

Meridian Clinic Hip and Knee Replacement Information Sheet

You have been booked for a consultation for a hip or knee replacement with one of the surgeons at Meridian Clinic. We realize that the wait times for hip and knee replacement are quite long, and it is often difficult to remember everything that was discussed at your appointment. We would like to take this opportunity to provide you with a refresher on what to expect, what is expected of you, and the possible risks associated with this surgery, in case anything was overlooked or has been forgotten. Our goal is to ensure that everything goes as smoothly as possible for you, with minimal delay.

General Information

- Hip and knee replacements are large surgical procedures, which require a stay in hospital.
- Patients usually spend 1-2 days after surgery in hospital (for example, surgery on Monday and discharged home from hospital on Wednesday).
- You will be up walking the day/evening of surgery, as early movement has been shown to improve outcomes.
- You will get to work with the physiotherapist while in hospital, and you will have to do physiotherapy as well once you are discharged home.
- It can take up to 6 months for full recovery, however every patient is different.
- You will generally see the surgeon for follow-ups at 2, 6, and 12 weeks after surgery. X-rays will be taken at most appointments, except for the 2 week appointment, which is for skin staple removal.
- Immediately after surgery getting around will be more difficult, and you will require the use of a walker. Stairs will be especially difficult.
- You will not be allowed to drive for between 6 and 12 weeks, so **it is important to have at least one support person to help you get to appointments and to physiotherapy.**
- Hip replacements require extra care about the position of the leg/hip for the first 3 months after surgery (hip precautions).
- Most hip and knee replacements are done with the use of a spinal anesthetic, which is generally the safest option for most patients. In addition to having an overall lower risk of complications, spinal anesthetics have been shown to decrease the risk of blood clots after surgery, help with postoperative pain control, and have less risk of nausea and confusion after surgery. Your anesthesiologist will speak to you about this further at your preoperative appointment.

Approximate Timelines

- Current wait time for hip or knee replacement from the date of your appointment with the surgeon is between 12 and 18 months.
- Do not call the booking office at the hospital regarding your surgical booking or possible surgery dates, as they are unable to provide this information. If you have questions, please contact our office and we will do our best to answer them.
- The booking office at the hospital will call you with a surgery date approximately 2 months prior to the proposed surgery date. If this date does not work, they will attempt to find one alternate date that works for you. If you are unable to accept a surgery date when this happens, your booking will be cancelled. **Do not sign consent for surgery, unless you are ready and prepared to proceed.**
- When you are given a proposed surgery date, you will also be given a date for an appointment with anesthesia (PAC) either in person or virtually. This is usually 3-4 weeks prior to surgery. This is a long appointment involving anesthesia, nursing, physiotherapy/occupational therapy, pharmacy and have a new set of x-rays taken. **It is important to have your support person with you, as there is a lot of information to take in.**
- When you are given this date, it is important to book an appointment with your family doctor to complete your preoperative history and physical form, which must be done prior to your anesthesia appointment. When you see your family doctor, they may send you for some blood work or tests, and it is important to get this done immediately as those results need to be

available for your anesthesia (PAC) appointment. If you do not get this done prior to your appointment, your surgery could be delayed.

- You will generally see your surgeon for follow-up at 2, 6, and 12 weeks after surgery.
- If you require more than 1 surgical procedure, the 2nd one will be booked as soon as you are recovering well after the 1st one (usually at the 6 week follow-up appointment).

Things To Do Before Surgery

- **STOP SMOKING.**
 - This is non-negotiable, as smoking prior to a hip or knee replacement has been shown to significantly increase the risk of almost all complications (please see following page for list of possible complications from hip or knee replacement surgery). Your family physician is an excellent resource for smoking cessation, and more information is also available from our office. You need to have quit smoking by the date of your anesthesia (PAC) appointment at the hospital. **IF YOU ARE STILL SMOKING ON THIS DATE, YOUR SURGERY WILL BE CANCELLED.**
- Exercise/stay active.
 - The hip and knee replacement booklet available at the physiotherapy department at the hospital has some excellent exercises to be doing prior to surgery. If you are in better shape and stronger prior to surgery, the recovery is better/easier.
- Good diabetic/sugar control.
 - Better control of diabetes/blood sugar levels decreases the likelihood of several of the risks associated with hip and knee replacement. Work with your family doctor on diabetic control, with a hemoglobin A1c of less than 8 being required, and the closer the number is to 6, the better.
- Weight loss.
 - While we realize it is difficult, weight loss has been shown to decrease some of the risks associated with hip and knee replacement, as well as making recovery easier. This often requires a combination of diet changes, exercise and working with your family physician.
- Make arrangements to have a support person/help available, and some people require a change in living situation in the short-term due to decreased mobility and function (such as having a place with less stairs).
- Obtain necessary equipment/assistive devices.
 - This will be discussed and arranged at your PAC appointment with the help of Physiotherapy and Occupational Therapy. Typically this includes a walker (two wheeled or standard, not four wheeled), compression stockings, a raised toilet seat/commode, tub transfer bench (tub/shower combo) or shower chair (walk-in shower), and a "Hip Kit". These items may be available to borrow from Home Care (Alberta patients) or Sask Abilities (Saskatchewan patients). If unavailable to borrow at the time of your surgery, you are responsible to purchase these items.
- Obtain a cryo-unit/Cold Rush.
 - We strongly recommend the use of these devices in the postoperative period, as they significantly reduce pain, swelling, and inflammation. They are available to rent or purchase from our office, and more information can be provided.
- Book an appointment with your family physician for completion of your preoperative history and physical exam form.
 - This should be booked as soon as you are contacted with a surgery date, and any blood work or tests ordered by your family physician should be completed as soon as possible to avoid surgical delay. **If you do not have your blood work completed prior to your anesthesia clinic appointment, your surgery will likely be delayed.**