrated and maintain a healthy diet.</td>
</tr>
<tr>
<td>If you wear glasses, is your prescription up to date?</td>
<td></td>
<td></td>
<td>Make sure to schedule an annual appointment with your optometrist.</td>
</tr>
<tr>
<td>If you live alone, do you have daily contact with a friend or neighbor?</td>
<td></td>
<td></td>
<td>Establish a routine of daily communication with family and/or neighbors. Consider setting up a monthly service/emergency call button such as First Alert.</td>
</tr>
</tbody>
</table>