

Dr. Harvey's Total Joint Replacement Preparation Guide

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Scheduling Process

You will receive a call from Sharon, Dr. Harvey's surgery scheduler, within 5-7 business days after your appointment. She will discuss possible surgical dates and locations, and will assist you with setting up appointments with your primary care provider and medical specialists, if necessary, for preoperative clearance. Dr. Harvey will see you back in the office about 1-2 weeks before your scheduled surgery to go over your surgery in more detail and answer any remaining questions you may have.

Surgery Locations

Dr. Harvey mainly performs his total joint replacement surgeries at the sites listed below. The location of your surgery will depend on your preference, operating room availability, and insurance acceptance.

1. OrthoIllinois Surgery Center
2440 Alft Ln., Elgin, IL 60124
2. Northwestern Huntley Hospital
10400 Haligus Rd., Huntley, IL 60142
3. Advocate Sherman Hospital
1425 N. Randall Rd., Elgin, IL 60123
4. Ascension St. Joseph Hospital
77 N. Airlite St., Elgin, IL 60123
5. Ascension St. Alexius Hospital
1555 Barrington Rd., Hoffman Estates, IL 60169
6. Valley Ambulatory Surgery Center
2475 Dean St., St. Charles, IL 60175
7. Algonquin Road Surgery Center
2550 W. Algonquin Rd., Lake in the Hills, IL 60156

Medical Clearance

You will be asked to obtain clearance from your primary medical provider prior to surgery. You may also be asked to obtain clearance from a medical specialist if you have any conditions pertinent to your upcoming surgery. This is done in order to make sure that your general state of health and treatment of your medical conditions is optimized in order to ensure a safe surgery and speedy recovery.

Medications

In general, you should stop taking anti-inflammatory medications 7 days before surgery, these include Ibuprofen, Naproxen, Advil, Aleve, Motrin, etc. If you are on any blood thinning medications such as Coumadin, Eliquis, Plavix, etc. we will work together with you and your medical specialist to coordinate directions for these medications around the time of surgery. Usage of narcotic pain medication prior to surgery is not recommended, and should be minimized as much as possible. Taking pain medications before surgery may lead to tolerance and increased pain after surgery. If you are on any diuretics or diabetes medications such as insulin, you should take these only as directed from your prescribing doctor before surgery. All of your medications will be reviewed and discussed at your preoperative office visit. I also ask you to please stop taking any nutritional and/or herbal supplements 2 weeks prior to surgery, as these can interfere with other medications, and sometimes cause bleeding related issues. Exceptions are calcium, vitamin D, and iron supplementation, as you may continue these medications up until the day before surgery unless directed otherwise.

Dentition

It is important to maintain appropriate dental hygiene before surgery. If there is any concern for dental disease such as cavities or infection, we will have you be seen and cleared by a dentist before your surgery. Dr. Harvey prefers and strongly recommends that you have seen a dentist within 12 months of undergoing joint replacement surgery.

After surgery, it is recommended that all elective dental work is delayed for approximately 6 months. For two years after surgery Dr. Harvey will prescribe antibiotics for you to take before dental work to prevent infection.

Exercise (“Prehab”)

Stretching and exercising as much as reasonably possible up until your day of surgery is important. This will help you maintain range of motion, strength, and endurance, which can help you achieve a quick recovery and successful outcome.

As a reference, the American Association of Hip and Knee Surgeons has some content published online which can help to guide your “prehab”.

URL below:

<https://hipknee.aahks.org/preparing-for-joint-replacement-surgery-at-home-exercises/>

Diet and Nutrition

Dr. Harvey believes that adequate nutrition around the time of surgery is one of the most important factors related to proper healing and quick recovery. Starting at least 2 weeks before surgery we encourage you to stay well hydrated and eat as healthy as possible. Eating more fiber can help to avoid constipation after surgery. Foods high in fiber content include beans, avocados, peas, corn, whole wheat pastas and breads, and almonds. It is also important to eat plenty of foods rich in iron, including lean red meat, green leafy vegetables, prunes, and raisins. Eating fruits and other foods rich in Vitamin C can bolster your immune system and help your body absorb iron. Adequate calcium and vitamin D intake with foods such as milk, yogurt and/or supplements as directed by your medical doctor is also important to support strong and healthy bones.

Smoking/Alcohol Use

It is extremely important to quit smoking at least one month before surgery. Smoking is associated with an increased risk of complications such as wound healing and infection, and can significantly delay your recovery after surgery. We will discuss ways to achieve this, and can refer you to an assistance program should you desire. Testing may be obtained before surgery to verify that all of the harmful chemicals associated with smoking have been cleared by your body prior to surgery.

In general, it is recommended to refrain from alcohol consumption within 1-2 weeks before surgery. The main reason is that alcohol can act as a diuretic and lead to dehydration, and can also decrease overall nutrition. Dr. Harvey wants to optimize your potential to heal and recover quickly after surgery.

It is extremely important to be honest about your drinking habits, as significant complications can occur around the time of surgery if we are not aware of your current alcohol consumption.

Home Preparation

It is important to make your home environment as easy to navigate as possible after surgery. This may include arranging single floor living to avoid excessive stair usage, removing items that may narrow walkways or act as tripping hazards, and also making sure that you have the appropriate equipment necessary to make performing your activities of daily living as safe as possible.

Day Before Surgery

Eating/drinking: Try to eat light meals the day before surgery. **Do not eat any solid foods or drink anything but clear liquids starting at midnight before your surgery.** Dr. Harvey encourages you to drink as much clear fluid as possible up until three hours before you are scheduled for surgery, unless directed otherwise by the anesthesia department. Sports drinks such as Gatorade or Powerade are ideal because they contain electrolytes, but you may also have black coffee or tea, plain water, clear broth, ginger ale, Jell-O and Ensure clear. Do not eat or drink anything after you have arrived at the hospital or surgery center.

You will be asked to wash your hip or knee with antiseptic solution at the end of your last bath or shower the night before surgery and possibly on the morning of surgery. It is important to complete this step as directed. Do not apply any creams or lotions to the surgical site once you have done this cleaning. Please refrain from shaving your surgical extremity within a few days of surgery to avoid any potential skin irritation and/or cuts, as this may result in delaying your surgery.

Day of Surgery

You will be informed by Dr. Harvey's scheduler and/or the location of your surgery when to check-in on the day of surgery. The surgery itself will take about one hour, but you can expect to be in the hospital or surgery center at least 2-3 hours after surgery is complete in order for you to recover and work with therapy. Many of Dr. Harvey's patients will go home the same day of surgery, but sometimes you will remain in the hospital for 1-2 days.

You will be given a specific set of exercises to perform for the first few days after surgery, and then you will be scheduled for formal physical therapy within 3-5 days. You will see Dr. Harvey in the office about 2 weeks after your surgery for a check-up.

It is also important to have a positive attitude and look forward to less pain, improved function, and a better quality of life!

Dr. Harvey and his team look forward to helping you achieve your goals every step of the way. **If at any time you have questions or concerns, contact Dr. Harvey, or his clinical lead Jena Carnell, at 815-398-9491.**

Possible Risks associated with Total Joint Arthroplasty

Total joint replacement surgery, like any other surgical procedure, has some associated risks. Although the rates of these complications are extremely low, it is important to be aware of the following potential complications:

Infection, blood clots including deep vein thrombosis and pulmonary embolism and even stroke, extensor mechanism disruption, wound healing complications, arthrofibrosis (joint scarring and stiffness), instability, loosening, leg length discrepancy, malrotation, malpositioning, patellar maltracking, effusions, persistent pain and dysfunction, fracture, failure, need for further surgery, difficulty kneeling, nerve dysfunction, damage to nerves, blood vessels, soft tissues, scarring, swelling, spasms, tendonitis, mechanical symptoms or noise generation from implants, other complications related to anesthesia and immobilization such as cardiac and other internal organ dysfunction, amputation, death.

It is important to realize that these complications are exceedingly rare, and even less so under the treatment of a fellowship trained arthroplasty surgeon like Dr. Harvey. It is also important to realize that these complications can and do occur without any negligence from the surgeon or medical team. If you have any questions or concerns regarding the aforementioned risks/complications of surgery please call the office or address your questions at your pre-operative visit with Dr. Harvey.