Rapid Recovery process of the Total Joint Replacement Patient

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What is Rapid Recovery?



Faster recovery with less pain.



Collaborative team approach and support from Surgeon and clinic staff, Anesthesia, Nurse Navigator, TCC, Pre-assessment Nurses and Hospital staff.



Advanced Anesthesia methods such as multimodal pain management, has the patients feeling less pain during recovery and can effectively manage symptoms with limited narcotic medications.



Efficient and minimally invasive surgery techniques.

Robotic Surgery technologywhich allows the Surgeon to perform with more precision.



Ambulation within hours of surgery.

Is the patient a good candidate?



IDENTIFYING HEALTHY,
MOTIVATED PATIENTS DURING
THEIR PRE-OPERATIVE
ASSESSMENT WITH THE
SURGEON.



HEALTHY BODY WEIGHT.



IN GOOD PHYSICAL CONDITION
WITH NO MAJOR MEDICAL
ISSUES.



HAS A GOOD SUPPORT SYSTEM AT HOME TO AIDE IN THEIR RECOVERY.

Comprehensive pre-operative testing and education.

- AHN Orthopaedic Diamond Care Program- Comprehensive and coordinated approach to Total Knee and Total Hip Replacement surgery designed to improve patient outcomes, quality of care, the patients experience and lowering the cost of care.
 - Each patient receives a comprehensive Educational Guide from the Surgeon's office which provides step by step instruction for patients to follow 6 weeks before surgery to 3 months after.
 - Provided pre-operative exercises to practice.
 - Orthopedic Nurse Navigator provides additional support and education through classes, phone calls and in person discussion to prepare patients and their support person on what to expect during recovery to achieve the most successful outcome.
 - Identify durable medical equipment (DME) and adaptive equipment needs.
 - Pre-arranged with Home Health Physical and Occupational therapy begins the day after surgery.
- Pre-Anesthesia Testing, Interview and Education by a member of our Anesthesia staff.
- Primary Care Physician clearance

Anesthesia and Pain Management

- **Spinal with Monitored Anesthesia Care** (Twilight) Prevents patients from moving or feeling anything from the waist down for 2-3 hours.
- General Anesthesia Used if patients can not undergo spinal anesthesia.
- Peripheral Nerve block
 - Total Knee Replacement- Adductor Canal Block- Can be a single shot of a numbing anesthetic, with pain relief lasting 12-48 hours, or infusion catheter which remains in place until post op day 3.
 - Total Hip Replacement- Quadratus Lumborum, QL block- Single shot of a numbing anesthetic, with pain relief lasting 12-48 hours
- Pre op lovera treatment
- Low dose oral narcotic prescribed at discharge
 - NSAIDS
 - Non narcotic pain medication

Day of Surgery

Patient is scheduled for early OR time

Average procedure time 1-1.5 hours
Transferred to PACU

PACU

Average length of stay 2 hours

Transferred to Ambulatory Surgery Center when cleared by Anesthesia

Ambulatory Surgery Center Meds to beds- Pharmacy team member delivers discharge prescriptions to the bedside

Patients are given liquids and something to eat

Orthopedic Nurse Navigator visit

Patients are given reusable ice packs and wrap, extra dressing supplies and Ted Hose to take home

After an hour in the ASC, Physical and Occupational Therapy will evaluate

Physical and Occupational Therapy Evaluation

- <u>Physical Therapist</u> will evaluate gait (average walk of 100 feet), ROM, strength, stair/curb negotiation, safety awareness, provide home therapy exercises and answer questions.
- Occupational Therapist will evaluate patient with dressing in their own clothing, transfers, safety awareness, ADL's, review DME needs, demonstration of adaptive equipment and answer questions.
- Patients support person is encouraged be present for Therapy Evaluation

<u>Discharge</u>

- Combined assessments from Surgeon/Physician Assistant, Anesthesia, PT/OT and Ambulatory Surgery Nurses to determine a safe discharge.
- Discharge instructions reviewed with patient and support person by the ASC nurse.
- Transported to vehicle via wheelchair.
- Home Health Therapist will call patient that evening to confirm the time for first visit the following day.
 - In Home Therapy will continue for 2 weeks
- Patient will schedule a 2 week follow up appointment with Surgeon.

If patient is determined unsafe for discharge, Extended Recovery orders will be requested and bed placement process initiated.

Home Care Physical Therapy Start of Care Assessment

- Initial patient visit is designed to establish:
 - Home care needs
 - Care team
 (PT, OT, RN, SLP, MSW, etc.)
 - Patient specific plan of care
 - Educational deficits
 - Goals of treatment
 - Patient support system



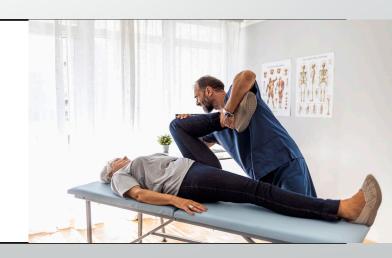
What does the initial home care visit look like?

- Consents obtained
- Vitals every shift
- Full medical history obtained
- Medication reconciliation
- Wound assessment/wound care if ordered
- Patient goals and treatment plan
- Reviewing D/C instructions



What are they teaching your patients?

- Gait training
- > ADL's and bed mobility
- > Fall Prevention
- Post op protocols and exercises



AHN Rapid Recovery/Same Day discharge 2023 Volume

Forbes Hospital

Knee Replacement-458

Hip Replacement- 309

Same day D/C -283

Monroeville Outpatient Surgery Center

Knee Replacement- 66

Hip Replacement- 56

Same Day D/C- 122

Canonsburg Hospital

Knee Replacement -115

Hip Replacement- 134

Same Day D/C-212

Saint Vincent Hospital

Knee Replacement- 275

Hip Replacement- 523

Same Day D/C-604

Wexford Hospital

Knee Replacement -659

Hip Replacement-451

Same Day D/C-673

Jefferson Hospital

Knee Replacement- 482

Hip Replacement-309

Same Day D/C- 372

Allegheny General Hospital

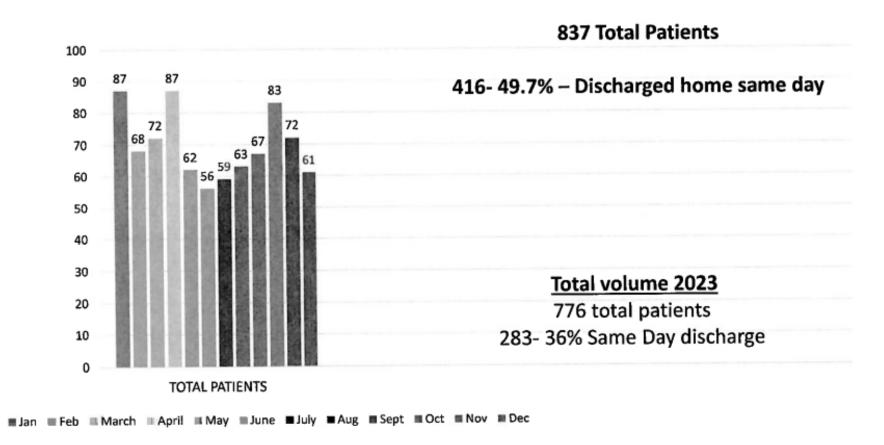
*From July-Dec 2023

Knee Replacement -180

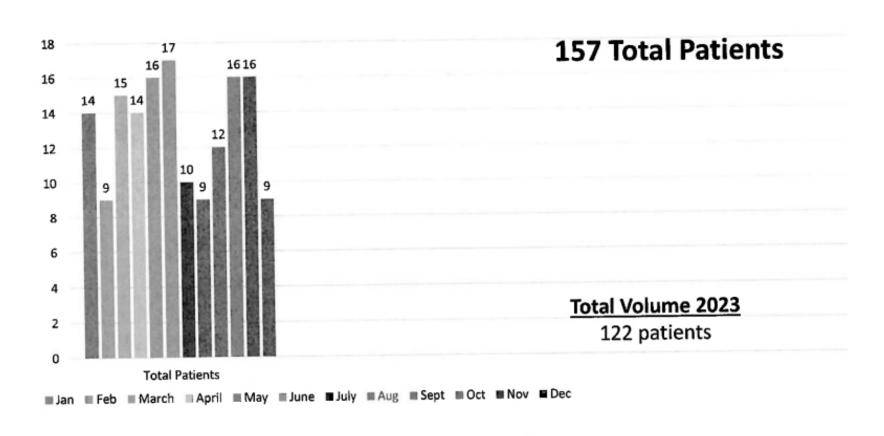
Hip Replacement- 148

Same Day D/C-103

Forbes Total Volume of 2024



MASC Total Volume of 2024





<u>Overview</u>

 Rapid Recovery is a combination of educational, surgical and recovery techniques that speed up the healing process to achieve optimal results allowing patients to resume most daily activities in just a few short weeks.