

<u>Please take the time to read this entire packet of</u> <u>information prior to your surgery.</u>

Salin's Specific Protocol for Revision TKA

General Information for a Revision Joint Replacement

- KCBJ will pre-certify your surgery through your insurance, then will call you to discuss your benefits prior to surgery.
- It is possible for the time of your surgery to change depending on the specific cases Dr. Salin will be doing at your surgery facility that day. Your surgery facility will confirm your surgery time with you the week before surgery.
- Dr. Salin recommends not having any dental procedures OR cleanings 6 weeks before surgery through 12 weeks after surgery.
- After your revision joint replacement, you will need to be pre-medicated for life with antibiotics prior to any dental procedure OR cleanings. Please call the office for the correct medications to be called into your pharmacy prior to your dental appointment.
- Most of Dr. Salin's implants have an identification card for you to carry post-surgery. You can request this card at your 2-week post-operative appointment.

Pre-Operative Instructions

• Prescriptions may be sent to your pharmacy prior to surgery. We want to send them to the pharmacy early so they will be available for you when you go home. The medications you receive will depend on your medical history and allergies.

ONLY HIGHLIGHTED MEDICATIONS PERTAIN TO YOU:

- \circ Aspirin 325mg = 1 tablet twice daily for 6 weeks after surgery.
- \circ Xarelto 10mg = one tablet daily for 4 weeks after surgery.
- Celebrex 200mg = 2 capsules the night prior to surgery and then 1 tablet twice daily for 13 days after surgery
- \circ Neurontin 300mg = 1 capsule the night prior to surgery
- Hibiclens = wash body daily for 5 days prior to surgery (do not use after surgery unless instructed otherwise)
- Mupirocin 2% external ointment = apply to the anterior nares (nostrils) two times per day for 5 days prior to day of surgery (do not use after surgery unless instructed otherwise)



- The facility where your surgery is taking place will call you approximately 1-2 weeks prior to surgery to arrange your pre-operative appointment and to discuss your medical history, anesthesia, etc.
- Prior to surgery, you are required to complete pre-operative testing. This includes a chest x-ray, EKG, urinalysis, and lab work. All results will be faxed to Dr. Salin's office for review.
 - For patients having surgery at Saint Luke's South or Menorah Medical Center, the facility will call you and set up the testing for you.
 - For patients having surgery at Overland Park Surgical Suites or Olathe Medical Center, you will need to get the testing completed with your primary care doctor or at a local outpatient lab that can complete these tests. The order for the pre-operative testing is included in this packet.
- No food or drink after midnight the night prior to your surgery.
- Stop all blood thinning medications including Aspirin, Xarelto, Lovenox, Eliquis, or Warfarin 7 days prior to surgery unless told otherwise by your primary care doctor or cardiologist.
- Stop all over the counter supplements 7 days prior to surgery.
- Stop all NSAIDs including Ibuprofen, Mobic or Aleve 7 days prior to surgery.
- <u>** Tylenol products are OK prior to surgery**</u>
- You may continue to take all other regularly prescribed medications (blood pressure medications, anxiety medications, etc.) unless instructed otherwise by the hospital anesthesia department.
- Dr. Salin recommends that patients stop smoking ASAP prior to having a total joint surgery. Smoking puts you at increased risk for infection post operatively. Also, smoking puts you at increased risk for fracture or loosening of the implant because the nicotine inhibits bone growth around the implant.

Blood Thinning Medication:

You will be on a blood thinner for 4-6 weeks after surgery. This will help inhibit blood clotting or deep vein thrombosis (DVT) formation. You will start taking it the morning after surgery. Options include:

• Aspirin (Ecotrin) = 325 mg twice daily for 6 weeks after surgery

-or-

• Xarelto = 10mg once daily for 4 weeks after surgery

You will receive Xarelto as your post-operative blood thinner if you have any of the following risk factors:

Family history of blood clotting/DVT



Personal history of blood clotting/DVT Blood clotting disorders Nicotine usage (Smoking)

Estrogen based hormone replacement usage

There is no alternative to Xarelto and in some cases it can be expensive. You can talk to your pharmacy to see if a prior authorization through your insurance is required for this medication.

If you are already taking a blood thinner regularly that was given to you by another doctor, we will use that medication as your post-operative blood thinner. However, you will need to know how long you are to be off your blood thinner prior to surgery. This can be anywhere between 3-7 days. Talk to the doctor that prescribes your blood thinner about this because they will determine how long you will be off your blood thinner prior to surgery.

Pain Management:

After your surgery, you will be given prescriptions to help you with pain control. These will be written for you at the surgery facility. You may receive some of the following medications:

Celebrex = anti-inflammatory Neurontin = helps to alleviate nerve pain Tramadol (Ultram) = narcotic pain medication Hydrocodone (Norco) = narcotic pain medication Oxycodone = narcotic pain medication Percocet = narcotic pain medication

For any additional refills please call the KCBJ office. <u>All narcotic medications cannot</u> <u>be sent to a pharmacy electronically</u>. They must be a paper script signed by the provider and hand delivered by the patient to the pharmacy. You must either pick up the paper prescription at the KCBJ office or it can be mailed to your home address. Dr. Salin will stop giving refills of narcotic medications 12 weeks post-surgery.

Post-Operative Incision:

- Your incision is very minimal, only about 6 inches long in length and will be located on the front of your knee
- The dressing on your knee may be changed when you are in the hospital. If you go home with a dressing in place REMOVE THE DRESSING 7 DAYS POST OP. You can remove your own dressing after 7 days or have the Home Health therapists help you remove it.



- If there is no drainage, you may leave it open to air. If your TED hose rub or irritate the incision place a small dressing over the incision and hold it into place with your hose. If there is drainage coming from your knee, please call the KCBJ office.
- You will be able to shower 24 hours after you are discharged from the hospital. Do not let water directly hit the incision or dressing. Pat dry thoroughly. You cannot soak in a pool, bath or hot tub until the incision is completely healed.
- Dr. Salin recommends using cling wrap to cover the incision during showers. You will need to keep the incision covered during showers <u>even after the dressing is removed</u>. Do this until your post-operative appointment.

Compression Stockings (TED Hose)

You must wear TED hose for a total of 4 weeks. For the first 2 weeks they are to be worn at all times (24 hours per day), taking them off only to shower. Weeks 3-4 after surgery, you must wear the stockings during the daytime only and may take them off at night.

Physical Therapy:

- The amount of time you will need an assistive device like a walker, cane and crutches will be determined by your therapist and how safe you are when walking. You will start off utilizing a walker then advance from there. You will likely be using assistive devices for approximately 4-6 weeks.
- After you are discharged from the hospital, you will start Home Health therapy for 2 weeks. This will be ordered to happen 2-3 times per week with a therapist/nurse coming to your home. They will work with you on exercises to increase strength and range of motion. They will also be able to help you with bandage changes. This will be set up while you are in the hospital by your case manager. KCBJ will not be responsible for setting this up for you. You will be doing your Home Health therapy up until your 2-week post-operative appointment.
- At your 2-week post-operative appointment, you will be given a prescription for formal outpatient physical therapy. You can decide where you would like to go for the therapy. You will attend outpatient therapy for 4 additional weeks 2-3 times per week and then see Dr. Salin in the KCBJ office for your 6-week post-operative appointment. At this point, you and Dr. Salin will decide on the best plan of care for you going forward.

Driving:

You may drive approximately 4 weeks after surgery. If your surgery was on your right leg, this time may be a longer. Before you start driving you must be off all narcotic pain medications, feel like you have your reflexes back and Dr. Salin/midlevel feels comfortable with you driving.



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Follow Up Appointments:

- You will be seen in the KCBJ office approximately 2 weeks after your surgery by one of Dr. Salin's midlevels. If this has not been set up, please call the KCBJ office. You will also have follow-ups at 6 weeks, 3 months, 6 months, 12 months and then as needed (usually 5-7 years).
- At your post-operative appointment, we will be getting x-rays. Please wear comfortable clothing that can be easily removed or something that does not have zippers, snaps, or any type of metal.

Handicap Parking Permit

These permits can be obtained from Dr. Salin's office. A form will be filled out that you will take to the DMV. The DMV will then give you the placard to hang in your car. You can ask Dr. Salin's assistant for a handicap placard form and it can be picked up at the KCBJ office or mailed to your home address. We can only give out these temporary placards after surgery and up to 3 months at a time.

Questions and Answers:

- <u>Do I have to call my insurance company for authorization prior to my surgery?</u> KCBJ and your specific surgery facility will do all the necessary authorizations needed for your surgery. You should be called from our bookkeeping department once this is complete. You may be responsible for any deductible that has not been met prior to surgery.
- <u>Do I need to start Iron tablets prior to surgery?</u> If you currently take iron and it does not upset your stomach, you may continue. This is not a requirement for Dr. Salin's patients.
- <u>Do I need to schedule a pre-op appointment with Dr. Salin?</u> If we have scheduled your surgery, then you have met this requirement for Dr. Salin. If you have an extensive medical history, it is always best to contact your primary medical doctor for clearance. The hospital will call you about 2 weeks prior to surgery for any pre-op labs and testing needed prior to surgery.
- <u>Do I need to donate blood prior to my surgery?</u> Dr. Salin does not recommend that you donate blood prior to surgery. With the minimally invasive approach and techniques there is little blood loss during your surgery.
- <u>What equipment will I need to purchase prior to my surgery?</u> You will not need to purchase anything prior to surgery. All needed equipment will be provided or ordered for you after surgery if needed.
- <u>When will I find out my correct arrival time before surgery?</u> Your surgery facility will call you the week prior to surgery with your arrival time.
- <u>How long will I be in the hospital?</u> You will be in the hospital 1-2 nights after your surgery.



- <u>Will I have long term restrictions after surgery?</u> You will not have any long-term restrictions post-surgery. Please follow your specific post-operative instructions.
- <u>How long should I take dental antibiotics after my revision joint replacement?</u> Your implant will never develop a blood supply, so it is Dr. Salin's recommendation that antibiotic pre-meds should be taken for life prior to any dental cleanings or surgical procedures.

Our team is here for you through this entire process. Please don't hesitate to reach out to us if you have any questions or concerns.