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| HIP | Pre Admission | Day of Surgery | Post Op Day 1 | Post Op Day 2 | Post Op Day 3 | Outcome Indicators |
| Expected Patient Outcomes | Total Joint ClassMeet with surgeon, nurse to review your health and any concernsDiscuss Pain Management, review pain scale | You will know and be able to tell us what you know about your operation | You will work with nursing staff for pain reliefYou will work with physical and occupational therapyYou will demonstrate understanding of hip precautions with bed mobility and supine to sit.You will be out of bed for your lunch and dinner | You will work with nursing staff for pain reliefYou will work with physical and occupational therapyYou will demonstrated understanding of hip precautions with bed mobility and supine to sit, with transfers to chair and toiletYou will be out of bed for your mealsYou will transfer with supervision out of bed, to chair and toilet. You will decide on equipment needs for your home. | You will work with nursing staff for pain reliefYou will work with physical and occupational therapyYou will be out of bed for your mealsYou will demonstrate appropriate hip precautions with activities.You will be independent in bed mobility, transfers (bed>< chair, toilet).You will be independent with lower body dressing and bathingYou will go home today or to rehab/skilled nursing facility if need be | You will be independent with kitchen mobility, car transfers.You will be independent with walking aids, curb steps and ambulating 100 ft.You will be independent in home exercise program |
| Activity | You will be taught exercises in your total joint class to begin doing before surgery | SCDs/Ted hoseAnkle pumpsReview hip precautions | Physical Therapy x 2Ambulate/mobilize as toleratedMaintain hip precautionsHip protocol exercisesAnkle PumpsGait trainingWeight Bearing StatusIn chair for lunch/dinnerPT assess needsAmbulate in room | In chair for all mealsAnkle Pumps AROM, gait training with walker/crutches, stair climbing with deviceHip protocol exercisesHip precautionsInitiate stair climbOccupational Therapy evaluation ADL equipment | In chair for all mealsAnkle Pumps, Ambulates with walker/crutches, stair climbing with device,OT reviewAdvanced hip exercisesHip precautionsTransfer out of bed | Independent with active exercise Independent SLR with < 5 - 10 degree extension with leg, Independent transfersAmbulation with deviceStair climbingADLsIndependent with active exerciseDemonstrate hip precautions |
| Evaluations |  |  | Specialty consultsPT evaluationsCase managementCare Conferences - (d/c rounds) | Care Conferences - (d/c rounds)PT evaluationsOT evaluations | Care Conferences - (d/c rounds)PT evaluationsOT evaluations | Follow up with surgeonFollow up with PCP |
| Diagnostic Tests | Labs, X-rays and possibly an EKG | Post op X-ray HipHgb/Hct | CBCPT/INR if appropriate | CBCPT/INR if appropriate | CBCPT/INR if appropriate |  |
| Diet | Please tell us if you are on a special diet | Clears ADAT | Regular diet | Regular diet | Regular diet | Tolerating diet |
| Discharge Planning | Plan Ahead:Ride to hospitalRide homeHelp/assistance at homeReview discharge planning in total joint binder | Identify patient's primary payor source to determine what services patient is eligible for | Briefly meet with patient/family members to explain scope of services available based on needs and payor source | Meet with patient/family members to determine which home health agency, Rehab, SNR or OP PT facility patient would prefer to use.  Send appropriate order(s) to selected agency.  Give patient agency name and contact information | Meet with patient /family members to remind them of appointments/chosen agency. Answer any last minute questions patient/family members may have. | Patient is discharged to appropriate level of care with appropriate service/discipline referrals.Patient will be discharged to a safe environment with appropriate referrals. Home Health/Home PT/Outpatient PT.Review agency name and contact information |
| Medications/IV | We will talk with you about any medical problems and what medications you take and what you can take before the day of surgery | Pain ManagementPCA peripheral nerve blocks IV fluids IV antibioticsAnti-emeticsResume home meds | Pain Management:D/C PCAPO/IV medsD/C fluidsAnti-emeticsLovenox/Arixtra/ RivaroxabanBowel regimen | Pain mangementPO medsLovenox/Arixtra/ RivaroxabanBowel regimen | Pain managementPO MedsLovenox/Arixtra/ RivaroxabanBowel regimen | Anticoagulation teaching completePain level 1-3 , POD #3 pain level 2Bowel functioning WNL |
| Respiratory | You will be shown how to use an incentive spirometer (IS) | Pulse OxIS O2 NC | Wean O2, continue IS, continue monitoring O2 | IS independently | IS independently | Adequate air exchange CTAB |

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| Treatments |  | VS q 4 hoursPain q 2 hoursNursing assessment per protocolNV check q 4 hoursContinous pulse ox monitoringAssess dressingsMonitor and record drainsTEDS/SCDsI/Os FoleyClear diet (ADAT)IS education Post op abx**Hct 1800**  | D/C foley 9:00 AM after CPMVS q 4 hoursPain q 2 hoursOral pain managementIV meds for breakthroughD/C PCAD/C IV fluidsNursing assessment per unit protocolNV check q 4 hoursIS educationTEDs/SCDsI/OsCheck HCT - may transfuseAmbulate with nurse in afternoon if PT not available | VS q 4 hoursPain q 2 hoursNursing assessment per unit protocolTEDs/SCDsI/OsIS educationNV checks q 4 hoursOral pain managementIV meds for breakthroughAmbulate with nurse in afternoon if PT not available | VS q 4 hoursPain q 2 hoursNursing assessment per unit protocolTEDs/SCDsI/OsChange dressing ShowerOral pain managementIV meds for breakthroughAmbulate with nurse in afternoon if PT not available | AfebrileIncision intactNo signs and/or symptoms of infectionAbsence DVTUOPBowel functioning WNLDemonstrates anticoagulation administration |
| Patient/Family Education | Total Joint Class will review what to expect with surgery, pain management, anticoagulation,  | Bed Mobility - PTIncentive Spirometer - RNPain Management - RNOrient to Room - RN | Weight bearing status - PTHip Precautions - PTBed mobility/turning - PTActivity/assistive devices - OTPost op exercises - PTAnticoagulation education - RN | Review d/c instructions - RNDiscuss car transfers - PTAnticoagulation education - RNADL equipment - OTAssistive Device - OT | Review D/C instructions - RNReview prescriptions - RNProvide dressing changes - Ortho teamAnticoagulation teaching - RNTEDs teaching - PT/RN | Patient and Family verbalize understanding of discharge instructions |
| Outcomes |  | Pain level 1 - 3 VS WNLPulse ox > 90 %lungs CTAB | Pain level 1 - 3VS WNLI/Os WNLAmbulate | Pain level 1 - 3VS WNLProgress activity Progress ambulation | Pain level 1 - 3Progress activityBowel MovementProgress ambulating | Discharge |