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Day of Surgery and Discharge to Home

For surgical patients **1 week before your day of surgery**, the information in this section covers what you and your family could expect throughout the day of surgery from the moment you park your car until you get discharged post-surgery.

1. Your Day of Surgery

2. The Hospital Experience

Your Day of Surgery

1. Day of Surgery: Unit and Parking
2. In the OR
3. Recovery Room and Patient/Family Reunion



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Your Day of Surgery

When you arrive at the hospital you may park in the garage. The pre-op unit will provide a discounted **parking** ticket. A free **parking** ticket is provided to you on the day of discharge to home. Your visitors have the option of valet parking. Please pay for your parking in the main lobby.

Once you arrive to the hospital, please check in at the registration desk in the main lobby. You and your family/coach will be directed to the 3rd floor, surgical waiting area. Please sign in at the registration desk.

The Care Team will come out to greet you and escort you back to the pre-op area. Once your nurse has you settled, your family/coach will be brought back with you until your time of surgery.

Once you are in the pre-op area, you will change into a hospital gown provided for you, the nurse will perform a short physical assessment, your surgeon will meet with you, and you will be introduced to your anesthesia team who will discuss their plan.

Your surgical site will also be identified and marked prior to your surgery.

Your OR Experience

Once you leave the pre-op area, you will be greeted outside of your OR room by the OR nurse. The nurse will ask you questions you have heard before but, it is our process of checks and balances to make sure we are all in agreement with who you are and what you are having done while in our care. After that, your nurse anesthetist will begin to give you medication to make you sleepy. Most likely, you will not remember much after that. Your anesthesiologist will administer the spinal and then the OR team will take over to prepare you for the surgical procedure.

Spinal anesthesia is used during most surgeries. Your anesthesia provider will discuss other options if there is a contraindication to using spinal anesthesia. You are asleep for surgery regardless of what method is used.

At the close of your surgery, we will place a special dressing over your incision that will stay in place for 7 days (you will be able shower at home with this dressing as it keeps the water out). You will be in the OR for approximately an hour and half and start to wake up in the recovery room. If you had a total knee replacement, you may receive a special anesthesia block in your thigh to help reduce post-op pain. Once you are awake and start to have movement in your legs which usually takes approximately 2 hours, you will be transferred to the 4100 orthopaedic unit.

300 HALKET STREET, SUITE 1601
PITTSBURGH, PA 15213

Drs. Tony DiGioia/Noelle DiGioia Guthrie
Phone - 412-683-7272

Drs. Brian Hamlin/Anton Plakseychuk/Ken Urish
Phone - 412-641-8609



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Family/Coach Experience During Surgery, Recover and Family Lounge

Your surgeon will direct your coach/family to the **Community Room** on the 4100 nursing unit. Please have your coach/family check in at the nurses' station at the end of the hallway.

One of the 4100 unit Team Members will direct your coach/family to wait in the **Community Room** until they receive a phone call from the surgeon with updates on your surgery.

Your coach/family may also utilize the tracking board which provides the progress of your surgery such as when surgery has started and when you are transferred to the recovery room.

Recovery - Post Anesthesia Care Unit (PACU)

The Post Anesthesia Care Unit is also referred to as PACU.

After surgery you will be brought to the PACU where you will be monitored closely as anesthesia wears off. The length of stay in the PACU will be determined by many factors. You may be in the PACU between one and two hours on average. The nurses in the PACU will monitor your blood pressure, temperature, respirations, heart rate and oxygenation levels as well as continually assess your pain level.

Once the PACU Team determines that you are stable, you will be transferred to your room on the 4100 unit.

Blocks for TKR Patients in PACU

TKR patients that our planning on going home the same day of surgery will receive an Adductor Canal Block in the PACU.

The Hospital Experience

1. 4100/Gym Experience
2. Physical Therapy
3. Same Day PT Flow
4. 1 Night Stay PT Flow
5. Dental Work and Antibiotics
6. Meds to Beds Program
7. Discharge Process



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Welcome to the 4100 Unit – The Bone and Joint Center

Occasionally, a same-day surgery will require an overnight stay. If your surgeon decides this is appropriate, the information below pertains to your stay.

Inpatient Unit

Congratulations! You are now ready to continue your Journey to Wellness. Once you are transported to the unit you will be greeted by staff members that will be providing direct care to you. You will be reunited with your coach/family once you are settled.

Mobility

Research has shown that early mobilization following surgery can decrease complications. **Expect** mobilization (getting in and out of bed, going to the bathroom, transferring to a chair) will happen the **day of surgery!**

Your Hospital Stay

Our goal is to help you manage your pain. 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. Good pain control requires a partnership between you and your caregivers. Managing your pain will help you recover more quickly.

Getting Started

Mobility will begin on the day of surgery. You will receive **Physical Therapy** evaluation and customized therapy program will be developed.

DO NOT get out of bed without assistance of a team member until you are cleared too safely do so.

Physical Therapy

If you have full sensation in your legs when you come from the PACA to your room, you will be assisted to walk from the stretcher to a recliner with a walker. You will be assisted with putting on your gym clothes and the PT staff will come to get you to take you to the gym.

Together, the therapist and orthopaedic physician assistant will decide if you are able to be discharged the same day or will need to spend one night.

If you stay one night, you will have a mega PT session at 8:30AM on the day of discharge.

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Physical Therapy

Exercising and Physical Therapy After Surgery

Exercising is an important part of the healing process and many times a supervised therapy program can help you.

It is easier to return to normal daily activities much more quickly if you work hard during your therapy sessions. Plan to participate in therapy, even on the day of your surgery.

Your physical therapist (PT) will teach you how to get in and out of bed, how to get in and out of a car, walk with an assistive device (such as a wheeled walker or cane), climb stairs, and how to do basic exercises. Your PT will also teach you how to protect your new joint and help you with any movement restrictions your doctor may have prescribed.

Therapy does not end when you leave the hospital. In addition to working with your physical therapist, continue to do your exercises every day until your follow-up appointment with your doctor. At that time, your doctor will give you more instructions on how to continue to gain strength and movement in your new joint.

Blood Clots

Blood clots can develop in the legs after surgery. This is called a DVT (deep vein thrombosis). A blood clot can also develop in or travel to your lungs and this is called a “PE” (pulmonary embolism). Both can be serious, so steps are taken to prevent blood clots. This includes putting you on blood thinners after surgery. You will also be shown exercises called “ankle pumps” that help promote blood flow while in bed. The most important thing you can do to prevent blood clots is to get up and move.

Ice and Motion

In the hospital, you will be provided an ice pack and a Continuous Passive Motion (CPM) Machine for TKR patients to help with pain relief. We encourage you to continue these when you get home. The CPM for TKR patient should be used prior to working with your home health or outpatient PT to loosen you up, as well as much as you can tolerate throughout the day. We encourage you to ice as often as able postoperatively, but specifically after any home health or outpatient PT session, or after you have done any activity like walking for exercise or completing your exercises at home.

Home PT vs Outpatient PT

Following your inpatient stay, you will receive home health PT for 5 – 7 days, and thereafter you will complete a course of outpatient PT. Some patients however will be able to exercise on their own or go directly to outpatient PT. Outpatient PT can last anywhere from several weeks to several months based on your progress. We will provide you with an exercise program in the hospital that you can share with your next PT, so that they can see what you have already been accomplishing and help progress you in your recovery.

Schedule Home PT

The discharge planner in the hospital will set up Home Health PT for you. The Home Health PT will call you the evening of your discharge to set up a time for the following day. We don't skip a beat!

Outpatient PT

A prescription is required for outpatient PT. When you are released from home PT, call the office for your prescription. Please have the location and fax number available for your outpatient PT facility.

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Same Day Surgery Discharge Physical Therapy/Occupational Therapy

After you are medically stable, you will receive your PT session. The nursing staff will assist with getting dressed in their clothes for going home, and you will eat prior to PT seeing you.

PT will come to your room to get you, then you will go to the gym to perform a session of supine and seated TE and the bike as well as trialing the stairs and car transfer.

You will be seen for one session prior to discharge. The session will consist of the following:

- Completion and review of exercise program
- Trial of stairs if necessary per your home setup
- Review of car and tub transfer if necessary
- Ambulation to and from your room
- Review of home exercise program and you will be issued a walker or a cane for home as needed.

If you are able to safely complete and tolerate PT session and it is deemed safe, you will be discharged the same day of surgery. If you do not demonstrate safety with session, or you are not medically stable, you may need to stay another day. You will then be scheduled for an additional PT session the following AM, then may discharge home if stable and safe.

You will be assessed to see if you require occupational therapy. If so, you will be seen by occupational therapy prior to discharge.

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1 Night Stay Program Physical Therapy/Occupational Therapy

Upon arrival to your room on 4100, you will be checked in by nursing staff. Physical Therapy will evaluate you after cleared by nursing staff.

PT will complete a modified program in your room as well as ambulate and sit in the chair as able. You will be provided with your PT time for the following morning.

Prior to your PT session in the morning, you will eat breakfast, receive your medications and a staff member will assist you with washing up and getting dressed. We ask that you bring comfortable clothes to work out in, such as shorts, T-shirt/sweatshirt, or sweatpants/exercise pants.

During your AM gym session on discharge day, the following will be completed in PT:

- Completion and review of exercise program
- Trial of stairs if necessary per home setup
- Review of car and tub transfer if necessary
- Ambulation to and from room
- Will be seen by Occupational Therapy if necessary
- Review of home exercise program and patient will be issued walker or cane for home as needed.

If you are able to safely complete and tolerate PT session, patient is deemed safe for discharge after 1 session. If you do not demonstrate safety with session, or is not medically stable, you may need to stay for another session prior to discharge.

2023

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Post-surgery Dental Work and Antibiotics

Please follow the antibiotic schedule listed below for dental work:

For cleanings that are scheduled within 3 months after the surgery date:

- Patients need to pre-medicate with **Cephalexin 500mg, (4 tabs) 1 hour before cleaning procedure.**
- If allergic to Cephalexin, alternative is either Clindamycin 300mg or Azithromycin 250mg (both 2 tabs) 1 hour before cleaning.
- After 3 months, no treatment is needed before cleaning.

For any invasive work (cavities, extraction, root canals etc.) that are scheduled within 2 years since the surgery date:

- Patients need to pre-medicate with **Cephalexin 500mg, (4 tabs) 1 hour before cleaning procedure.**
- If allergic to Cephalexin, alternative is either Clindamycin 300mg or Azithromycin 250mg (both 2 tabs) 1 hour before cleaning.
- After 2 years, no treatment is needed before invasive work.

If someone has a history of joint infection, we have them pre-medicate prior to any cleaning or dental work for the rest of their life.

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Discharge Process: Meds to Beds Program

UPMC Magee Hospital now has the **option** for patients to order their medication through the outpatient pharmacy (UPMC Rx Express) before being discharged and medication will be delivered to the patient's bedside.

How can I get my medicine before I leave the hospital?

We can have your medicine delivered directly to your bedside. We can also have your medicine waiting for you at our pharmacy.

Can I speak with a pharmacist?

Yes, we're here to provide you with the medicine you need along with expert advice on everything from new medications to possible side effects.

Can I have my refills delivered to my home?

Yes, you can have your medicine delivered directly to your home or office. We will send texts and make phone calls to check in on your progress and to schedule refills.

Does UPMC Rx Express charge for this service?

The only cost is your copay. There is no extra fee for UPMC Rx Express. Most major insurance plans are accepted.

IMPORTANT: Pay is due at the time of medication delivery

1. **Credit/Debit card options**
 - a. Over-the-phone
 - b. At bedside
 - c. In-person at pharmacy
2. **Cash options**
 - a. At bedside
 - b. In-person at pharmacy

Disclaimer: Your discharge process might be delayed due to not having a method of co-pay at the time of medication delivery or a delay in delivery from the outpatient pharmacy.

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Discharge Process, Time, and Getting Home

Home physical therapy is set up by your discharge coordinator starting your day of surgery. Once you are discharged, home PT will come to your home and continue for 1 week after surgery. Once your home therapist releases you to outpatient therapy, you can choose a facility close to your home. Call our office and let us know who to send your PT orders to. It is helpful to have the name of the facility and their fax number to provide to us.

Your nurse will go over your discharge instructions with you. Same day surgery patients will be discharged 4PM – 5PM day of surgery. One night patients will have a mega PT session the next morning after they stay the night and discharge is 11AM. Have your ride pick you up at these times. If for some reason your ride is delayed, we may ask you to wait in the Family Lounge.

Sometimes your discharge process may be delayed for reasons such as:

- The inability to urinate.
- Not having a method of co-pay ready for take home medication that will be delivered to your bed side.
- Delayed take home medication delivery (to patient's bedside) from the hospital's outpatient pharmacy.

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