

TOTAL JOINT SUCCESS

Your Guide to a Total Joint Replacement



THANK YOU FOR CHOOSING US

Thank you for choosing Colorado Advanced Orthopedics at Pioneers Medical Center for your orthopedic surgery needs.

Our goal is to provide personalized care to help you get back to the full and active lifestyle you desire. I hope you find the small-town atmosphere welcoming. You should never feel rushed or feel like a number. Everyone, including our nurses, medical assistants, physician assistants, physical therapists and administrators, wants you to have a comfortable and positive experience. I encourage you to provide feedback and ask questions at any time.

We have worked very hard to become the premier joint replacement hospital for Western Colorado. We specialize in shoulder, hip and knee replacement surgery utilizing proven techniques and technology. We are on the forefront of joint replacement advancements, with technology such as the Stryker Mako Robotic-Assisted Surgical Arm for total and partial knee replacements. We utilize advanced templating software called RadLink during hip replacement surgeries to ensure perfect implant alignment. Shoulder replacement implant placement is customized using Tornier Blueprint technology. Coupling proven technology with meticulous surgical technique ensures that we have optimized outcomes and reduce the risks of complications. In addition to primary joint replacement

▼ Dr. Kevin Borchard, M.D.

Dr. Kevin Borchard is a board-certified orthopedic surgeon with a fellowship in total joints. During his joint reconstruction fellowship at the New England Baptist Hospital in Boston, he completed over 900 complex joint replacement surgeries, working with some of the top surgeons in the field.



surgeries, we perform revisions or repairs of previous joint replacements that are not functioning correctly or are painful. Whether an initial joint replacement is complicated by infection, instability, malalignment or has just worn out, revision surgery can provide an effective long-term solution.

You can be confident that your surgery is being performed with the attention to detail that comes with extensive experience and fellowship training. A fellowship is an additional year of training in a specialized field, such as joint replacement surgery. I performed my fellowship at the New England Baptist Hospital in Boston, Massachusetts, one of the busiest joint replacement hospitals in the nation. During my fellowship year, I performed over 900 complex joint replacements and revision surgeries. I had the opportunity to work with many expert surgeons, some of whom designed modern implants and techniques. One of the surgeons I trained with is Dr. Dan Ward, who now joins me as a visiting surgeon at Colorado Advanced Orthopedics. Dr. Ward continues to be an attending surgeon at the New England Baptist Hospital. He is actively involved in research and training fellows. We have each performed thousands of joint replacements and are

constantly looking for ways to improve outcomes and decrease risks of complications.

We have put together an outstanding team of nurses, physician assistants, medical assistants and physical therapists. Everyone works together from the very first clinical visit to the final post-operative follow up to ensure you can proceed to surgery with confidence and complete your rehabilitation successfully.

In addition to joint replacement surgery, Colorado Advanced Orthopedics has assembled a team of fellowship trained surgeons to offer specialized care in hand and upper extremity surgery, spine surgery, sports medicine and traumatic knee surgery and finally, non-operative management of sports and spine injuries with ultrasound guided therapeutics. No matter what orthopedic problem you may encounter, we are with you every step of the way. Thank you in advance for entrusting us with your care.

Dr. Kevin Borchard, MD

Preparing for Your Surgery



Colorado Advanced Orthopedics Sports Medicine and Spine Center is pleased that you and your doctor have chosen us to provide your joint replacement services. We are a team focused on consistently providing excellent care and we work together to assure your success both before and after your procedure.

Contacting Our Team

Have any questions or concerns? The following is a list of our team members and their phone numbers.

Orthopedic Clinic	(970) 878-9752
Orthopedic Clinic Supervisor	(970) 878-9785
Hospital Surgical Department	(970) 878-9311
Anesthesia Providers	(970) 878-9740
Hospital Nursing	(970) 878-9292
Physical Therapy/ Occupational Therapy	(970) 878-9298
Lab	(970) 878-9279
Diagnostic Imaging	(970) 878-9269
Meeker Drugs (on-site Pharmacy)	(970) 878-9797
Discharge Planner	(970) 878-6124
Surgical Authorization Specialist	(970) 878-9316
Pioneers Medical Center Main Line	(970) 878-5047

In the event of a medical emergency, please call 911.

Pre-Surgery Checklist	
Your surgery is scheduled for:	
□ Visit with your Primary Care Physician It is best to complete this as soon as test, such as an EKG, blood work, a na and a chest x-ray. PCP clearance is re	possible to complete necessary asal swab, sleep apnea screening,
 Obtain dental clearance prior to surge six months of your surgery. If you have is necessary. 	•
☐ Pre-Operative Visit with Orthopedics	:
☐ For Total Knee Replacements: Make C pre-operative visit.	CT Scans will be obtained at your
 □ For Total Shoulder Replacement: Torr obtained at your pre-operative visit 4 	
☐ Complete the Patient Medication Rec	ord below.
 Purchase or acquire necessary safety your return home following surgery. 	and comfot equipment ready for
Additional help and resources can be found thro supplies retailers (e.g. Walgreens or Walmart), a friends and family, or local non-profits, such as	physical or occupational therapist, your
tient Medication Record	
tient Name:	Date of Birth:
ergies:	

Medication Name	Dosage	How taken?	How often?	When did you start?

Things to Know Prior to Your Surgery Dental Evaluation

The incidence of infection after total joint replacement is very low, but an infection may occur if bacteria enter your bloodstream. To reduce the risk of infection, major dental procedures (such as tooth extractions and periodontal work) should be completed before your total joint replacement surgery. After your total joint surgery, it is recommended that you receive a dose of prophylactic antibiotics 1 hour prior to any dental procedure lifelong. Avoid dental work for at least three months, post operation, unless it is an emergency. Please discuss this with both your dentist and your primary care provider for your future healthcare planning.

Nicotine & Tobacco Use

Nicotine use prior to and after surgery can cause delayed healing, which can cause an increased risk for infections. We require our patients to quit all nicotine use at least 6 weeks prior to surgery and 6 weeks after surgery. If you use any smoke or vapor products, we advise you to stop as soon as possible. You can speak with you Primary Care Provider about smoking cessation options that will best suit your needs. Patients may be prescribed a nicotine patch during their hospital stay if indicated.

If you use smokeless tobacco, we also encourage you to quit as soon as possible. Your Primary Care Provide may test your nicotine levels at the time of your pre-operative appointment. Your surgeon and/or anesthesia provider reserve the right to postpone or cancel your surgery based on your nicotine use and/or nicotine levels.

Pre-Surgery Recommendations
Get yourself physically ready for surgery. Engage in exercises that have limited joint stress but allows you to exert yourself. Swimming using a kick board in the water, bicycling, stationary bike, recumbent stepper, seated aerobics are great examples of exercises that will prepare you for surgery and improve your recovery time. Consult with your provider if you have a cardiac condition. Avoid pedicures prior to a total join operation, as it can increase the risk for infection.

Please leave all valuables at home, including any jewelry you regularly wear. The surgical department will call you 5 to 7 days prior to your day of surgery to let you know both the time of your procedure and when to arrive at the hospital. If you do not hear from the surgical department, please reach out to them directly at (970) 878-9311. We recommend

packing a small, overnight bag with person hygiene items, an extra set of comfortable clothing, a robe or loose-fitting pants, and a comfortable pair of shoes. If you utilize a CPAP or BIPAP machine, we ask that you bring that with you. Additionally, please bring any medications you take at home, including any inhalers you have been prescribed.

If you currently use any mobility devices or have obtained any for the recovery period, bring them with you on the day of your procedure, along with a photo identification, and your insurance information or insurance card.

Weight and BMI

If you are undergoing a total knee or hip replacement, your BMI must be equal to or less than 40 at the time of your surgery. BMI, or Body Mass Index, is a combined measurement of a person's height and weight that can be used to inform your provider about the amount of body fat a person carries.

For adults, a BMI between 18.5 and 24.9 is considered to be a healthy weight, whereas 25 to 29.9 is overweight, and 30+ is considered obese. A value below 18.5 is considered underweight. At the time of your consultation, we will work

with you to help you achieve a healthier weight if your BMI is greater than 40, including recommending referrals to a health management program and nutritional services to help you improve your quality of life. A BMI of less than 40 is also associated with better surgical outcomes. In this case, we will coordinate with your PCP to ensure you've met your goal BMI at least one month prior to your scheduled surgical date.

The National Institute of Health (NIH) provides a free, online BMI calculator. There is also a BMI table in the appendix of this booklet for your reference.

Preparing Your Skin

You will be provided with surgical soap and scrub brushes at your pre-operative appointment. Starting three consecutive days prior to your surgery, shower every day with the surgical soap. You are welcome to shower the morning of surgery; however, the surgical department will prepare your skin an additional two times prior to your surgery the day of.

Home Medications

At your pre-operative appointment, we will discuss the need to bring any specialty medications with you to your surgery. These include

medications that we do not carry in our own hospital pharmacy. Please bring these medications with you on the morning of surgery in their original containers. Please make sure that you fill out the patient medication record within this booklet as well. It is critical to have this completed and brought with you to your pre-operative appointment.

Your care team will go over your medications with you once you are admitted to the hospital. Your physician will order the medications that they want you to continue while you are in the hospital. Your nurses will administer these medications. Some of the tablets or capsules that you get in the hospital may be a different shape or color than you take at home; this is because they are a different brand or your physician has made a change in your therapy. If you take your medication at a certain time at home and you want to continue with that schedule, let us know. We can adjust to a schedule that works for you. Your own medications will not be used unless we do not carry a particular medication that you need.

Do not take your own medications without the permission of the nursing staff. If you have questions about any medication you receive in the hospital, please consult with your

nurse or our pharmacist.

Additional Considerations for Your Surgery and Recovery

- Transportation Arrange for transportation home after your hospital stay. It is not uncommon for patients to be unable to drive for the first 2 weeks following surgery.
- Groceries stock up on extra groceries prior to your appointment or arrange for a family member or friend to deliver groceries to you.
- Meals plan or prepare ahead of time healthy meals.
- Pets and Childcare Taking care of pets or children can be difficult immediately after your surgery. If possible, arrange for child or pet care ahead of time.

Important Note About Your Surgery

We reserve the right to cancel or postpone your surgery if any of the following requirements are not met:

- Clearance by your Primary Care Provider.
- No foods or drinks (nothing by mouth) in the 12 hours before your surgery.

If applicable:

- Dental clearance.
- Your BMI is >40.
- Nicotine use has ceased.
- A1C of 8 or lower (diabetic patients only).
- Specialty clearance is obtained, as instructed by your care team.
- Certain medications are stopped as instructed by your care team.

Preparing Your Home



Much of the success of your joint replacement surgery depends on how well you follow your surgeon's and physical therapist's instructions at home during the first weeks after surgery.

Preparing your home to avoid falls is an important and necessary part of planning for your recovery. A fall during the first few weeks after joint replacement surgery can damage your new joint and may result in a need for further surgery.

Adaptations for Your Home

These are some changes and adjustments you can implement into your home and routine to make recovery safer and easier to navigate:

- Install safety bars in your shower or bath.
- Place a rubber-backed/non-skid rug outside of the shower.
- Install and/or secure handrails along your stairways.

- Identify a stable chair to use during your early recovery with a firm seat cushion (and a height of 18 to 20 inches), a firm back, two armrests, and a footstool for intermittent leg elevation.
- Obtain a toilet seat riser with arms or a toilet frame, if you have a low toilet.
- Obtain a stable tub transfer bench or chair to use during showering.
- Install a hand-held shower nozzle.
- Ensure paths in the home are free of throw rugs, loose carpeting, clutter and cords.
- Create a temporary living space on the main floor for the first few weeks because walking up and down stairs will be more difficult during your early recovery.

Examples of Assistive Devices



Frame or bedside commode



Shower or tub transfer bench



Toilet seat riser with handles

Other assistive devices include a reacher, a chair with armrests, non-slip mats, long-handled sponges or brushes, and even sock or shoe aids. If you have any questions or concerns about the assistive devices you may need, don't hesitate in contacting your Orthopedic team.

- •Locate any assistive devices you already own or those you plan to borrow from another person.
- Practice using them in the home to determine if your doorways are wide enough for the equipment.
- •If you can, bring your doorway measurements with you.

Your physical therapist will help determine the most appropriate assistive device for you to use during your recovery. If you do not already have an assistive device (walker, cane, crutches) your rehabilitation team will assist you in obtaining one. For example, we strongly recommend a front wheeled walker over a four wheeled walker.

The Day of Your Surgery



It's our goal to ensure that the day of your surgery goes as smoothly as possible. You should expect arriving a few hours prior to your scheduled procedure time to allow time for the team to prepare you for surgery.

Admission to the Hospital

You will be admitted to the hospital a few hours prior to your surgery. During this time you will be prepared for surgery and have the opportunity to speak to your registered nurse, anesthesia provider and your surgeon.

What to Expect

Once you have been fully prepared for surgery, you will be taken to an operative suite where your Surgical Team will perform your procedure. On average your procedure can take 1-3 hours.

Anesthesia

Anesthesia is the process of inducing a pain-free, tranquil, sleep-like state

for your surgery. Your anesthesia provider has several options to carry you comfortably through surgery without pain. Some medical conditions may make one option more preferable. Whichever technique is chosen, you can be assured that your operating room experience will be a comfortable and painless one.

General Anesthesia

You are first given medication to induce a sleep-like state, followed by a gas anesthetic agent administered by a mask into your lungs. During the operation, you will be attached to monitors that display information on your heart rate and rhythm, the oxygen level in your bloodstream, your body temperature, and your

blood pressure. Your anesthesia provider continually checks these monitors to ensure your safety and comfortable care in the operating room setting.

Regional Anesthesia

There are many types of regional anesthesia that can be implemented in your care. Spinal, epidural, or femoral and sciatic nerve blocks may be used in combination or individually to assist with your pain control. Femoral nerve blocks are administered in your pre-operation room with the use of ultrasound and medications administered through an IV. When this type of anesthesia is used, you are monitored as described above for general anesthesia during your procedure.

Some patients may not consider regional anesthesia because they believe they will be awake during the procedure. This is not true. In regional anesthesia, you also receive medications that allow you to sleep peacefully throughout the operation. However, unlike general anesthesia, when regional anesthesia is discontinued, you will awaken almost immediately and with minimal pain. This is because the anesthesia in the area blocked will still be working after you awake.

After Your Surgery

After your surgery is complete, you will spend time recovering in two units: the Post-Anesthesia Care Unit and the Medical/Surgical Unit.

Post-Anesthesia Care Unit (PACU)

You will be brought immediately following surgery to the PACU where an RN will monitor you one-on-one to make certain you are stable and your pain is under control. You may be in PACU for 30 minutes or up to 2 hours. Your family may not be able to see you until you leave the recovery area.

Admission to the Medical/Surgical Unit in the Hospital

You will be given a private room where your family and friends will be able to visit you from this point forward (unless otherwise indicated given infectious disease restrictions, such as COVID-19). Your vital signs will be monitored frequently to assure that you remain stable. It is normal to feel very groggy, sleepy and possibly nauseated. Please communicate this with your nurse so that he/she can help you to feel better.

Other After Surgery Guidelines

There are other important considerations to keep in mind during your hospital stay immediately after surgery, including antibiotics, blood clot prevention, and diet.

Antibiotic Therapy

Antibiotics may be continued for the first day after surgery to help prevent infection.

Blood Clot Prevention

A Thromboembolic Disease (TED) hose and sequential compression devices will be placed on your lower extremities to help prevent blood clots. You are encouraged to wear these for at least two weeks after your surgery.

Diet

You will be started on sips of water and clear liquids. Your diet can be advanced as your post-surgical teams deems that you are able to tolerate it.

Getting Out of Bed

If you have had a nerve block, you may be very unsteady and the risk of falling is greater than you may perceive. It is very important that you do not get out of bed without assistance. The therapy staff will assist you and show you techniques to keep yourself safe.

Medications for Constipation

With the increased use of pain medications, a stool softener is usually started to decrease the risk of constipation. This can be continued at home as well.

Nicotine

If you are a smoker please let us know. Though we are a non-smoking facility, your comfort is very important to us. Please let us know right away if you desire a nicotine patch. If you would like more information on quitting smoking, we have excellent resources available.

Oxygen

Oxygen therapy may be required following surgery while you are still groggy. In some cases, oxygen therapy will continue after you are discharged.

Ice Therapy

Ice packs will be placed on your surgical site(s) during your stay to help alleviate inflammation. Cooling therapy is further explained in the next chapter.

Respiratory Care

The Incentive Spirometer (IS) is a very important device that helps you maintain proper lung function.
Surgery and lack of mobility can interfere with the normal functioning of your lungs. We will be asking you to use your Incentive Spirometer every 30 minutes while you are awake after your surgery. Your post-surgical team will assist you with using the device.

Surgical Dressing

You will be released from the hospital with a water resistant dressing. This dressing is safe for the shower but is not intended for soak in water. If the dressing gets wet on the absorbent part of the dressing, please call out orthopedic office. Otherwise, the dressing stays in place for two weeks and will be removed at your 2-week post op appointment.

Urination

It is not uncommon to have some difficulty urinating following surgery. There are times that a catheter needs to be placed to drain your bladder. We will be monitoring your urinary output closely in the hospital setting.

Mobility

Your nurses or physical therapist will help you to get mobile as soon as it is deemed appropriate by your care team. Our goal is to get you up and moving as soon as possible to promote better healing and recovery; including the same day as your surgery if possible.

Pain Management



Managing your pain after your surgery is important to both your recovery and to us. During your stay, you will continuously discuss your pain management goals with your nurse who will document and track your pain.

Understanding Your Pain

Pain in some form is expected after a surgical procedure. Pain can include many types of discomfort and can occur in various places in your body. It might be described as any of the following: a dull ache, pulling, tightness, cramping, burning, stabbing, or other unpleasant sensations.

Managing your pain after surgery is one of our top priorities. Different scales can be used to assist you in measuring your pain. This information will be important to give to the doctor and nurses so they can determine which medications to use to help lower your pain. It is important have tolerable levels of pain control during

your recovery to promote healing and to ease movement and physical therapy.

Setting Goals for Pain Control

To perform your activities of daily living, you need to set goals for your pain control. One of these goals should be a tolerable level that allows you to participate in your recovery activities. Some of those activities may be coughing and deep breathing right after your surgery. Other activities will include working with physical therapy to regain mobility.

As you begin planning for going home, your goals for pain will continue to change as your activities increase. Studies show if your pain

rating is a "4" or higher (out of ten), you may find it much more difficult to carry out your daily goals. It is very important to talk with your Orthopedic Team as honestly and openly as possible about your pain, so your treatment can be adequately managed.

Important Points to Remember While Taking Pain Medication at Home

- Carefully read the instructions on the labels for dosage, frequency, and any precautions.
- Your providers may provide suggestions for at home pain management. Be sure to follow your provider's directions on how much to take and how often.
- Some pain medications may make you sleepy and dizzy. For these reasons, it is not recommended to operate a vehicle or other machinery whilst you are taking these medications.

Using Cooling or Ice Packs at Home

The application of an ice pack or frozen gel pack can help reduce swelling. Use an ice pack or frozen gel pack for as directed by your care time. If you are using an ice pack, place a clean, dry towel between your skin and the ice pack. Do not place the ice pack directly on your skin. For frozen gel packs, place it inside the included sleeve or use a towel as

previously described. Wait at least an hour and a half to two hours before using an ice pack or frozen gel pack again. Do not use cooling therapy on any red areas or if you have any burning or numbness. Consult with your Orthopedic Team if you have any questions about cooling therapy.

Inform your medical team if you experience any of the following:

- Dizziness
- Nausea or mild stomach pain
- Constipation (consider using stool softeners)
- Unusual tiredness or weakness
- Confusion

Additional Resources

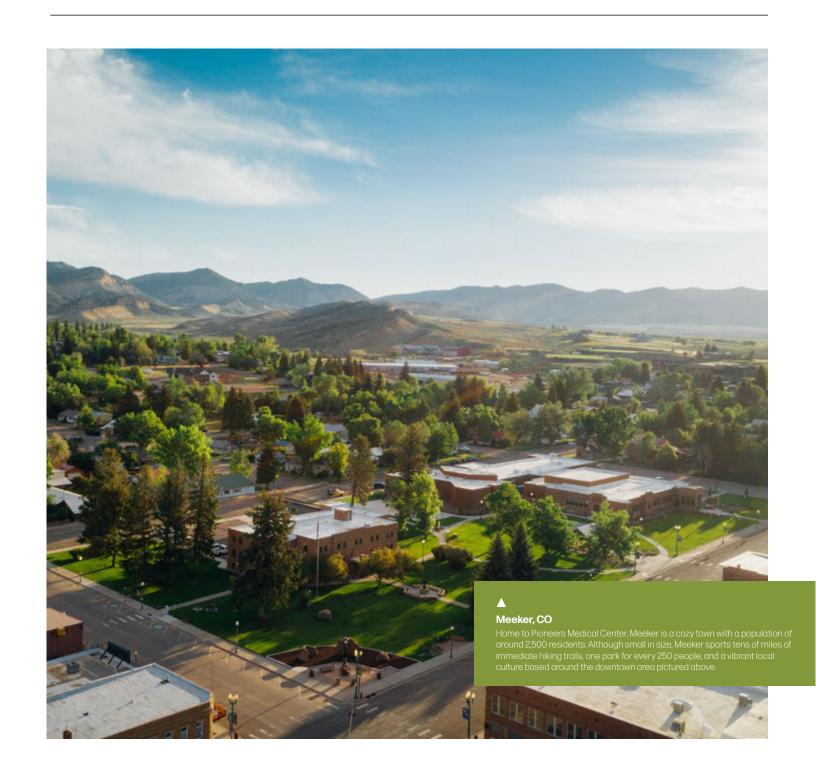
Please note that these resources are here to supplement information provided to you by your Orthopedic Team.

American Association of Hip and Knee Surgeons www.hipknee.aahks.org/

National Institute of Arthritis and Musculoskeletal and Skin Diseases www.niams.nih.gov/community-outr each-initiative/understanding-jointhealth/joint-replacement-surgery

In the event of a medical emergency, please call 911.

Medications to Know About



The following list of medication explanations are provided as a convenient reference. You may be prescribed some of these medications for after your hospital stay to help you recover and avoid complications.

We recommend reviewing this section, as food and drug interactions may occur with some of the medications you may be prescribed, along with any herbal or nutritional supplements you are currently taking or may be taking in the future.

Herbal preparations and food supplements also have the potential to affect how prescription medications work. It is important to discuss these with your Orthopedic team and caregivers so you and they are fully informed. If you have any questions or concerns about potential interactions, please ask your Orthopedic team for more information.

Anticoagulant and Antiplatelet Medications (Blood Thinners)

You will receive anticoagulant therapy while you are in the hospital. These medications are often called "blood thinners" and are used to keep blood flowing and prevent the formation of blood clots. All patients continue to take a blood-thinning medication for 4 weeks after surgery unless otherwise instructed by the doctor.

The most common Antiplatelet medications are:

 Aspirin taken once (or twice) a day for 4 weeks

The most common Anticoagulant medications are:

- Lovenox® an injection given in the abdomen once (or twice) a day. Your doctor will control the dosage and length of time you are on this medication.
- Coumadin® (warfarin) taken by mouth, usually daily. A blood test helps the doctor determine what the dosage of Coumadin® should be. If your doctor prescribes Coumadin® after you go home, you will also need to have your blood levels checked as often as your physician orders
- •Eliquis (apixaban) blocks the activity of certain clotting substances in the blood and often used after hip or knee replacement surgery to prevent a type of blood clot called deep vein thrombosis (DVT), which can lead to blood clots in the lungs (pulmonary embolism).

Your bleeding time will be monitored, therefore it is important to maintain a consistent diet of foods containing Vitamin K. Vitamin K affects the clotting factors in your blood, therefore it is important to avoid unusual increases or decreases of foods high in Vitamin K. It is best to avoid strictly vegetarian diets that consist of foods high in Vitamin K.

It is important to limit your consumption of alcoholic beverages

when taking these types of medications. Ask your doctor how much, if any, alcohol you may consume.

Herbal Preparations and Food Supplements

Due to the tremendous numbers of preparations and products available, and the potential for significant interactions with medications you may be taking during your hospitalization, it is important to tell your doctor, nurse, and pharmacist before taking any supplements.

Examples of medications that require special considerations are on the table on the next page. It is imperative that you check in with your Orthopedic Team if you are unsure about starting a new herbal supplement. Herbal preparations or food supplements should be avoided if you are pregnant or breast-feeding, unless your doctor has specifically instructed you on their use.

Herbal Supplements and Interactions with Medications

Herbal supplements have the potential to interact with many different classes of drugs or with specific medications, including but not limited to:

Anxiolytics (anxiety medication) Blood thinners
Antidepressants Beta-Blockers

Digoxin Diuretics

Lithium Diabetic medications (oral)

Sedatives Steriods

Wafarin (Coumadin®)

These herbal supplements may lead to drug interactions, such as with those listed above and potentially other unlisted medications:

Echinacea Feverfew
Fish oil Garlic
Ginko Ginseng
Guarana Hawthorn
Kava-Kava Licorice
Ma Huang Red Yeast

Saw Palmetto St. John's Wort

Yohimbe Vitamin E Valerian Kratom

Some multivitamins or combined supplements may contain some of the herbal supplements listed above. Be sure to check the supplement information on the containers for any ingredients that may be on this list.

If you are unsure whether or not a supplement you take or are planning to take will interfere with your medications, please don't hesitate in reaching out to your Orthopedic Team.

Physical and Occupational Therapy



Rehabilitation During Your Stay

Typically, you will have a one-night stay in the hospital. You may qualify for extended rehabilitation, either hospital-based or off-site, under your insurance plan if a longer stay is needed. During your hospital stay, you will receive physical and occupational therapy services to optimize your independence and safety prior to discharge. In the hospital, our rehabilitation team will work with you 1-2 times a day. The rehabilitation team will also participate in your discharge planning to determine what equipment and level of assistance you will need in order to return home safely.

Outpatient Physical Therapy (PT)

For some procedures, we will refer you to outpatient physical therapy services to assist you in regaining your mobility with your new joint(s).

For Total Knee Replacements

An initial outpatient PT visit should be scheduled the same week of surgery. Please ensure that this is scheduled prior to your surgery. Outpatient PT will take place up to three times a week for six weeks.

In the first three weeks after your surgery, your physical therapist will prioritize getting your knees straight. This also means that there are no

pillows or support under your knee (ankle support is acceptable). This is imperative to your final recovery.

Outpatient PT will teach you appropriate restorative exercises, how to properly transfer in and out of bed, walk correctly with and without an assistive device, ascend and descend steps, and perform other functional movements of your new joint(s).

Total Hip Replacements

You won't go to outpatient physical therapy during the first six weeks after your hip surgery. Typically, you will be on a walker for two weeks, then progress to a cane for another two weeks. The cane goes in the hand that is opposite of your surgical hip. If at six weeks your gait or walk requires correction, a referral to outpatient PT will be scheduled. However, the best therapy for your new hip is simply walking!

Total Shoulder Replacements

You will begin PT within a week of surgery. The first six weeks will consist of either one or two PT sessions per week, and they will only include passive range of motion as completed by the therapist. Over the first six weeks, your shoulder should be immobilized and protected to allow for proper healing. You will also

At-Home Mobility Exercises



Pendulum Circles
You can perform
this exercise two
ways, sitting or
standing. For the
sitting position, lean
forward and dangle
your surgical arm in

between your legs. The example image shows the exercise in the standing position. Regardless of the position you chose, you should complete 10 rotations up to three times a day. Your surgical arm should be completely relaxed in the pendulum circle exercise.



Salutes (Elbow Flexion & Extensions)
There are three ways to perform this exercise. The first is an active elbow flexion & extension (Figure 1). Bend and straighten elbow as far as possible.
Hold for three seconds at your end range. The second is a passive elbow flexion (Figure 2). Bend the elbow and use the other hand to push your elbow into greater flexion (into your forehead). Hold for five seconds. The third is a passive elbow extension (Figure 3). Straighten your elbow and use your other hand to stretch your elbow straighter. Hold for five seconds.

be given some exercises to complete at home. After the initial six weeks, you will be able to begin doing more with your arm, such as active and active assisted range of motion activities. Your therapist will determine how many times per week, over the following six weeks, they will work with you to reach full rehabilitation. After you are discharged, we recommend following the exercises to the left to assist with regaining your mobility.

Occupational Therapy (OT)

Your occupational therapist will assess your ability to complete your basic activities of daily living, also called your ADLs. They will also review your home set up with you to better identify and alleviate any barriers to improve your safety and independence once you return home. They can recommend short term or long term modifications to improve safety at home based on your specific needs. The therapist will teach you how to use adaptive equipment and strategies as needed to complete dressing, grooming, showering, and toileting tasks until you have regained your functional range of motion. They will work with you one to two times a day until your ADL goals are met in the hospital.

Discharge Planning & Finances



The hospital discharge planner is one of your best advocates and can assist you with resources for your post-surgical needs. The discharge planner can also assist with setting up home health and various other requests you may have before heading home.

Your discharge planning begins as soon as your surgery is scheduled. There are many plans to make for your return home even before you are admitted to the hospital.

Home Health Services

Some patients may require additional assistance after they get home. You may have a Home Health Care benefit through your insurance. Depending on your condition you may qualify for services at home including physical therapy, occupational therapy, and/or nursing care.

Oxygen Use at Home

If you require oxygen at discharge, the hospital discharge planner can assist in making those arrangements.

Patient Accounting and Billing

The bills associated with a hospital stay can seem complex and confusing. The Orthopedic Clinic has its own financial specialist that can assist you with any questions and help you understand the insurance

coverage for which you are eligible. In addition to a bill from us, you may also receive bills for other pre-operative services such as the MRI, lab work, and anything else your physician may require prior to your joint replacement surgery.

Bills from Other Providers

You may also receive bills from other providers both in preparation for your surgery, and your actual surgery. These charges are for services rendered by these providers at the hospital such as radiology or anesthesia.

Financial Counseling Services

If you have questions about your financial responsibility, Colorado Advanced Orthopedics Sports Medicine and spine will provide you with an estimate of cost by our surgical authorization specialist at your 2 week pre-operative appointment. Any questions that you may have can be discussed at that time. If you are unable to pay your estimated portion at the time of service, you can set up payment arrangements with your hospital's financial team.

For more information or if you have any questions, don't hesitate to reach out to our Surgical Authorization team.

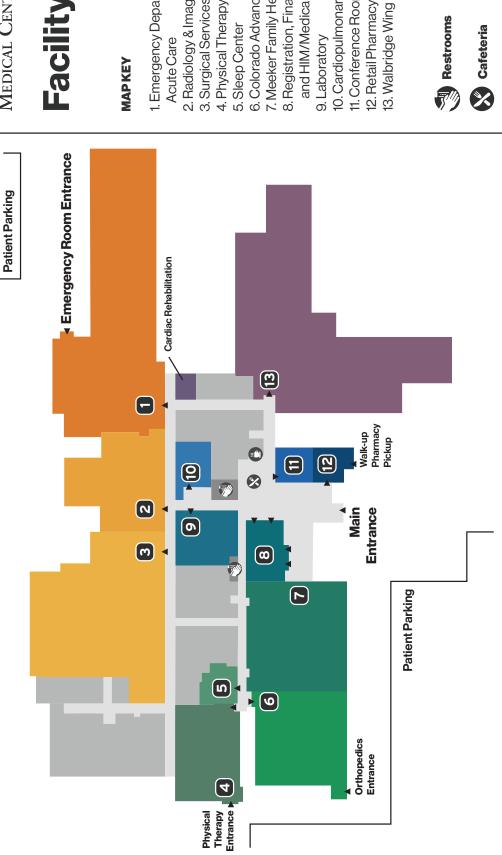
About Meeker

Meeker is a small mountain town located on the famous White River just below the Flat Tops Wilderness Area. Positioned in the Northwestern corner of Colorado, Meeker offers access to an extensive amount of land managed by the Bureau of Land Management, State of Colorado, and Federal Forest Service. Meeker's public land gives rise to unparalleled hiking, biking, snowmobiling, and motorized vehicle trails.



Endless fishing, hunting, and camping along with fun in sun at Meeker's streams, lakes, reservoirs and the White River, are what distinguish this small town as such a desirable destination. Events like Meeker Range Call, the Sheep Dog Trials Championship, Skijoring, Summer Rodeo Series, and the Rineheart

Archery Tour ensure year round entertainment for all ages. We're just a short drive away from larger communities, including Grand Junction, Glenwood Springs, and Steamboat Springs, that offer big city amenities, world class-skiing, charming shops, excellent food scenes, and much more.





Facility Map

MAPKEY

- 1. Emergency Department & Acute Care
- 2. Radiology & Imaging
 - 3. Surgical Services 4. Physical Therapy
- 5. Sleep Center
- 6. Colorado Advanced Orthopedics 7. Meeker Family Health Center
- 8. Registration, Financial Services, and HIM/Medical Records
 - 9. Laboratory
- 10. Cardiopulmonary Services 11. Conference Room
 - 12. Retail Pharmacy





Cafeteria



Coffee Bar

100 Pioneers Medical Center Drive Meeker, CO 81641 (970) 878-5047

Smoke-free Environment

For the safety of our patients, smoking is prohibited within 50 feet of the building.

Our facility is committed to maintaining an inclusive and accessible environment.

Internet access is available for our patients and visitors.

Connectivity

Accessibility

Body Mass Index (BMI) Chart

	Ĭ	eal	thy	×	Healthy Weight		ó	Overwei	wei	ight						Obese	se										X	Extreme		Obesity	sity				
BMI	19	20	12	77	23	24	25	56	27	78	29	30	હ	35	33	34	35	36	37	38	39 4	40 41		42 4	43 44		45 4(46 47		48 4	49 5	50 51	1 52	2 53	3 54
Height													_	Body	/ We) igh	t (po	Body Weight (pounds)	s)																
4' 10"	16	96	100	105	110	115	119 1	124	129 1	134 1	138	143 1	148 1	153 1	158 1	162 1	167 1	172 1	1777	181 18	186 19	191 19	196 20	201 20	205 210	0 215	5 220	20 224		229 23	234 23	239 244	4 248	8 253	3 258
4'11"	94	66	104	109	114	119	124 1	128	133 1	138 1	143	148	153 1	158 1	163 1	168 1	173 1	178 1	183 1	188 19	193 18	198 20	203 20	208 212	12 217	7 222	722 23	27 232		232 24	242 24	247 252	2 257	7 262	2 267
5.0"	97	102	107	112	118	123	128 1	133	138 1	143 1	148	153 1	158 1	163 1	168 1	174 1	179 1	184 1	189 1	194 18	199 20	204 20	209 21	215 22	220 225	25 230	30 235	35 240	10 24	2	250 25	255 261	1 266	6 271	1 276
5'1"	100	106	111	116	122	127	132 1	137	143 1	148 1	153	158 1	164 1	169 1	174 1	180 1	185 1	190 1	195 2	201 20	206 21	211 217		222 22	227 232	32 238	38 243	13 248		253 25	259 26	264 269	9 275	5 280	0 285
5'2"	104	109	115	120	126	131	136 1	142	147 1	153 1	158	164 1	169	175 1	180 1	186 1	191	196	202 2	207 27	213 21	218 22	224 22	229 23	235 240	10 246	16 251	51 256		262 267		273 278	8 284	4 289	9 295
5.3"	107	113	118	124	130	135	141 1	146	152 1	158 1	163	169	175 1	180 1	186 1	191	197	203 2	208 2	214 22	220 22	225 231		237 24	242 24	248 254	54 259	59 265		270 27	278 28	282 287	7 293	3 299	9 304
5' 4"	110	116	122	128	134	140	145 1	151	157 1	163 1	169	174 1	180 1	186 1	192 1	197	204 2	209 2	215 2	221 22	227 23	232 23	238 24	244 25	250 256	6 262	32 267	37 273	3 279		285 291	91 296	6 302	2 308	8 314
5.5	114	120	126	132	138	144	150 1	156	162 1	168 1	174 1	180 1	186 1	192 1	198 2	204 2	210 2	216 2	222 2	228 23	234 24	240 24	246 25	252 25	258 264	34 270	27	6 282		288 29	294 30	300 306	6 312	2 318	324
5'6"	118	124	130	136	142	148	155 1	161	167 1	173 1	179	186 1	192 1	198 2	204 2	210 2	216 2	223 2	229 2	235 24	241 24	247 25	253 26	260 26	266 272	72 278	8 284	34 291	11 297		303 30	309 315	5 322	2 328	8 334
5'7"	121	127	134	140	146	153	159 1	166	172 1	178 1	185	191 1	198	204 2	211 2	217	223	230 2	236 2	242 24	249 25	255 261		268 27	274 280	30 287	37 293	33 299		306 31	312 31	319 325	5 331	1 338	8 344
5'8"	125	131	138	144	151	158	164 1	171	177 1	184 1	190	197	203 2	210 2	216 2	223	230 2	236 2	243 2	249 25	256 26	262 26	269 27	276 28	282 289		295 30	302 308	315		322 32	328 335	5 341	1 348	8 354
5.9"	128	135	142	149	155	162	169	. 9/1	182 1	189 1	196	203	209 2	216 2	223 2	230 2	236 2	243 2	250 2	257 26	263 27	270 277		284 291	91 297		304 311	11 318		324 331		338 345	5 351	1 358	8 365
5' 10"	132	139	146	153	160	167	174 1	181	188	195 2	202	209	216	222 2	229 2	236	243	250 2	257 2	264 27	27.1 2.7	278 28	285 26	292 26	299 306	313	3 320	20 327		334 34	341 34	348 355	5 362	2 369	9 376
5' 11"	136	143	150	157	165	172	179 1	. 981	193	200	208	215 2	222	229 2	236 2	243	250 2	257 2	265 2	272 27	279 28	286 29	293 30	301 30	308 315	5 322	22 329	338		343 351		358 365	5 372	2 379	9 386
.0.9	140	147	154	162	169	177	184 1	191	199 2	206 2	213	221 2	228 2	235 2	242 2	250 2	258 2	265 2	272 2	279 28	287 28	294 30	302 30	309 31	316 324	24 331	31 338		346 35	353 361		368 37	5 383	3 390	0 397
6'1"	144	151	159	166	174	182	189 1	197	204	212	219	227	235	242 2	250 2	257	265	272	280 2	288 29	295 30	302 31	310 318		325 33	333 340		348 355		363 371		378 386	6 393	3 401	1 408
6' 2"	148	155	163	171	179	186	194	202	210 2	218 2	225	233 2	241	249 2	256 2	264	272	280 2	287 2	295 30	303 31	311 31	319 32	326 33	334 342	12 350	358	365		373 38	381 38	389 396	6 404	4 412	2 420
6.3	152	160	168	176	184	192	200 2	208	216 2	224 2	232	240 2	248 2	256 2	264 2	272	279 2	287 2	295 3	303 37	311 31	319 327		335 34	343 351	359	9 367	37 375		383 391		399 407	7 415	5 423	3 431
6'4"	156	164	172	180	189	197	205 2	213	221 2	230 2	238	246 2	254 2	263 2	271 2	279 2	287 2	295 3	304 3	312 33	320 32	328 33	336 34	344 35	353 361	369	39 377		385 39	394 40	402 410	10 418	8 426	6 435	5 443
	_																																		

This chart is for reference purposes only.
Adapted from the National Institute of Health, Body
Mass Index (BMI) Chart: With Every Heartbeat is Life.

Notes

Notes	34









SPORTS MEDICINE & SPINE

PIONEERS MEDICAL CENTER

About Pioneers Medical Center

Pioneers Medical Center is recognized as one of the top 27 hospitals in the West by Becker's Hospital Review for patient experience.

Located in the beautiful intersection between the sandy deserts of Dinosaur, CO and the dense forests of the White River National Forest, Pioneers Medical Center is a community-based healthcare facility dedicated to offering a wide range of competitive and strategic benefits that support all aspects of life and wellbeing in Western Colorado. We focus on building lifelong partnerships with our patients and empower them to achieve optimal health.



Pioneers Medical Center 100 Pioneers Medical Center Drive Meeker, CO 81641 See us in the Colorado Sun!

