



## Outpatient Total Hip & Knee Arthroplasty FAQ's

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During the last five years there has been a transition for major joint replacement surgery to be performed at an outpatient surgery center so that patients can go home and start their rehabilitation in the privacy of their own home. Outpatient joint replacements are expected to be 25% of total joint replacements in 2022 and 50% by 2026. If you medically qualify for outpatient surgery, it can offer you the following advantages:

- Not having to stay overnight in the hospital.
- Lower risk of infection at outpatient centers.
- Reduces exposure to patients in the hospital setting who have infectious diseases.
- Lower costs for the patient.
- Dedicated anesthesiologists who are proficient in performing nerve blocks that reduce post-operative pain.
- Ability to start your rehabilitation immediately.
- Studies show a slightly shorter recovery period for these patients, but long-term success is the same for both inpatient and outpatient joint replacements.
- You will receive the same state of the art prosthesis (joint replacement) that is also used in a hospital setting.

### Preparing for surgery:

1. You will need to medically be cleared for surgery by your Internist/Primary Care Provider/Cardiologist with standard bloodwork and EKG. These results will also be reviewed by the surgery center to ensure that you are an appropriate patient for outpatient surgery. Conditions such as asthma/COPD/heart disease/kidney disease may prevent you from being a candidate for outpatient surgery.
2. You will need a walker for your recovery, this will be ordered through our office and it needs to be picked up prior to your surgery.
3. Ice or gel packs should be used regularly post-surgery, obtain at least 2 to rotate.
4. Post-operative medications (pain/nausea/inflammation/blood clot prevention) will be electronically sent to your pharmacy prior to your surgery so that they can be picked up ahead of time so that your transition to your home environment can be smooth.
5. **Total knee replacements patients** will be set up with home health care visits for intravenous fluids and/or medications. This will be arranged through our practice. This will involve a home visit prior to your surgery to ensure your home is properly prepared



for your recovery. Total hip replacement patients do not require home care as this surgery typically is not as painful and patients are more mobile.

6. **Total knee replacement patients** will have physical therapy arranged prior to surgery so that outpatient physical therapy can be started the day after your surgery.
7. **Total hip replacement patients** will require a single pre-operative physical therapy appointment to teach you safe exercises to perform after your surgery, how to use your walker, and how to get in and out of bed and use the bathroom safely.
8. **Total hip replacement patients** will not require post-operative physical therapy most of the time. If therapy is needed in certain circumstances, it can be arranged.
9. You will need a pre-operative appointment in person or via telemedicine with a Physician Assistant or myself to discuss medication management, procedures, expectations as well as any remaining questions before surgery.
10. In addition, a nurse from our office will call you to discuss medications that you currently take and what needs to be stopped and for how long they need to be stopped prior to your surgery.
11. **Knee replacement patients** can benefit from cold therapy devices which can be ordered through our office and be picked up prior to surgery. Some insurances will cover these devices, others will not. We have a cash pay price for these devices if not covered by your insurance.
12. Mobile Deep Vein Thrombosis prevention devices may be ordered for you to use at home after your surgery. Some insurance companies will pay for this, others will not so there is a cash pay price for these devices. Use of these devices is not mandatory as you will be on an anti-coagulation medication after your surgery to prevent blood clots, but we do recommend them.
13. You will need someone to help and be available at home for the first 72 hours post-surgery. In addition, stairs will be difficult to manage post operatively. Accommodations should allow for living on the bottom floor of your residence for at least the first few days after surgery.



## Post-operative Care:

- You will have your first post-operative appointment in the first 3-7 days after your surgery. This will be set up prior to your surgery.
- Your second post-operative visit will be at 3 weeks after your surgery, and another appointment at 6 weeks after your surgery.
- **We are always a phone call away, and we want to hear from you if something does not feel or look right! The direct line to our nurse Coreen Zalot - 602.631.3161 ext. 1126**
- Medications can be refilled if needed by a phone call to our nurse.
- Compression stockings that were put on your legs at the surgery center need to be worn 23 hours/day for 2 weeks after your surgery.
- **Knee replacement patients** will have a water-proof bandage that needs to be removed by you 7 days after your surgery. Continue normal showering after it comes off.
- **Hip replacement patients** will have bandage over the hip that should be removed 2 days after your surgery and the skin can remain open to air after this. You can shower with the incision uncovered at this time- it is sealed water-tight with skin glue. You may place a new gauze dressing over the incision so that clothing does not rub on the incision if this is more comfortable for you but change this dressing every 2 days.
- We recommend that you are up and mobile/walking for 15 minutes every hour that you are awake.