

HIP AND KNEE REPLACEMENT INFORMATION SHEET

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Hip, Knee and Trauma Surgeon

BOOKING PROCESS – MATER PRIVATE HOSPITAL

1. Complete the **booking and consent form** with Dr Chia in the office.
2. Register and complete the PORPOS survey.
3. Complete the **hospital admission** paperwork. This can be done either online or on paper (please post this to the Mater Hospital in the provided return envelope).
4. Book an appointment at the Mater Hospital **pre-admission clinic** (Ph: 99007494).
5. Have the routine pre-operative **pathology tests** done at Douglass Hanley Moir (no fasting required) around 2 weeks before your surgery.
6. Have the routine pre-operative **radiology tests** done (2 weeks to 3 months before surgery).
7. Arrange any other necessary **pre-operative consultations** (for example cardiology review) as discussed with Dr Chia.
8. Your anaesthetist will conduct a phone consultation with you before your surgery.
9. **Please take any x-rays that are relevant to your surgery to the hospital on the day of your admission including your chest x-ray.**
10. **Stop necessary medication** prior to surgery – please see FAQ for more information.
11. **Shower with a 4% chlorhexidine solution** for 3 days before your surgery.
12. Your admission to the Mater Hospital will be on the **day of your surgery**, unless medical reasons indicate admission prior to the surgery date.
13. **The Mater Hospital will contact you and inform you of your admission time and fasting time the working day prior to your surgery after 3pm.** This may be done by text message.
14. You can expect to remain at The Mater Hospital for around 2-5 days after your surgery. If you require admission to a rehabilitation facility, this will be arranged for you after your surgery by the staff on the ward.

FREQUENTLY ASKED QUESTIONS (FAQS)

BEFORE YOUR SURGERY

1. *What tests do I need before my surgery and when are these done?*

Dr Chia will provide you with a referral for standard pre-operative **radiology** and **pathology** tests.

Radiology – chest x-ray and CT scan/x-rays of affected joint. These should be done from 2 weeks to 3 months before your surgery.

Pathology – these may include blood tests, urine test, swabs and ECG. These are usually done 2-3 weeks before surgery

2. *Where are these tests done?*

Radiology – only certain practices are certified to provide the required pre-operative CT scans. These include Lumus Imaging at Northern Beaches Hospital (9470 5200), PRP Dee Why (99813000), PRP Frenchs Forest (9451 1062), PRP Warriewood (9997 7411) and Mater Imaging (9955 4466). These should be done no later than 2 weeks before your surgery (but can be done up to 3 months before your surgery). **CT scans usually require an appointment** while x-rays generally do not.

Pathology – patients having surgery at Northern Beaches Hospital should ideally have their pathology tests performed at Australian Clinical Labs (ACL) while Mater patients should have their tests done at Douglass Hanley Moir (DHM).

3. *Do I need to see any other doctors before my surgery?*

In some cases Dr Chia will require advice from other specialists prior to your surgery. Usually this applies to patients with significant cardiovascular conditions but please check with Dr Chia.

4. *Do I need to stop my normal medication before my surgery?*

Most medications are usually taken up to the time of surgery but your anaesthetist will advise you on this. Most blood thinners, however, need to be stopped before surgery as follows:

- **warfarin** – usually stopped 5 days before surgery
- new anticoagulants (**rivaroxaban/Xarelto, apixaban/Eliquis, dabigatran/Pradaxa**) – usually stopped 3 days before surgery
- anti-platelet drugs (**clopidogrel/Plavix, dipyridamole/Asasantin Persantin, aspirin**) – usually stopped 7 days before surgery but occasionally aspirin is continued throughout
- anti-inflammatories (**Celebrex, Mobic, Nurofen, Voltaren, Naproxen** + many others) – usually stopped 7 days before surgery
- natural therapies (**fish oil, krill oil, omega 3 supplements, Chinese herbal medicines**) – usually stopped 7 days before surgery

Some newer diabetic medications should also be stopped 3-4 days prior to surgery:

- dapagliflozin (*Forxiga, Qtern, Xigduo XR*)
- empagliflozin (*Jardiance, Jardiamet, Glyxambi*)

5. What can I do to minimise the risk of infection?

Any source of infection in the body can increase the risk of infection in your joint replacement or affect your anaesthetic. Common sources of infection include

- **skin** – please take good care your skin before and after your surgery (for example avoid insect bites, scratches from pets/gardening, blisters from ill-fitting shoes)
- **teeth** – please ensure that your teeth are in good condition with no active infection present
- **urine** – please drink plenty of water and ensure good hydration
- **chest** – in particular please inform Dr Chia if you have had **COVID-19** recently

Please ensure you maintain a healthy, well balanced diet and keep your blood sugar in the normal range. There is increasing evidence that **poor nutrition and blood sugar control increases the risk of infection**.

Lastly, Dr Chia recommends washing with a **4% chlorhexidine wash** (available from pharmacies without prescription) for 3 days prior to your surgery.

6. What exercises do I need to do before my surgery?

There is **no compulsory 'prehab' program** as the scientific studies show this has little effect on the outcome of joint replacement surgery. Despite this, it is recommended that you maintain as much muscle strength as you can comfortably manage prior to your surgery. A physiotherapist or exercise physiologist may be able to assist you in this regard.

7. When is payment due?

Dr Chia's fees are to paid in full one week prior to your surgery. Please refer to your surgery quote for payment options.

AFTER YOUR SURGERY

1. When is my first follow up visit after surgery?

The first follow up appointment is usually **4-6 weeks** following your procedure. If not booked prior to surgery, please contact the rooms to arrange this first visit. During this time, your rehabilitation facility usually monitors your wound and pain but please contact the rooms if you have any concerns.

2. When can I drive after my surgery?

From an insurance perspective, you should not drive for **6 weeks** after your surgery (or longer if you require narcotic analgesics during the day). If, however, you are progressing very well then this can be shortened to 4 weeks if you have been cleared by Dr Chia.

3. When can I travel after my surgery?

Travelling too soon after surgery can increase the risk of deep venous thrombosis (DVT). After joint replacement surgery, plane travel should be avoided for **at least 6 weeks** (sometimes longer for overseas travel). Please discuss this with Dr Chia.

4. When can I start swimming after my surgery?

Your wound should be fully healed before swimming. This usually takes at least **3-4 weeks** but please discuss this with Dr Chia.

5. How long does the dressing stay on after my surgery?

Your wound should be dressed for at least **3 weeks** after your surgery. There is an underlying mesh/glue dressing with a conventional dressing over the top. It is preferable to minimise disruption of this dressing as long as it remains intact. A small amount of dried blood or ooze is normal but please inform Dr Chia if there is any fresh ooze or bleeding.

6. How long will I be on painkillers after my surgery?

This is very variable. Most people will require simple painkillers (e.g. paracetamol) for several months after their surgery. Almost everyone will also require stronger painkillers (e.g. Endone, Palexia, Targin) for a period of time. While it is best to minimise the length of time that these are taken, you will need enough pain relief to complete your exercises. As your pain improves, these stronger painkillers should be slowly phased out – **you should not stop taking them suddenly**. Please note that you can be discharged with only a small amount of narcotic pain relief – **your GP or rehab doctor can provide you with more**.

7. How long do I need to stay on blood thinners and antibiotics after my surgery?

In most cases you will be given **intravenous antibiotics for 24 hours** after your surgery and then no more. You will, however, require **6 weeks of blood thinners**. This is generally 2 weeks of clexane needles and 4 weeks of aspirin but this may differ if you are already on blood thinners or have other medical conditions.

8. How long do I need to wear compression stockings after my surgery?

Compression stockings are usually recommended to be worn for **6 weeks** after your surgery. However, the latest research suggests that they are of questionable value so if they are uncomfortable for you then they can be stopped earlier.

9. How long do I have to ice my knee after my surgery?

Excessive swelling will delay your recovery and hence your knee will benefit from ice **as long as there is significant swelling**. This can persist for 3-6 months after your surgery.

10. What is the best way to ice my knee?

It is best to ice your knee **3-4 times a day**, particularly when it is most swollen. This is usually after exercise and at the end of the day. While you can use your existing ice packs, the most convenient way is with an electrical device (e.g. Cryocuff, Gameready). Please contact the office for further information regarding these devices.

11. What activities should I avoid after my surgery?

It is best to avoid activities that cause a prolonged exacerbation of pain or swelling. This can include excessive walking but discomfort/swelling that disappears overnight is generally benign. For hip replacements, a combination of deep hip bending and twisting should be avoided for the first 6 weeks.

12. How soon can I have dental work after my surgery?

Ideally non urgent dental work should be delayed for **3 months** after your surgery. However if you need **urgent** dental work done within this time frame then this can proceed (usually with **antibiotic cover** – this is prescribed by your dentist, see below). Please let your dentist know that you have had a joint replacement.

13. Do I need antibiotics for dental work after my surgery?

The science regarding this is not clear. However, as a general rule any major or **invasive dental surgery should be preceded with a dose of antibiotics**. This is usually in the form of a penicillin type antibiotic that is prescribed by your dentist.

PLEASE CONTACT THE ROOMS ON 1800 553 335 IF YOU HAVE ANY CONCERNS OR QUESTIONS