



**optim** medical center  
PATIENT FOCUSED • PHYSICIAN OWNED





---

# Joint Venture

*A Total Experience*

---



# Table of Contents

---

Welcome .....	3
Pre-operative (before surgery) Class .....	4
The Importance of Your Coach .....	5
Pre-op Home Checklist.....	6
What Should I Bring to the Hospital? .....	7
For Your Family .....	8
Anesthesia.....	9
Pain Management .....	10
For Your Safety .....	11
Frequently Asked Questions.....	12
Rehabilitation Services.....	14
Beginning Your Exercise Program.....	16
List of Adaptive Equipment .....	17
Total Hip Replacement Protocol .....	18
Total Knee Replacement Protocol .....	19
Going Home.....	20



# Welcome

---

At Optim Medical Center, our mission is to serve our patients with compassionate, quality care that is convenient, efficient and cost effective. Our vision is to be exceptional as your trusted partner and your best choice for health care.

We are committed to bringing you and your doctor all the services and support needed to make your total joint replacement surgery a success. We offer the following services as part of our Joint Venture Program:

- Free education class prior to your surgery. Our total joint nurse coordinator will fully describe the surgical procedure and take you step-by-step through the entire process from registration to discharge. She will explain how preparation prior to surgery can speed the recovery process.
- Following surgery, you will stay in our orthopedic unit. The nursing and therapy staff are specially trained in the care of patients who have undergone total knee and hip replacement surgery.
- Comprehensive Physical and Occupational Therapy program during your inpatient stay after your surgery.
- Assistance with discharge planning needs provided by our Case Manager/Discharge Planners.

**For more information or if you have any questions, please contact:**

**Total Joint Coordinator**

**912.557.1269**

*Optim Medical Center complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.*

*ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-404-562-7886 (TTY: 1-404-331-2867).*

**CHÚ Ý:** Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-404-562-7886 (TTY: 1-404-331-2867).

# Pre-operative (before surgery) Class

---

This is your opportunity to learn what is in store for you in the upcoming weeks and what you can do to make your surgery a success.

**Please feel free to ask any questions you may have. The more you know, the better you will feel.**

## Class Preview

- Meet and greet
- Preparing for surgery
- What to expect during the surgical experience
- Rehabilitation after your surgery
- How to maximize your recovery
- Questions and answers

During this class, you will meet some of the staff as well as other patients and families. Questions will be addressed and vital information will be discussed.

## Do you have a coach?

We highly recommend that you designate your spouse, friend or family member who will be caring for you after the surgery to be your official coach. The coach will be at your side, helping you with your exercises, keeping you motivated and generally doing what is necessary to get you back on your feet again and enjoying life. Be sure to invite your coach to attend your class.

Depending on your progress, you may be going directly home shortly after your surgery. Once home, you may need special equipment or training to help with your recovery. The pre-op class is the perfect time for you and your family to start preparing for your homecoming.

# The Importance of Your Coach

---

Family and friends are a major part of everyone's life and during this experience their involvement is very important. We encourage you to choose a family member or close friend to act as your coach as you go through the joint replacement process. Their help and support will make your journey easier.

**Here are the things your coach can do to help you through your joint replacement experience.**

## Before surgery

- Attend the pre-op education class with you
- Prepare for your return home by helping you complete the Pre-op Checklist following this section

## At the hospital

- Offer support and encouragement during therapy sessions
- Keep your morale high by sharing time and doing things that you like (board games, watching movies, etc)
- Keep you focused on returning to a healthy life style

## At home after discharge

- Make sure you do the exercises. NO EXCEPTIONS!
- See that you use your walker or cane according to your doctor's orders
- Encourage you to increase your activity level and do things gradually as you gain your strength back
- Oversee that you are following post-op orders

# Pre-op Home Checklist

---

**Preparing for your homecoming prior to your surgery will make your post-op days go much smoother. Being prepared is the key to a relaxed recovery. Complete the list below:**

- Make arrangements to have someone stay with you until you are comfortable being on your own.
- Have enough food on hand or arrange for someone to go shopping for you.
- Do the laundry, change the linens, and complete other housework before leaving for the hospital.
- Have a pair of shoes or slippers with good support and non-skid soles.
- Have easy access to a bed and bathroom on the floor level that you will be spending most of your time. Choose a bathroom with a door wide enough to accommodate a walker. There should be enough room for a commode or an elevated toilet seat.
- Install a handrail, if possible, for any steps you may be using routinely.
- Make arrangements for walking your pets, mowing the lawn and bringing in the mail.
- Remove any obstacles that may cause you to trip: throw rugs, extensions cords, pets, pet toys, or low hanging bedspreads. Make sure you have adequate lighting especially at night.
- Fill your routine prescriptions.
- Take care of any financial matters such as bills, having cash on hand, etc.
- Arrange for plates, pans, and kitchen utensils to be within easy reach as well as any other items you may frequently need. Plan how you will transport your food to the table using the walker (slide on counter, walker basket, etc)
- Have a phone within easy reach with emergency numbers.
- Have a comfortable chair with arms to help you when rising. For hip replacements: NO low, soft, upholstered chairs or couches.
- Tend to any scheduled procedures like teeth cleaning before surgery.
- Have a full tank of gas before leaving for the hospital.

## Other Important Information

- **DO NOT eat, drink, smoke or take medications after midnight on the night before your surgery unless otherwise instructed by your surgeon**
- **Talk with the pre-admission nurse about your diabetic medication adjustment for the day of surgery**
- **Talk with your surgeon about blood thinners and any other medication prior to the day of surgery**
- **Surgery usually lasts 2 hours for a single joint. Every patient is different. The surgery may take longer in some instances.**
- **During your surgery, your family will be in the surgery waiting area**

# What Should I Bring to the Hospital?

---

## A Positive Attitude!

**Confidence in yourself and a desire to return to a more active lifestyle!**

### Personal Care:

- Toothbrush/toothpaste
- Shaving equipment
- Deodorant
- Eyeglasses/contact lenses, dentures, hearing aides
- Other personal comfort items

### Clothing:

- Hospital patient gowns are the clothing of choice for the first few days after surgery due to the presence of intravenous (IV) lines and drains
- Knee length light robes or gowns
- Loose fitting shorts and t-shirts
- Non-skid footies will be provided, however, you may bring tennis shoes or any non-skid shoes

### Miscellaneous Items:

- List of current medications; please bring your prescription bottles
- Insurance card
- Driver's license or photo ID
- Contact phone numbers
- "Spare time" activities for your personal enjoyment and relaxation such as crossword puzzles, books, cards, etc
- You may bring personal cellular phones and small personal battery-operated electronic devices if desired

### What should I leave at home?

- Do not bring cash over \$10
- Valuable items such as keys, credit cards, jewelry, checkbooks, wallets
- Weapons are not permitted at Optim Medical Center

# For Your Family

---

## The Surgery Waiting Area

Waiting during a surgical procedure may seem like a very long time for your family. At Optim Medical Center we strive to take excellent care of your family while doing the same for you!

The surgery waiting area is located directly outside the surgery suite.

Once you are admitted to the pre-op area your family will be able to see you before your scheduled procedure. Your surgeon will speak with your family immediately after the surgery. You will remain in the Post Anesthesia Care Unit (PACU) for about 1-2 hours before admission to your room. Your family is welcome to wait for you in your hospital room.

## Amenities

**For your family's enjoyment and comfort we provide the following amenities:**

- Free coffee
- Wireless/Wi-Fi capability
- Television
- Conveniently located restrooms
- Magazines
- Cell phone use is permitted

## Cafeteria Serving Times

Meals are available in the hospital cafeteria located on the main floor. We are open daily from 7:00 AM to 6:30PM.

**Cafeteria serving times are:**

- Breakfast 7:00 AM to 9:00 AM M- F (7:00 AM to 8:30 AM Sat-Sun)
- Lunch 11:30 AM to 1:30 PM
- Dinner 5:00 PM to 6:00 PM

Vending machines with drinks and snacks are located in the hallway outside the main entrance registration waiting room.

## Visiting Hours

To maintain a more restful atmosphere, it is recommended no more than 2 visitors should be with the patient at a time. Children under the age of 12 may be permitted with special permission from the doctor or Nursing Shift Supervisor. General visiting hours are from 10:00 AM to 8:30 PM.

# Anesthesia

---

Anesthesia is the loss of feeling or consciousness. The Anesthesiologist is a medical doctor who administers the medications in the operating room.

Many medications and procedures are available to your anesthesiologist to prevent you from feeling pain during your surgery.

General Anesthesia works best for most patients having joint replacement surgery. Your surgeon will plan to use this technique for you unless a medical condition indicates otherwise.

Several different medications may be used for general anesthesia – some are inhaled and some are given through an IV (intravenous line).

With general anesthesia, you may have a tube placed in your windpipe to deliver inhaled medication. This may cause your throat to be sore following your surgery.

Your operating room anesthetist will monitor your breathing, heart rate and blood pressure during your surgery. An IV will be started in the pre-op area prior to your surgery.

**At Optim Medical Center, we value your safety and concerns. You do not need to worry that you will wake up too early or that you will feel the surgery being performed. Your anesthesiologist will make sure you wake up at just the right time!**

To assist with post-op pain control, your anesthesiologist may administer a major nerve block for patients having a total knee replacement. This nerve block will provide post-op pain control for many hours following your surgery.

Please feel free to talk with your surgeon or nurse if you have any questions or concerns about your anesthesia options.

# Pain Management

---

Following a joint replacement surgery, pain is a consequence that needs to be managed adequately. Your team is ready to help you; however, for them to help you, you **MUST** tell them about your pain. **By telling us about your pain, we can become partners in managing your pain.** It is important to be realistic when dealing with pain. The amount of pain that a person feels varies from one individual to another. No two persons are exactly alike.

**It is important to think along the lines of “under control” as opposed to “no pain”.**

Please tell your care team if you believe your pain is under control or hampers your ability to participate in your care and rehabilitation. If you are unable to use the pain scale, your care team will rely on other signals of pain such as facial expressions, activity, movement, and sweating to name a few. You will be assessed routinely for existing pain and pain relief.

## Other Possible Ways to Manage Pain

- Changing your position every 1-2 hours
- Positioning your pillows for comfort
- Sleeping
- Listening to music
- Watching television
- Walking
- Talking to family and friends
- Reading
- Breathing exercises
- Relaxation techniques

## After Your Surgery

After your surgery is finished you will be taken to the recovery room called PACU or Post Anesthesia Care Unit located across from the pre-op admission area.

Our staff will be with you when you wake up from surgery. The anesthesia drugs will most likely cause you to have blurred vision, dry mouth, chills, and they may also cause some nausea. You may have a sore throat if a tube was placed in your windpipe during surgery.

As you wake up, you will be aware of your nurse checking your bandage and blood pressure. Your nurse will also be asking if you are having pain or nausea. Medication is available to make you comfortable. You will be attached to a heart monitor and oxygen level monitor. You will hear these monitors beep. You will also receive oxygen through clear plastic tubing in your nose.

You will remain in the recovery area from 1- 3 hours depending on the anesthetic you had and your individual reaction to it.

Visitors are not allowed in the PACU area. Please be assured that your family will be updated on your progress.

When you are released from the PACU area, the surgery personnel will transport you to your hospital room. You will already be in your hospital bed! Your family may visit you after the nurse checks you into your hospital room.

# For Your Safety

---

At Optim Medical Center, patient safety and satisfaction is our number 1 goal. Here are some simple ways that can help keep you safe:

## Avoid Falls

- Do not attempt to raise or lower the bed rails or lean too far out of your bed. Call for assistance when you need it.
- Wear bedroom slippers with skid resistant soles when you get out of bed. The hospital provides socks with skid resistant soles for your convenience.
- Do not walk on wet floors.
- Ask for assistance when getting in and out of wheelchairs.
- Ask for assistance when going to the bathroom.
- Before getting out of bed, sit on the edge of the bed for a few minutes before standing and starting to walk.
- Use your nurse

# Frequently Asked Questions

---

## Will I be awake during the surgery?

During the surgery, an anesthesiologist will administer an anesthetic that will provide total pain relief. There are different types of anesthetics: a general anesthetic will put you into a deep sleep, while a regional anesthetic will numb specific areas only.

Most people will get both the general anesthetic and the regional anesthetic. You will not remember the surgery once you awaken. You and your anesthesiologist will discuss which method is best for you prior to your surgery. Please feel free to discuss any concerns you may have.

## Other than my scar, will my joint be any different?

Some people notice a major clicking sound when they bend their joints. This is a result of the prosthesis, or artificial parts, coming in contact with each other. This is normal and is not a cause for concern. Most total knee patients notice that the knee feels “different” but without pain. Most total hip patients feel like they have a normal hip again.

## How long will I be at the hospital?

Joint replacement patients usually stay with us for 1-2 days, however, some may leave earlier. Before you leave, you must meet certain functional goals. Physical and Occupational Therapy after surgery is very important.

## Will I need a walker, crutches or cane?

People progress at their own rate. Normally, patients use an assistive device such as a walker and progress to a cane afterwards. Your therapist and your physician will inform you on when you can stop using these devices.

## Can I go home or do I have to go to a nursing home/rehab center?

Occasionally, some patients require a short stay in a rehab or nursing home facility BUT this is the exception rather than the rule. Your care team will be monitoring your progress daily and will determine if you are ready to go home directly.

## Will I need help at home the first week?

Although you will be well on your way to recovery when you leave the hospital or sub acute facility, arrange to have someone assist you with meals, medications, dressing and all other daily activities for the first week or two. Be sure to alert the joint care team if you live alone.

To make the transition to home easier, plan ahead. Prior to coming to the hospital, take care of such things as getting prescriptions filled, changing beds, doing the laundry, washing floors, arranging for someone to cut grass, walk the dog, stocking up on groceries, etc. **Your job after surgery is to focus on your recovery, not household tasks.**

## Will I need therapy when I go home?

For knee replacements, yes. For hip replacements, there is a possibility that you may need therapy. Therapy is a very important component of your recovery. The number of therapy sessions is based on individual progress.

To a large extent, your progress will be determined by how much effort you put into your exercise routines. Your therapists will monitor your progress after surgery and will help determine your therapy needs after discharge. Your discharge planner will help arrange for your therapy after going home.

## Why should I exercise before surgery?

The better the condition of your muscles prior to surgery, the easier and faster your recuperation is expected to be. It is important to learn the exercises and be comfortable with them prior to surgery so that you can continue them once you return home. Starting the exercises now will build muscle tone and pave the way to quicker recovery. Begin doing the exercises immediately, unless you experience pain in your joint.

## Are there any activities that I should avoid initially?

Keeping your new joint moving will help your recovery process. However, you should return to your normal activities gradually. In some instances, you may have to work your way to a particular activity. For example, taking a five mile walk on your first time out is not realistic. Rather, walk until you begin to get tired. Add distance to each subsequent walk until you have reached your goal.

You will be instructed by your joint care team to avoid specific positions of the joint. Avoid high impact activities such as jogging, singles tennis, basketball, downhill skiing, football, etc. Consult your surgeon prior to participating in any high impact or injury prone sports.

## When can I return to work?

The physical demands required for your job, as well as your own progress, will determine when you can return to work. Your surgeon will tell you when you can return to work.

## When can I drive?

How soon you can resume driving will depend on several factors such as your progress, type of car you drive, which side of your body was the joint replaced, and if you are still taking prescription pain medications. Your return to driving is largely dependent on your progress as well as your commitment to your exercises and physical rehabilitation. You should NOT consider driving until you are released to do so by your surgeon.

## When can I resume having sexual intercourse?

After surgery, it will take time to regain your strength as well as your confidence in your new joint. Most people feel able, physically and mentally, to engage in sexual activity about 4-6 weeks after surgery. Talk to your surgeon if you have any questions regarding this.

## Are there any positions that should be avoided during sexual intercourse?

For **total hip replacement** patients, consult your surgeon prior to resuming this activity. For **total knee replacement** patients, positions involving kneeling on your new joint should be avoided at least initially. It is best to use a side lying position in the early recovery stages. Pillows maybe used to provide support and comfort to the affected leg. As your recuperation progresses, lying face up using a pillow or two under the knees to create a comfortable bend is an alternative to side lying position. For male joint replacement patients, consult your surgeon first prior to assuming the top position.

# Rehabilitation Services

---

## Physical Therapy

Physical Therapy will begin on your first day after your surgery, or what is called “post-operation day 1” or simply “POD1”. Your physical therapist will be responsible for guiding your rehabilitation efforts towards recovery.

### Your Physical Therapist will:

- Assess your physical and mobility status
- Instruct and assist you with your exercise program
- Teach you movement precautions
- Instruct you with safe transfer, walking and stair training
- Make recommendations for your follow-up care after your discharge from the hospital.

### During your first treatment

You will begin by performing bedside exercises with the therapist’s assistance. Your therapist will provide you with a list of exercises that you will perform in therapy. The exercises will help improve the movement in your leg and will help stretch and strengthen your muscles.

You will be assisted to a sitting position at the side of your bed. You will then be taught how to stand using a walker and you will be encouraged to take your first steps. Your Physical Therapist will instruct you on how much weight you can place on your operated leg.

A walker will be provided for your use during therapy sessions. You are encouraged to bring your own walker from home; however, if you do not have one, do not worry! The discharge planners can facilitate ordering one for you when you are ready to go home.

You will be transferred to a chair out of bed. You are encouraged to sit for 1-2 hours. Once you are ready to go back to bed, inform your nurse by using your call button. Nursing staff or the aides will then transfer you back to bed. DO NOT attempt to get in or out of bed without staff assistance.

**Our goal is for you to be more independent each day.** As such, your therapist will slowly progress your therapy to your tolerance.

Your therapist will provide lesser physical assistance each day to encourage you to use your own strength and be more independent. Your therapist will also encourage walking farther each day. Depending on your progress, stair training will begin on the second or third day after surgery.

Please refer to the Total Joint Protocol for a brief summary of your rehabilitation schedule.

## Occupational Therapy

Occupational Therapy will begin on the first day after your surgery referred to as “post-operation day 1” or simply “POD1”.

### **Your Occupational Therapist will:**

- Help you adapt to temporary lifestyle changes necessary following joint replacement surgery
- Instruct you in using adaptive devices if needed
- Teach you movement precautions
- Instruct you with safe transfers including getting in and out of bed.
- Make recommendations for your follow-up care after discharge from the hospital.

### **During your first treatment**

Your Occupational Therapist will begin your assessment which will include determining your living arrangements and unique needs.

Your therapist will develop a comprehensive plan that may include activities of daily living (ADL) training, transfer training, adaptive equipment training and other home management skills.

Please refer to the attached Total Joint Protocol for a brief summary of your rehabilitation schedule.

Your Occupational Therapist, Physical Therapist and Discharge Planner work closely together to make sure your discharge needs are identified and addressed. This makes your transition from hospital to home as smooth and worry-free as possible.

**Please discuss any particular concerns or any special situations you may have with your therapists. We are more than happy to assist you in any way we can!**

# Beginning Your Exercise Program

---

## Important Tips

- Take short rest periods between exercise if needed
- Use slow steady movements while exercising
- Take slow deep breaths while exercising. Breathe out during the most difficult part of the exercise. Counting your repetitions out loud will help you remember to breathe
- **DO NOT** over exert yourself
- **DO NOT** exercise in a cold room or immediately after meals
- **DO NOT** continue with the exercise if it causes increased pain or discomfort. However, you may be able to “modify” the exercise without completely eliminating it. As an example, if a particular exercise causes increased pain with 10 repetitions, then try doing lesser repetitions and gradually add more repetitions as you are able
- Stop exercising and contact your doctor if you notice chest pain, dizziness, or excessive perspiration while exercising

## Before your Surgery

- It is recommended that you perform the exercises 1-2 weeks prior to your scheduled surgery
- Perform the exercises 1-2 times daily
- Begin with 10 repetitions of each exercise. Gradually increase them by 1-2 repetitions each day as tolerated until you can perform 20-30 repetitions of each exercise. Continue with 20-30 repetitions until your surgery
- A word of caution: You should be aware that there will be limitations to the range of movement available at your arthritic joint while exercising before surgery. This limit is signaled by pain. Therefore, when exercising your arthritic joint before the replacement surgery, stay within the limits of your pain tolerance.

## After Surgery

- You will continue to perform the exercises after you leave the hospital. Please refer to any specific instructions given by your therapist
- Taking your pain medications 30 minutes to 1 hour prior to performing your exercises will help minimize pain and discomfort
- Apply ice for 10-15 minutes after completing your exercises

# List of Adaptive Equipment

---

You may need some equipment to help you during your recovery. Some of the equipment is optional and insurance coverage varies. Because each patient recovers differently, your therapist will recommend the equipment that is best suited for your needs. Your surgeon will prescribe the equipment you will need.

Equipment recommended by your health care team may not be covered by your insurance plan. Your Case Manager/ Discharge Planner will help you understand your equipment coverage and will also assist you in ordering the prescribed equipment. Equipment may include:

1. Two-wheeled walker
2. Reacher
3. Long-handle sponge
4. Sock aid
5. Long-handle shoehorn
6. Elastic shoelaces
7. Three-in-one bedside commode
8. Tub transfer bench or shower chair

# Total Hip Replacement Protocol

## Pre-Op Teaching

1. Hip Anatomy
2. Hip Precautions
3. Pre-op and Post-op exercises, goals
4. Equipment needs

For questions, call Optim Medical Center Therapy Department • 912.557.1253

Physical and Occupational Therapy is provided two times daily, for the duration of your hospital stay.

## Day 1 After Surgery

### PHYSICAL THERAPY (AM)

- PT evaluation
- Exercise per protocol
- Transfer training
- Gait training as tolerated with walker
- Review hip precautions

### PHYSICAL THERAPY (PM)

- Gait training

### OCCUPATIONAL THERAPY (AM)

- OT evaluation
- Review hip precautions

## Day 3 After Surgery (May be discharged)

### PHYSICAL THERAPY (AM)

- Exercise protocol
- Transfer training
- Gait training 200 feet with walker
- Stair training as needed
- Review hip precautions

### PHYSICAL THERAPY (PM)

- Gait training

### OCCUPATIONAL THERAPY (AM)

- ADL equipment training
- Home management/discuss equipment needs
- Review hip precautions
- Upper extremity exercise

## Day 2 After Surgery

### PHYSICAL THERAPY (AM)

- Exercise Protocol
- Transfer Training
- Gait Training 100-200 feet with walker
- Review hip precautions

### PHYSICAL THERAPY (PM)

- Gait training

### OCCUPATIONAL THERAPY (AM)

- Transfer training
- ADL equipment training
- Review hip precautions
- Upper extremity exercises

## Day 4 After Surgery

### PHYSICAL THERAPY (AM)

- Exercise per protocol
- Transfer training
- Gait training at least 200 feet with walker
- Stair training as needed
- Review hip precautions

### PHYSICAL THERAPY (PM)

- Discharge

### OCCUPATIONAL THERAPY (AM)

- Finalize equipment needs
- Home management
- Patient/family will be independent with ADL's, transfers & upper extremity home exercise program
- Able to verbalize hip precautions

# Total Knee Replacement Protocol

## Pre-Op Teaching

1. PRE-OP exercise
2. POST-Op activity/expectations, goals
3. Equipment needs
4. Answer questions

For questions, call Optim Medical Center Therapy Department • 912.557.1253

Physical and Occupational Therapy is provided two times daily, for the duration of your hospital stay.

## Day 1 After Surgery

### PHYSICAL THERAPY (AM)

- Exercise PT evaluation
- Exercise per protocol
- Transfer training
- Gait training as tolerated with walker
- Knee ROM measurement

### PHYSICAL THERAPY (PM)

- Exercise protocol
- Gait training

### OCCUPATIONAL THERAPY (AM)

- OT evaluation
- Transfer training

## Day 2 After Surgery

### PHYSICAL THERAPY (AM)

- Exercise Protocol
- Transfer Training
- Gait Training 100-200 feet with walker
- Knee ROM measurement

### PHYSICAL THERAPY (PM)

- Exercise Protocol
- Gait training

### OCCUPATIONAL THERAPY (AM)

- Start ADL training
- Identify equipment needs
- Transfer training
- Upper extremity exercises

## Day 3 After Surgery (May be discharged)

### PHYSICAL THERAPY (AM)

- Exercise protocol
- Transfer training
- Gait training 200 feet with walker
- Stair training as needed
- Knee ROM measurement
- Discharge planning recommendation

### PHYSICAL THERAPY (PM)

- Exercise training
- Gait

### OCCUPATIONAL THERAPY (AM)

- ADL equipment training
- Home management
- Discharge planning recommendation
- Upper extremity exercises

## Day 4 After Surgery

### PHYSICAL THERAPY (AM)

- Exercise per protocol
- Transfer training
- Gait training at least 200 feet with walker
- Stair training as needed
- Knee ROM measurement

### PHYSICAL THERAPY (PM)

- Discharge

### OCCUPATIONAL THERAPY (AM)

- Finalize adaptive equipment
- ADL training as needed
- Home management
- Patient/family will be independent with upper extremity home exercise program

# Going Home

---

## Before You Go Home

At Optim Medical Center, the Case Management/Discharge Planning Department will assist you with any discharge needs. You will be contacted by our Discharge Planning Nurse prior to your surgery to discuss your options. Our staff is available to help you and your family plan for your care after you leave the hospital. They will not make decisions for you and your family but will provide information to allow you to make the best decision about your care after discharge. We offer a variety of services and can help coordinate community services to assure continuing care after leaving the hospital. In addition, they can assist you in understanding your insurance coverage options.

If you need additional rehabilitation after your acute hospital stay, we will be more than willing to assist you with alternative arrangement.

There are different levels of care available including extended care facilities, transitional care units and acute rehabilitation units. All the units provide 24 hour care for patient. Placement is determined by the level of care you need, physician order, bed availability and payment source.

When it becomes apparent that you will have care needs that cannot be provided at home, we will begin the process of assisting you and your family in making alternative decisions.

The Case Management/Discharge Planning staff is available Monday through Friday from 8:00 a.m. to 4:30 p.m. They may be reached at 912-557-1206.

**Your doctor will order your discharge from the hospital and provide you with specific discharge instructions.**

**These instructions will include:**

- Information on how to take your medications
- Managing your pain and how to minimize swelling
- How to care for your dressing and incision
- Follow up appointment with your surgeon and physical therapy
- Activity and diet information
- Warning signs of problems like infection and blood clots

Thank you for choosing



**optim**  
medical center

PATIENT FOCUSED • PHYSICIAN OWNED

247 South Main St.  
Reidsville, GA 30453  
912.557.1000

For questions or for more information about our  
Total Joint Replacement Program please contact:

**Total Joint Coordinator, 912.557.1269**

**[optimhealth.com](http://optimhealth.com)**