

my joint
replacement
surgery

Welcome!

Thank you for choosing Texas Health for your total joint replacement surgery. Our commitment is to ensure that each patient and family member receive the best possible care.

We believe you have a valuable role in your successful recovery. That is why our goal is to involve you in your plan of care every step of the way. We want you to be involved in your education from the time before your surgery to the time when you leave the hospital.

This guide is designed to give you the important information you need to achieve the best outcome from your joint replacement surgery.

This guide will help:

- Prepare you for your upcoming surgery
- Walk you through your hospital stay
- Provide detailed exercises for you
- Inform you on what to expect and what to continue to do

Thank you for choosing Texas Health!

MyChart

MyChart® is an easy, online, secure way to keep up with health information related to my joint replacement.

MyChart can help me:

- [] communicate with my doctors
- [] fill out required surveys
- [] get test results
- [] request prescription refills
- [] make appointments
- [] watch Emmi® education videos

If I do not already have a MyChart account, I can go to:
<https://mychart.texashealth.org/MyChart/>
or use the QR code.



Required Surveys

Before surgery, I will need to complete required surveys about how my joint problems are affecting my day-to-day activities, as well as my general mental and physical health. My answers will help my provider guide my care.

I will be asked to fill out required surveys after surgery. My answers will help my provider track my progress and improve our collaboration.

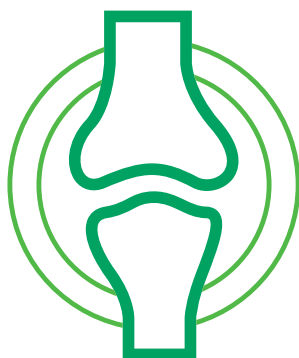


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American Academy of Osteopathic Surgeons, Management of Osteoarthritis of the Hip, Evidence-Based Clinical Practice Guideline, 2017

American Academy of Osteopathic Surgeons, Management of Osteoarthritis of the Knee, Evidence-Based Clinical Practice Guideline, 2022

American Academy of Osteopathic Surgeons, Ortho Info, accessed 2023 <http://www.orthoinfo.org/>

National Association of Orthopedic Nurses, Total Hip Replacement Guideline, 2018

National Association of Orthopedic Nurses, Total Knee Replacement Guideline, 2018





Getting Ready for My Surgery

My Surgery Date and Time

Between Now and My Surgery

The Day Before My Surgery

My surgery date and time

My Surgery Date and Time: _____

What is Total Joint Replacement?

Joints are places in the body where at least two bones come together. Most joints are meant to be able to move. The joints are cushioned with spongy tissue (cartilage) and fluid. Over time, injuries, arthritis, or other conditions can damage the bones, cartilage, and fluid. The damage makes movement and rest difficult and painful.

There are different ways to manage joint damage. Some people get by with rest, position changes, weight loss, or physical therapy. Others get relief with pain medicine. For others, assistive devices are needed. If none of these changes help, your doctor may recommend a total joint replacement. Make a list of all of your questions for your care team.

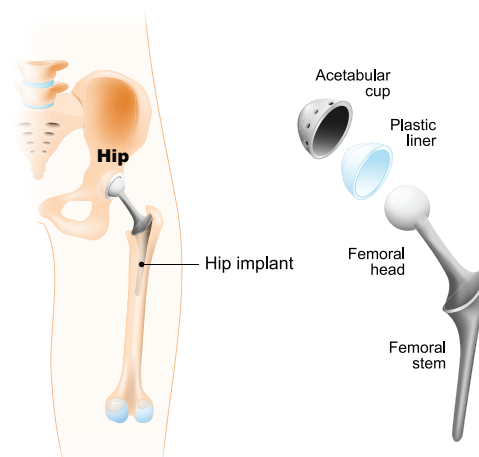
Total Hip Replacement

The hip joint helps us to keep our balance and supports our weight in all of its movement. The upper end of the leg bone (femur) has a rounded head (femoral head) that fits into a socket (acetabulum) in the pelvis to form the hip joint.

During total hip replacement surgery, the damaged part of the hip is removed and replaced with implants, called components. The top part of the leg bone and hip socket are replaced with components to provide you with smooth, pain-free movement.

Your surgeon selects the components that are best for you.

TOTAL HIP REPLACEMENT (arthroplasty)



Some patients may go home the same day as their surgery. Others may stay overnight and go home the next morning. Talk to your surgeon about your plan of care before your surgery.

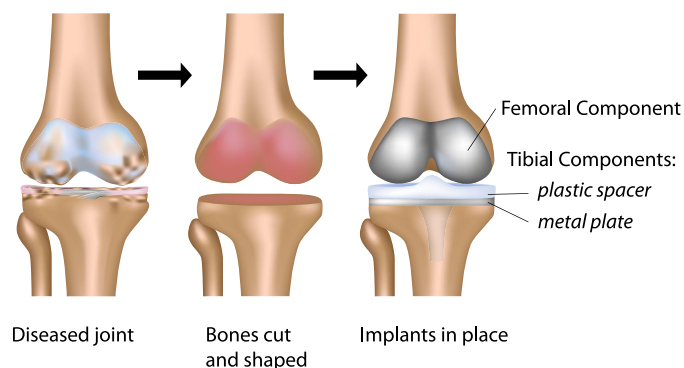
Total Knee Replacement

The knee joint is the largest joint in the body. This “hinge” joint allows the leg to bend and straighten. The knee joint is located at the meeting point of the thigh bone (femur) and the shin bone (tibia). The knee cap (patella) covers the area where the two bones meet and connects your thigh muscles (quadriceps) to your shin bone.

During knee replacement surgery, the damaged part of your knee is removed and replaced with implants (components). Implants are made of different materials. Talk with your surgeon about what kind of implant will be used for you.

A thin metallic resurfacing component is placed on the end of the thigh bone, the shin bone, and kneecap. This creates friction-free surfaces that allow the knee to move smoothly and without pain. Some patients may go home the same day as their surgery. Others may also stay overnight and go home the next morning. Talk to your surgeon about your plan of care before your surgery.

Total Knee Replacement



Between now and my surgery

My Medical Visits Before My Surgery

Once my surgeon and I have decided that joint replacement surgery is best for me, I will be scheduled for surgery. There are a few things that I will need to get done before my surgery. Following the list below will help me remember what I need to do before my surgery and become an active participant in my plan of care.

[] **Meet With My Designated Doctor (Internist, Primary or Regular Doctor):**
Checkups help make sure that I am ready for my surgery.

[] **Lab Tests:**
My surgeon may order lab tests before my surgery. These lab tests help my surgeon know about my blood sugar, cholesterol, vitamin and mineral levels, and my body's ability to clot my blood.

[] **X-rays:**
My surgeon may order x-rays of my bones, joints, and tissues.

[] **Dentist Appointments:**
Follow my provider's instructions for dental work before and after surgery. Because of the risk of infection, dental work such as routine cleanings, gum treatments, and tooth removal should be scheduled many weeks before or after surgery.

[] **Check Insurance:**
Joint replacement surgery is considered an outpatient surgery. Since I will go home the same day as surgery or the day after surgery, I need to check my insurance plan to understand coverage and co-pays.

[] **Meet With Other Specialist Doctors:**

I may need to meet with more than one doctor if I have other health conditions that can affect my surgery. This will be based on my medical conditions and what my surgeon recommends.

[] **If Needed, Complete My Before Surgery (Pre-Op) Checklist:**

Depending on my health needs, I may have other specific visits that I need to complete to get ready for my surgery.

[] **Plan for After Surgery:**

I need to plan for who will drive me home after surgery and who will help me at home.

[] **Finish All My Medical Visits Before Surgery:**

I need to finish all of my medical visits before my surgery so that my surgery is not delayed.



Other Things to Do Before My Surgery

[] My Medical History is Important:

I will need to give my medical history to my surgeon and to my Texas Health Resources hospital during my before-surgery (pre-op) medical visit and on the day of my surgery. This is extra important if I have had any recent health changes. I will be asked about my allergies to food or medicine, any current or past illnesses, other surgeries, any past problems with surgeries, my family history, and lifestyle habits such as smoking and alcohol use.

[] My Medicine List is Important:

I need to bring my medicine list to any of my doctor appointments before my surgery.

[] Identify My Support Team:

I will make arrangements with my family or friends to help me recover and drive me to the hospital or other appointments.

My support team is encouraged to:

- Attend my Joint Camp class with me
- Read my Joint Replacement Surgery Book
- Support me during my therapy
- Help me with my exercises when I leave the hospital

MORE TIPS

Help from my support team is very important when I leave the hospital.

Most people leave the hospital on the same day as surgery or the next morning.

Health Promotion

There are several things that I can do to improve my health, lessen surgery risks, and shorten my recovery time. These include:

- [] Getting in the best physical shape possible before surgery.
- [] If I smoke, cut down or quit. Smoking affects blood circulation, delays healing, slows recovery, and may increase the risk of infection.
- [] I will eat a nutritious diet with enough protein and calories to promote incision healing and prevent infection. I need to replace proteins that get depleted by surgery so that I can have the best outcome.
- [] My provider may recommend a weight loss program before surgery. Extra weight causes more stress on a new joint.
- [] I will not drink any alcohol for at least 48 hours before surgery.
- [] I will tell my provider if I use opioid medicine or other drugs. These can cause problems with my surgery.

Strengthening My Body

Exercising before my surgery means faster healing and an easier recovery. Doing the exercises in this guidebook will help get me ready for surgery. If I am having shoulder or ankle surgery, I should ask my surgeon about extra exercises besides the ones listed here. My surgeon will let me know if I should not do any of the following exercises:



Armchair Pushups

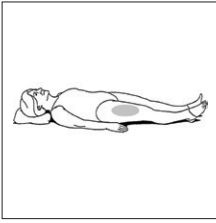
Sit on a sturdy chair with arms. Grasp the arms of the chair. Push down on the chair arms, straightening the elbows so that I raise the buttocks off the seat of the chair. Hold for 5 seconds. Lower myself slowly back into the chair. If my arms are weak at first, use my legs to help raise the buttocks off the chair.



Ankle Pumps

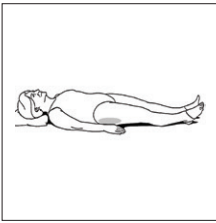
Gently point my toes up towards my nose and down towards the surface. Do both ankles at the same time or alternate feet. Perform slowly.





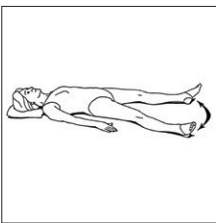
Quad Sets

Slowly tighten my thigh (leg) muscles, pushing my knees down into the surface that I am on. Do both legs at the same time. A good quad set will result in my knees flattening against the surface and my heels slightly elevating off the surface. Hold for 5 counts.



Gluteal Sets

Squeeze the buttocks together as tightly as possible. Hold for 5 counts. Do not hold my breath.



Leg Abduction and Adduction

While laying down, slowly slide both of my legs out until they are hips width apart. Keep my kneecaps and toes pointing towards the ceiling. Slowly bring both legs back to the center until they meet.



Heel Slides

Bend the knee of my surgical leg, keeping my heel on the surface. Hold for 5 counts.



Short Arc Quads

Place a towel roll comfortably under my surgical knee. Make sure my heel rests on the surface before beginning this exercise. Point my toes towards my nose. Straighten my knee, keeping the back of my knee on the towel while elevating my heel off of the surface. Work towards full straightening of my knee. Hold for 2 to 3 counts. Have my coach assist with lifting my heel if necessary.

Attending Joint Camp Class

My surgeon may recommend that I attend a Joint Camp class to help get me ready for my surgery. Many people say that attending class is helpful. Those who attend class feel more prepared and at ease before surgery. A support team member is encouraged to come to class with me.

During the class, my support team member and I will:

- See demonstrations of recommended medical equipment
- Review strengthening exercises
- Talk about what to expect during my hospital stay
- Get answers to our questions

MORE TIPS

Talk with my surgeon about classes that are available to me.

Protecting My Skin Before Surgery

Protecting my skin before surgery is very important. Insect bites, cuts, or infected areas on my surgical leg can delay or cancel my surgery.

- Wear protective clothing when working outdoors.
- Follow my instructions for cleaning my surgical site before surgery.

MORE TIPS

Have my support team take care of my pets during and after surgery.

Preparing My Home Before Surgery

It is important to take time to create a safe area for my healing and recovery. Getting help now from my friends and family will make life easier after surgery.

Things to do ahead of time include:

- [] Put things I use often or will need during recovery in places that are easy to reach.
- [] Put clean linens on my bed and clean towels in the bathroom, and take care of any laundry before surgery.
- [] Prepare single-serving meals ahead of time and freeze them for easy-to-serve meals after surgery.
- [] Remove or hide any loose rugs, electrical cords, or anything that blocks my walkways.
- [] Make sure electrical wires are not under any rugs.
- [] Put nonslip strips in the bottom of my tub.
- [] Install handrails if I have stairs at the entrance of my home.
- [] Have my support team ready to collect my mail, take care of my pets, do my yard work, and run my errands.
- [] Plan who will take me to my surgeon and therapy appointments ahead of time.

MORE TIPS

I will not be allowed to drive for a while after surgery, and cannot at all if I am taking pain medicine.

ASK FOR HELP ahead of time from my support team.

Planning for Extra Care If Needed

For most people, home is the best place for healing and recovery after surgery. My surgeon will talk to me about the best available care options.

Home Health Care

If I am not able to leave my home, I may need home health care. A home health care provider will send a nurse or therapist to my home to help with my exercises and care. They will follow my surgeon's instructions to help me get back to moving around again.

Outpatient Therapy

Physical therapy at an outpatient clinic will help me gain strength and movement. The focus will be to help me reach my walking goals. Staff will work with me on exercises, stretching, and strengthening.

Skilled Nursing or Inpatient Rehab

After surgery, some people need to go to a care setting other than their own home. If I have serious medical issues or need extra recovery support, I may have the choice to go to an inpatient rehab or skilled nursing facility.

Insurance

Most insurance has specific requirements for qualifying for inpatient rehab or a skilled nursing facility. My Care Transitions Manager will have information about my specific requirements. Insurance companies do not consider issues such as not having help a reason to not return home.

MORE TIPS

Before surgery, arrange who will stay with me when I return home.

Getting Equipment and Supplies

Having the right items before surgery is strongly encouraged and will make my healing and recovery easier. Before surgery, you can get the equipment that you will need from an online or local medical supply store, or borrow from a friend or relative who has had joint replacement surgery. These may include:

- Adjustable front-wheeled walker. Please bring your walker with you the day of surgery so you can be trained on proper use.



- Bedside commode that can be used as a raised toilet seat or shower bench



My surgeon may recommend that I buy additional items before surgery to support my healing and recovery. I should ask about what he/she recommends.

Medicines to Stop Before Surgery

It is important to review all of my medicines with my surgeon. He/she will instruct me on which medicines to stop before surgery, and which medicines to continue after surgery. Some medicines can increase bleeding during surgery and are important to avoid. My surgery may need to be rescheduled if I take certain medicines that I am not supposed to. If I take a blood thinner, I need specific instructions from my surgeon about what I should do before and after my surgery.

MORE TIPS

Do not forget to stop taking my medicines as directed by my surgeon. If I forget or have questions, call my surgeon's office.

Packing My Bag for the Hospital

Now that my surgery date is close, I should start packing my bags for my hospital stay. Although I may go home the same day of surgery, I should still pack an overnight bag just in case.

I should pack the following things in my bag:

- My Joint Replacement Surgery Book
- Copy of my Advanced Directives
- Insurance cards and any copayments required by my insurance
- Any medicines that I have been asked to bring
- Toiletries
- Undergarments, pajamas, comfortable, loose-fitting clothes
- Comfortable, athletic shoes with laces or velcro for going home (hospital socks will be worn during my stay)
- Cell phone and phone charger
- Eyeglasses or contacts, hearing aids/batteries, dentures as needed
- Important phone numbers (including my support team)

MORE TIPS

I should avoid bringing any valuables to the hospital.



The day before my surgery

To lessen the chance of infection after my surgery, my surgeon may recommend that I shower the night before and morning of my surgery with a special soap such as Hibiclens® or chlorhexidine (CHG). If I do not receive this soap from my surgeon, I can buy it at any pharmacy. I should not use any creams or lotions on my skin once I have used the special soap.

- [] I am an important part of infection prevention, so I should use my special soap as directed.
- [] I should not have anything to eat or drink after midnight before surgery unless I have been instructed otherwise. This includes chewing gum, hard candy, mints, and throat lozenges.

I will be notified about what time I should be at my Texas Health Resources hospital on the day of surgery.

My Surgery Date and Time: _____



My Hospital Stay

The Day of My Surgery

Managing My Pain

The day of my surgery

At Home

- I will not eat or drink anything (including coffee), unless otherwise instructed.
- Brush my teeth and rinse with water, but do not swallow any water.
- Put my driver's license or photo ID and insurance card in my bag.
- Remove all jewelry and body piercings.
- Shower as instructed.
- Arrive at the hospital on time.

Pre-Surgery Area

When I am admitted to my Texas Health Resources hospital, I will be taken to the pre-surgery area.

While in the pre-surgery area, I can expect to:

- Meet my pre-surgery nurse.
- Change into a hospital gown.
- Review my medical history and medicines.
- Get my IV started.
- Meet my operating room nurse.
- Visit with my surgeon who will mark the correct surgical site.
- Have the hair near my surgical site clipped.
- Talk with the anesthesia person who will handle my surgery. We will review the best anesthesia options for me. It is important to share if I have had any bad reactions to anesthesia in the past like nausea, vomiting, high fever, or problems waking up after surgery.

MORE TIPS

My anesthesia provider and surgeon have developed a special care plan for my needs during surgery to help keep me safe and comfortable.

My scheduled surgery time may change depending on factors such as emergencies or other surgeries taking longer than expected.

Surgery Time

When it is time, my nurse will take me to the operating room. A team of nurses and doctors on the medical staffs will care for me. My total surgery time mostly depends on the difficulty of my surgery. Types of medicines that may be used during surgery include:

General Anesthesia

- This medicine makes me unconscious during surgery.
- After I am asleep, a breathing tube may be placed and connected to a ventilator to help me breathe during surgery.
- Once the surgery is over, the breathing tube is removed before I am fully awake.
- I will probably not remember that I had a breathing tube and may have a slightly sore throat afterwards.

Regional Anesthesia

- This medicine numbs the surgery area with an injection of local anesthetic.
- IV sedation will also be given so that I am not awake during surgery.
- Regional anesthesia will decrease the amount of general anesthesia and pain medicine needed, which will speed up my recovery.

MORE TIPS

During my surgery, hospital employees will keep my support team aware of my progress.

Right After Surgery

When my surgery is complete, my surgeon will meet with my support team to update them on the outcome of my surgery. During this time, I will be moved from the operating room to the recovery area also known as PACU (Post Anesthesia Care Unit). The time I stay in recovery depends on how quickly I recover from anesthesia, how many people are in the hospital, unexpected delays, and if I will go home on the day of surgery.

- When I wake up from my surgery, I may be sleepy and confused from the medicines that were given to me during my surgery.
- My throat might be sore if I had a breathing tube during surgery.
- My vital signs such as blood pressure and breathing rate will be checked often.
- I will go home if I meet requirements or I will go to my hospital room to begin my recovery.

Managing my pain

Managing my pain is important to my nurses and surgeon. My comfort level will help in my healing, recovery, and ability to take part in my therapies.

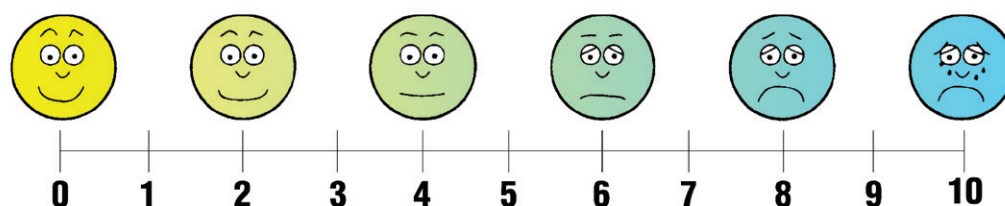
My surgeon has a specific plan for pain medicine. My nurses and surgeon want to keep me comfortable, but not necessarily pain-free. Pain medicines will not make pain go away completely.

I can expect to have pain after surgery. I will be routinely asked about my pain level and be checked for signs of pain. I should let my nurse know when I am in pain. Pain control is vital to my healing and recovery.

I will be asked to rate my pain, especially before and after I take medicine. Staff will use a pain scale. I will rate my pain with “0” being no pain at all and “10” being the worst pain possible. I will also be asked to describe my acceptable pain level. This sets a goal for me and my nurses.

MORE TIPS

Use the pain scale to let my nurse know how I am feeling.



What to Expect in the Hospital

On the day of surgery, my goal is to get out of bed with the assistance of my nurse or therapist. This is proven to speed up my recovery and lessen the possibility of blood clots and pneumonia.

I will receive cold therapy (ice packs or ice machine) throughout my hospital stay to control swelling and pain. I will be encouraged to do

ankle pump exercises in order to improve my blood circulation and prevent blood clots. I may also receive an incentive spirometer which will help my deep breathing after surgery in order to prevent pneumonia. The best way to prevent blood clots and pneumonia is to get out of bed and walk. If I have a urinary catheter, it will be removed as soon as possible to lessen my risk of infection.

MORE TIPS

I should only get up with assistance from my nurse to use the bedside commode or to go to the bathroom. For safety reasons, this should happen every time in order to prevent falls.

I may receive stool softeners or laxatives to help my bowels be regular. My other medicines can cause constipation.

My physical therapist will visit me to check on my progress and begin my exercise and mobility training. My physical therapist might see me two times in one day if necessary to help me be able to leave the hospital on the same day as my surgery.

I may receive a visit from occupational therapy if recommended by my surgeon.

A Care Transition Manager (CTM) will meet with me to discuss my plan and needs for when I leave the hospital. If my needs for leaving the hospital change, a CTM will talk to me about my options.

MORE TIPS

My support team is always welcome in the hospital. However, if they have a limited time off away from work, it is recommended that they save their time off days until after I return home.



When I Leave the Hospital

Leaving the Hospital

Leaving the hospital

My care after surgery is very important for continued healing and recovery. For most people, the best place for healing and recovery is at home. I should plan to leave the hospital on the day of surgery or the morning after. If my surgeon believes I should not go home right away, my CTM will talk to me about my care options.

Reminders When I Return Home

- Arrange for someone to pick me up and drive me home from the hospital.
- My surgeon recommends that a family member or friend stay with me until I can get in and out of bed, walk, go to the bathroom, and dress on my own. This can take a few days.
- Have my support team pick up any new medicines.
- Plan to participate in physical therapy as recommended by my surgeon.
- If I have a home health provider, call them as soon as I get home.

Finishing My Journey

Way to go! I am on the road to healing, recovery, and new possibilities.

Here are some things to remember:

- Change positions regularly.
- Use ice and elevation several times a day to lessen pain and swelling.

MORE TIPS

Be proactive. Be aware of my incision site.



Managing My Pain

- Take my pain medicine before exercising.
- Follow my surgeon's recommendations for pain control and for weaning off pain medicines.
- Use stool softeners or laxatives as needed to maintain regular bowel movements. Pain medicine often causes constipation.
- Apply my ice pack for 20 to 30 minutes after exercising, at night before bed, and any time I have been on my feet for a while.
- Be sure to place a barrier between my skin and the ice pack to prevent the cold from doing any harm to my skin.
- Be careful when moving around the house. A fall can damage my new implant and may result in a longer recovery or need for more surgery.
- Use my assistive devices, such as my walker, that were recommended by my surgeon and therapist, until they say they are no longer needed.

Home Safety

I am at high risk for falling. Safety is just as important at home as it was when I was in the hospital. The following will help keep me safe:

- Keep walkways clear. Remove things that can cause me to fall such as cords, throw rugs, boxes, etc.
- Make sure every room has proper lighting.
- Make sure to place nightlights in bedrooms, bathrooms, and hallways.
- Maintain a clear path between my bedroom and bathroom.
- Put a nonskid mat in my shower.
- Always wear flat shoes with rubber soles or nonskid soles.
- Do not walk in stocking feet alone; use shoes or slippers with rubber soles at all times.
- Do not rush when walking.
- Do not carry objects that block my vision.

MORE TIPS

Ask for help! Use my recommended assistive devices. My goal is to heal and recover at the right pace.

Caring for My Incision

Caring for my incision is important. I am the first line of defense against infection. Following my surgeon's incision care instructions will help prevent infection.

My nurse will talk to me about my surgical site instructions before I leave the hospital. My instructions will also be included in my information packet when I leave the hospital.

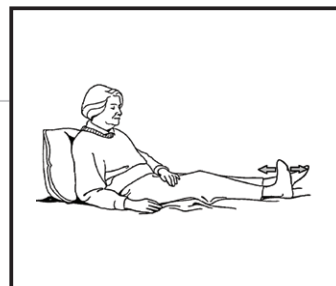
Remember:

- Be proactive about checking my incision.
 - Wash my hands before taking care of my incision.
 - Keep hands away from my incision as much as possible.
 - KEEP PETS AWAY from my incision.
 - Call my surgeon if there is any increased drainage, redness, pain, odor, or heat in the area.
 - I will not apply ointments or lotions to my incision unless instructed by my provider.
 - No tub baths, swimming pools, or hot tubs until approved by my provider.
-

Preventing Blood Clots

Blood clots can be a serious risk after surgery. Being proactive can lessen my risk of something like this happening. My surgeon may tell me to do one or more of the following:

- Do my ankle pump exercises.
- Walk several times during the day.
- Change positions often; do not sit in the same position for too long.
- Take my blood thinner (anticoagulation) medicines as directed.
- Call my surgeon immediately if I develop any of the following warning signs in either leg:
 - Increasing pain in my calf.
 - Tenderness or redness above or below my knee.
 - Pain, heat, and tenderness in the back of my knee or groin area.
 - Increased swelling in my calf, ankle, or feet.



ankle pumps

Exercising

- Exercising regularly will increase the strength of the muscles around my joints.
- My surgeon and therapist will give me a plan for activity and exercises after surgery. Following this closely will improve my healing and recovery.
- Once I finish my therapy, my surgeon will let me know when I can get back to regular activities.
- There may be some activities and exercises that my surgeon will want me to avoid to help my new joint work longer.

MORE TIPS

Keep moving!

Continuation of Care

- [] Keep all my appointments after surgery. Write down all of my questions and bring them to my visits.
- [] My first appointment is 2 to 4 weeks after surgery. My provider will check my incision, might do x-rays, and may give me new activity and precaution instructions.
- [] My provider will let me know about additional follow-up visits.

Common Concerns

- [] Some numbness on the side of my knee after surgery is very common.
- [] I may experience swelling off and on for up to one year after a joint replacement. Use ice, elevation, rest, and anti-inflammatory medicine as recommended by my surgeon.
- [] My appetite may be poor for a few weeks after surgery. Be sure to drink plenty of liquids to stay hydrated.
- [] I may have some difficulty sleeping at night. Try not to sleep or nap too much during the day to get back on my normal sleep routine.
- [] I may feel a decrease in overall energy level for the first month. This is a major surgery and it takes time for my body to fully heal and recover.
- [] I might set off metal detectors at security checks. Simply tell the security agent about my implant.
- [] I may hear or feel some mild clicking of the metal and plastic when walking or bending the knee after a knee replacement. This is common and the changes typically lessen over time. Most people find these changes bearable when compared to their limited function and pain before surgery.
- [] Ask my doctor about when I can resume sexual activity. Certain positions will be more comfortable than others. Refrain if I have pain.

MORE TIPS

Always call my surgeon for questions or concerns.



Thank you for choosing Texas Health for your Joint Replacement Journey.

