# **OUTPATIENT JOINT REPLACEMENT**

PATIENT HANDBOOK



# CHARLOTTE SURGERY CENTER

WENDOVER CAMPUS
3621 RANDOLPH ROAD, STE 200
CHARLOTTE, N.C. 28211



# JOINT REPLACEMENT PROGRAM

We are pleased that you have selected the Charlotte Surgery Center – Wendover Campus for your joint replacement surgery, and we are excited about the opportunity to serve you throughout the entire process. Our team of highly qualified healthcare professionals is completely focused on your success and return to a pain-free lifestyle. We believe in a comprehensive approach to joint replacement surgery, which means your surgeon, anesthesiologist, nurses, and other members of the healthcare team are committed to care before, during, and after surgery.

### In selecting our center, you have chosen a facility that:

- Is committed to providing you with the highest quality care
- Uses a team approach to your surgical care, ensuring a smooth transition from pre-op through recovery. We work together toward a common goal: your good health
- Features a unique, comprehensive joint program developed by a team of orthopedic specialists. This program provides revolutionary improvements in surgical techniques, anesthesia, and joint technology
- Has fine-tuned general anesthetic techniques and pain management protocols. These techniques allow patients to be waking up and walking immediately after surgery

We have developed this handbook to help prepare you for what will happen before, during, and after your joint replacement surgery. Please keep this with you throughout your journey, as it provides a wealth of information that you can use as a resource.

Again, thank you for trusting your surgical experience to the team at Charlotte Surgery Center – Wendover Campus.

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# SAME DAY SURGERY AT CHARLOTTE SURGERY CENTER

At Charlotte Surgery Center – Wendover Campus we provide cost effective outpatient services and a safe alternative to the traditional hospital setting. Our team of highly skilled and compassionate professionals stands ready to join you in this journey.

We have achieved accreditation by the Accreditation Association of Ambulatory Health Care (AAAHC). Our accreditation distinguishes our center from many other outpatient facilities and symbolizes our commitment to providing the highest quality of care to our patients, as determined by an independent, external process of rigorous evaluation.

Our status as an accredited organization recognizes that out center has met nationally recognized standards for the provision of health care set by AAAHC.

We sincerely believe that our patients deserve ONLY the best! We work tirelessly to improve the patient experience; and we email or mail surveys to all our patients to allow them the opportunity to provide detailed information on how we can make the patient experience even better. We strive to achieve a "10" here at Charlotte Surgery Center. If there is anything that we can do to enhance your experience, please do not hesitate to bring it to our attention immediately. It is our goal to address any concerns or suggestions "on-the-spot". Our #1 priority is YOU!

Thank you again for choosing our center as your partner in healthcare. We look forward to providing you the ultimate patient experience!

Accredited by



accreditation association for ambulatory health care, inc.

#### **Steps in Preparing for Surgery:**

- 1. Complete your medical history through One Medical Passport (OMP)
- 2. Complete physical scheduled by your surgeon's office within 60 days of surgery
- 3. Complete pre-screening blood work within 60 days of surgery (EKG within one year)
- 4. Contact your insurance company to confirm pre-authorization
- 5. Complete financial counseling (if needed)
- 6. Plan for your discharge including, preparing your home, obtaining prescriptions, etc.
- 7. Your surgeon will determine your physical therapy needs and OrthoCarolina will guide you to arrange any appointments

#### **Physical Exam by Primary Care Physician:**

Your surgeon's scheduler will assist you in scheduling your pre-operative clearance appointment. If you have seen your PCP in the last 60 days, records from that visit are often sufficient for the purposes of medical clearance. It is important that any medical problems you may have that could put you at an increased risk during and / or after your surgery are identified during the prescreening process.

The Body Mass Index (BMI) limit for the surgery center is 39.9. This is necessary to avoid potential surgical complications (e.g., respiratory, cardiovascular) associated with an elevated BMI. If your BMI is documented as 35 or greater in your medical history, you may be scheduled for a height and weight check at the surgery center within two weeks of your surgery. A BMI greater than 39.9 will require your surgery to be rescheduled at a facility associated with a hospital.

#### **Pre-Screening Lab & Diagnostic Testing:**

For your safety and to provide a complete screening, you will be required to have, at a minimum, the lab studies listed below completed within 60 days of your surgery for our anesthesiologist to review. An EKG is required within one year of your date of surgery. This testing may be performed at the time of your medical clearance appointment, or you may be given a separate order for the labs to be drawn at any accredited laboratory. It is also important that you have the results of the lab work and EKG faxed directly to the surgery center at **(866) 998-0623** Attn: Medical Records.

Labs Required: CBC, BMP, if diabetic, HgA1C

**Diagnostic Testing:** EKG **BMI:** <40 required

#### **Physical Therapy:**

Your surgeon will manage your Physical Therapy needs. Please contact your surgeon's scheduler with any questions surrounding Prehabilitation (Prehab), Home Health, and/or Outpatient Physical Therapy. Your support person should be an active participant in learning any Physical Therapy education.



# **One Medical Passport:**

You will need to complete the OMP online medical history questionnaire, which is a convenient and secure way for you to provide information so that we can provide you the best care possible. Please note that the OMP questionnaire is different from the medical history provided to OrthoCarolina. A completed OMP questionnaire is required for you to be cleared by anesthesia for surgery, failure to complete this may result in your surgery being cancelled.

The OMP patient portal is user friendly and does not require computer skill expertise. Visit <a href="www.charlottesurgerycenterwendover.com">www.charlottesurgerycenterwendover.com</a> and click the 'Preparing for Surgery' tab at the top of the homepage. Create an account, answer basic questions about your health history, and OMP does the rest. You can access it whenever you'd like to update your information.

Your information is protected by the most secure encryption technology available and is only accessible by those healthcare providers you designate.

# **Selecting Your Support Person:**

Your support person is one of the most important members of your team. Your support person's commitment and active participation is key to ensuring a successful, timely recovery. It is vital to select someone who will be there for you during preparation, the day of surgery, and for several days after you are discharged home. Your support person should be an active participant in learning Physical Therapy education provided by OrthoCarolina. Your support person should arrive with you at the time of check-in and plan to remain on the premises during the entire duration of your procedure and recovery. We will ask you support person to provide their name and a cell phone number so that we may contact them during your procedure.

#### **Medical History Review by Nursing Staff:**

Once you have completed your medical questionnaire via OMP, a Pre-Op Nurse will review your medical history. If necessary, you may be contacted to review information provided. It is imperative that you return this call promptly. We are happy to answer your questions during this call.

If there are any changes in your medical history or medications between the time you completed your medical passport and the surgery, please call the preadmission nurses at 704-206-8829 or 8838.

### **Anesthesiology Review and Clearance:**

Each patient's medical history, records, lab work, and diagnostic testing will be reviewed by an Anesthesiologist for clearance prior to surgery. It is important that we receive this paperwork at least one week prior to surgery to allow for time to review and address any missing information or potential issues. We have very strict admission criteria based on our ambulatory setting and the nature of the total joint surgery.

During Pre-Op on the day of surgery, your assigned Anesthesiologist will talk with you about the anesthesia and how we will keep you comfortable during and after surgery. This is the time to discuss any concerns or anesthesia related issues encountered during prior surgeries. We use a **general anesthesia** that puts you to sleep following an injection of medications into your IV. You will not feel any pain and will be completely asleep throughout your surgery.

In addition to the general anesthesia, the surgeon will inject medication around the joint and incision to provide pain management. This medication is most effective when you move the joint early in the recovery process.

#### **Financial Planning:**

To minimize stress to our patients, it is our goal to separate monetary and medical discussions. A teammate from our Business office, also known as a Financial Advocate, is available to provide financial counseling. The Financial Advocate will be available to you throughout the process to provide guidance and answer any questions that might arise. Our Business Office phone number is **(704) 206-8835**.

When the case is scheduled: We will contact you to confirm that your case has been scheduled at the center and review the following with you:

- The insurance verification process and the specifics of your insurance coverage.
- Detailed information about your benefits under your coverage plan to include deductibles, co-pays, co-insurance, and out-of-pocket maximums.
- A detailed estimate of your financial responsibility so that you can make an informed decision.
- The differences between the facility fee, professional fees, anesthesia fees, implant fees, durable medical equipment fees, physician fees, Physical Therapy fees, etc. to provide complete transparency into our financial practices while providing you with details regarding other bills for services that you will receive.

We ask that the physician partner with us by helping prepare you for the cost of the procedure. Historically, we know that when patients can discuss financial responsibility in advance, this helps prevent barriers to the experience or treatment. As a convenience to our patients, we accept all major credit cards, personal checks and cash. We also offer several third-party healthcare financing options if the patient should need financial assistance.

#### **Exercise:**

Exercising, up to the day before your surgery, helps to improve your strength, range of motion, and endurance. These factors help lead to a successful outcome and recovery. If you need assistance in developing an exercise program, talk with your surgeon about a Physical Therapy consult. In addition, exercises are provided at the end of this guide.

# Exercise is an important part of your treatment plan and recovery because:

- Strengthening exercises for the hip or knee joint improves recovery outcomes
- Upper body condition exercises will help to reduce muscle soreness and fatigue caused using a walker, crutches, a cane, or other mobility aids.
- A walking or water exercise program increases endurance, flexibility, and overall strength.

## **Circulation Exercises:**

Although swelling is a normal physiological response after surgery, circulation exercises will help to control swelling and prevent more serious complications, such as blood clots. It is important that you review and learn the circulation exercises prior to surgery to make them easier to perform after your surgery.

# **Diet and Nutrition:**

Healthy eating and proper nutrition before your surgery aids the healing process.

- Drink plenty of fluids and stay hydrated.
- Eat more fiber to help avoid constipation (often caused by pain medications). Foods that contain fiber include corn, peas, beans, avocados, whole wheat pasta and breads, broccoli, and almonds.
- Eat foods rich in iron, such as lean red meat, dark green leafy vegetables, raisins, and prunes.
- Eat foods high in Vitamin C to help your body absorb iron. Foods that are high in Vitamin C include oranges, cantaloupe, and tomatoes.
- Make sure you are getting adequate calcium, which is needed to keep your bones strong. Foods that are high in calcium include milk, cheese, yogurt, dark leafy greens, and fortified cereal.

Remember to eat light meals, especially the day before surgery. The combined effects of anesthesia and pain medications may slow your bowel function. This can cause constipation after surgery.

# PREPARING FOR SURGERY

# **Smoking:**

Smoking causes breathing problems, significantly increases the risk of medical complications, and slows recovery time. Smoking may also increase the risk of infection and blood clots after surgery. Your surgeon requires you to stop smoking prior to surgery. Please refer to literature from your surgeon's office regarding this requirement.

If you need assistance with smoking cessation there are many local resources in the Charlotte and surrounding areas. QuitNow.net is a convenient website that offers smoking cessation assistance. You may also visit the American Lung Association website at http://www.lung.org/stop-smoking.

#### **Alcohol Use:**

It is important that you provide honest and accurate information to your healthcare providers about alcohol use. Share with your health care provider the number of drinks you normally have per day or week. This information will assist the healthcare team in determining if you are at risk for alcohol withdrawal or other alcohol-related problems that could occur during or after your surgery and affect your recovery. We encourage you to abstain from alcohol use in the days leading up to your surgery.

# **Diabetes Guidelines and Blood Glucose Management:**

Managing blood glucose is always an important part of your overall health and well-being. It is especially important that you closely monitor your blood glucose before surgery to reduce the risk of problems after surgery, such as infections or other complications. Surgery can affect your blood glucose control in many ways. Stress before and after surgery can cause the body to release hormones that may make it more difficult to control blood glucose levels. Surgery can also affect your normal dietary patterns and it can change your normal medication regimen. Your diabetes will be managed throughout the surgical process, beginning with a complete review during the pre-operative testing and continuing through the post-operative period.

### **Medications:**

Some medications thin your blood, increase the risk of bleeding after surgery, or interfere with healing. These medications may need to be stopped before surgery. If you take medications that contain aspirin, anti-inflammatories (such as ibuprofen, [Motrin®, Advil®], naproxen [Aleve®], blood thinners such as warfarin, [Coumadin®], or arthritis medications, ask your surgeon or prescribing physician when to stop taking these medications. GLP-1 medications taken as a weekly injection (e.g., Mounjaro, Ozempic, Wegovy) must be held 7 days prior to surgery per anesthesia requirement.

# **Post Surgical Preparation:**

It is important that you prepare your home for your return before you have surgery, to ensure your safety, make your life easier, and aid in your recovery. Listed below are our suggestions for preparing your home for a safe recovery.

#### **Traffic Pattern**

Remove any obstacles – such as throw rugs, extension cords and footstools – out of your walkway. Create a wide, clear path from your bedroom to your bathroom and kitchen which will allow you to easily move about with mobility aids such as a walker or crutches.

#### **Bathroom**

Arrange your bathroom so that routine toiletries and other essentials are easily accessible. You will likely also need an elevated toilet seat, bedside commode and a shower chair. Use non-skid mats in showers or tub/showers.

#### **Sitting**

Sit in chairs that keep your knees lower than your hips. Choose a firm, straight-back chair with armrests. A dining room chair may work if you don't have other chairs. Add a foam cushion or folded blanket if you need to raise yourself up but avoid sitting on a soft pillow. Also, avoid sitting in rolling chairs or recliners.

#### **Children and Pets**

Small children and pets may pose a safety hazard. Small children should be taught how to interact with you in ways that keep you safe. If you have pets, plan to keep your pets in another area of the house when you arrive home.

#### **Access to Items**

To avoid reaching and bending, keep frequently used items within easy reach, especially in the kitchen, bathroom, and bedroom. For example, personal items, food, medications, phone, phone chargers, etc. should be easily accessible. We recommend that you carry a cellphone or portable home phone with you during your recovery.

# **Post Surgical Preparation (Continued):**

It is important that you prepare your home for your return before you have surgery, to ensure your safety, make your life easier, and aid in your recovery. Listed below are our suggestions for preparing your home for a safe recovery.

#### **Stair Climbing**

It is okay to climb stairs with assistance, if you are able. Always have someone available to assist you during the early phases of your recovery. If your bedroom is on an upper level, we recommend that you prepare a sleeping area on the lower level for the first week or two after you return home from surgery. Make sure that all stairwells are equipped with secure handrails.

#### **Laundry and Cleaning**

Get help with your laundry and any household cleaning or chores. It is recommended that you have a several week's worth of clean clothes prepared prior to your surgery.

#### Mail

Arrange for someone to collect your mail at regular intervals or place a delivery hold. The same practice applies for newspaper deliveries to your home.

# **Meal Planning**

Arrange for help with your meals and perishable foods (e.g., milk, salad, fruits, vegetables). Freeze prepared dinners before your surgery. Stock your pantry with non-perishable foods to make meal preparation easier.

# **Help at Home**

To ensure your safety, you need to have a friend or family member available to help you for the first few days after you return home from the center. This includes having someone at your home overnight.

#### **Driving**

Arrange for someone to drive you to your post-operative appointments. Do not drive until your surgeon releases you to do so. Absolutely DO NOT drive while taking narcotic medications. Do not drive until you have regained the range of motion, strength, and reaction time needed to drive safely. If you are having surgery on your right hip or knee, you may not be able to drive for at least three (3) weeks. Your surgeon will provide you with instructions for driving ability.

# Preparing For Your Surgery

### Illness – Report Any Unusually Symptoms to Your Surgeon

#### Symptoms to report may include:

- An elevated temperature
- Sore or scratchy throat
- Nasal drainage that is yellow or green
- Cough or chest congestion
- Earache
- Nausea, vomiting or diarrhea
- Problems with urination
- Open sores, scrapes, rash, scabs, bug bites or breaks in the skin anywhere on the body
- Any such as fever (100.4 or greater), and/or cough, shortness of breath or difficulty breathing, chills, repeated shaking with chills, muscle pain, headache, sore throat or new onset loss of taste or smell

#### **Arrival Time:**

You will be notified of your arrival time the 1-2 days prior to your surgery. Special instructions will be given to you at this time, including information about when you should stop eating and drinking to prepare for surgery. It is very important to follow all the instructions as directed by the nurse or your procedure may be canceled.

We apologize if there is an extended wait for your surgery. The operating room is a very dynamic place, and the schedule can either speed up or slow down depending on the day. We want you to arrive in plenty of time for us to prepare you for surgery and answer any last-minute questions. If the surgeon is ahead of schedule, we will start your surgery early, but please be aware that sometimes the opposite occurs, and you may have to wait a little longer. We will be sure to keep you and your coach updated throughout the process regarding any delays in your expected surgery time.

# Preparing For Your Surgery

# **INFECTION PREVENTION – Prepping Your Skin:**

Because all humans have bacteria and germs living on the skin, it is important that your body is thoroughly cleansed with a special soap prior to surgery. It is normal for us to have some bacteria as they help us by digesting dead skin cells and other materials found on our bodies, clothing, and furniture. However, when you have surgery, these bacteria may sometimes cause an infection. You can reduce the number of germs on your skin by carefully washing before surgery.

Chlorhexidine Gluconate (CHG) or Hibiclens is a special soap that is often used to cleanse the skin before surgery. If you are allergic to CHG, please discuss options with your surgeon. Your surgeon will provide you with instructions for prepping your skin. Please contact your surgeon's office if you have not received this information. You can obtain CHG / Hibiclens soap in the First Aid section at most pharmacy/drug stores. You should only need a 4 oz bottle to use prior to surgery. It is not required that you continue to wash with this soap after surgery unless you would prefer to.

# MORNING OF SURGERY

#### **Follow Pre-Admission Instructions:**

For your safety, please remember to follow all the instructions you were given by the nurse during the pre-operative phone call. It is very important not to eat or drink after the time you were instructed. If you were instructed to take medications, please take them with a very small sip of water. No chewing gum, candy, mints or ice chips.

Leave jewelry, valuables, credit cards, and large sums of cash at home except for a form of payment.

# **Checklist of Items to Bring the Day of Surgery:**

- Assistive device: walker (this is often dispensed day of surgery by an OrthoCarolina rep)
- Picture ID and Insurance Card
- Eyeglass and denture cases
- Layers of clothing (the recovery room can be chilly)

NOTE: OrthoCarolina post-operative equipment department is responsible for contacting you regarding equipment your surgeon has ordered post-operatively. Please contact your surgeon's office if you have not received a call a few days prior to surgery.

# Arrival at the Center

# **Reception Area:**

Upon arriving at the surgery center, you will be asked to present your insurance card and photo identification, as well as make any payment for deductibles, co-pays, or co-insurance responsibilities. In some cases, you may be asked to make payments prior to surgery day to mitigate unexpected anxiety. Please note, to maintain patients' right to privacy, patient and visitor cell phones are restricted in clinical areas.

For liability reasons, your responsible adult is required to remain on the premises the entire time you are at the surgery center. Your surgery may be postponed or rescheduled if your responsible adult leaves the facility.

# **Pre-Operative Area:**

A member of our healthcare team will accompany you to the pre-operative area where we will start your admission process. Your vital signs will be taken. The nurse will review your labs and allergies and you will be asked a series of questions about your health history. Your surgical procedure will be reviewed, and you will sign your surgical consent. Your surgical site will be marked. The nurse will start an IV for administration of fluids and medication for your surgery. You may be given oral medications that your surgeon has ordered for you before your surgery.

To promote infection prevention, you will be asked to wipe your body with CHG wipes and perform a betadine nasal swab during Pre-Op. The CHG wipes contain the same cleanser you used during your showers at home.

#### **Anesthesia Provider:**

You will meet your anesthesia provider in the pre-op area. Your health history and past surgeries will be discussed. Tell the anesthesia provider if you have ever had any problems with anesthesia or medications. Your provider will explain the anesthesia you will receive, and you may ask any questions and review concerns. You will then sign your anesthesia consent.

# Surgeon:

The surgeon will initial the operative area before your surgery. You will also have an opportunity to ask questions at this time.

#### **OR Nurse:**

The OR nurse will introduce himself / herself to you and review your health history. You will have to answer questions that you have already been asked. This is part of our surgical safety checklist program to ensure your safety while at our facility.

# **Operating Room:**

The OR nurse will escort you to the operating room and the rest of the healthcare staff will greet you and introduce themselves. You will be transferred to another bed and hooked up to monitoring devices. Medication will then be administered through the IV to start your anesthesia.

# Post Anesthesia Care

Once surgery is complete you will be taken to the recovery room.

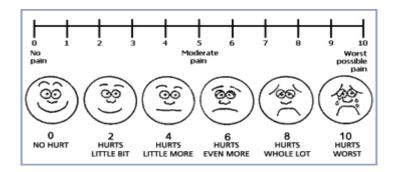
#### Intravenous Fluids:

You will be provided with fluids intravenously throughout your stay to ensure you are hydrated and provide a means to receive certain medications.

#### **Pain Medications and Pain Control:**

During your surgery, the surgeon injects a pain-relieving medication and anesthetic in and around the joint to help with pain post-operatively. For this medication and anesthetic to be activated, you must move the joint. Your nurse will help get you up and moving to ensure the medication is activated and that you can safely get into your house. For your safety, we do try to limit the amount of narcotic medication administered prior to discharge. Narcotic medication can cause nausea and vomiting, lower you blood pressure, and cause dizziness.

During your time in the recovery room, you will be asked to rate the intensity of any pain you are experiencing by using a pain scale. A pain scale is a line numbered from 0 to 10, with each number representing a degree of pain. Your anesthesiologist may order pain medications to help keep your pain at a tolerable level. Please feel free to communicate with your nurse if you are feeling discomfort or nausea, or if there is anything you need to make you feel more comfortable. A sample of a pain scale can be seen below.



#### **Dressing:**

You will have a waterproof bandage or surgical adhesive over your surgical area. This bandage will stay on until you have your follow-up visit or otherwise instructed by your surgeon. Your recovery room nurse will assist you with dressing once you are awake. Please make sure to bring comfortable clothing that is easily removed and put back on.

To prevent infection, it is imperative that you follow your discharge instructions regarding your dressing and care for your incision.

# **GOING HOME**

#### **Discharge From the Center:**

You may be discharged from the center approximately 1-3 hours after surgery. You will be required to ambulate prior to discharge as well as attempt to void. We want to ensure you and your support person feel comfortable with your discharge.

If outpatient Physical Therapy may be required after discharge, you should have this arranged by your surgeon's office prior to surgery.

#### **Discharge Instructions:**

You will be given detailed instructions for your care at home and what to expect, as well as phone numbers to call if needed. Please call your surgeon's office if you have any questions or concerns that are not addressed in the instructions. We do not want you to worry and wonder at home.

#### **Post-Surgery Follow-up:**

Your first post-operative visit to your surgeon's office will generally occur about 2-4 weeks after your procedure. This appointment will be scheduled prior to surgery. Your second office visit will be determined by your surgeon and the progress you have made.

#### **Prescription Medications after Discharge:**

Depending on your health history and current medications, you will be prescribed medications for pain control and/or the treatment of nausea. Any narcotic medication will be prescribed electronically by your surgeon to the pharmacy on record with your surgeon's office. In addition, you may be prescribed aspirin to prevent blood clots. Questions regarding prescription medications should be directed to your surgeon's office. The surgery center cannot address issues related to post-operative issues, care, or medications.

#### **Questions or Concerns After Surgery:**

If you should experience ANY unexpected problems or have questions about your after-care or prescription medications (including those prescribed for pain), please call your physician's office directly. Unfortunately, the nursing staff here at the Charlotte Surgery Center will not be able to answer questions specific to your plan of care. Remember, your physician is the best person to answer your questions and to provide medical advice. You may reach your physician's office at: (704) 323-2000.

If you experience a life-threatening condition, such as chest pain, shortness of breath, excessive bleeding, or similar conditions please call 9-1-1 or report to the nearest Emergency Department.

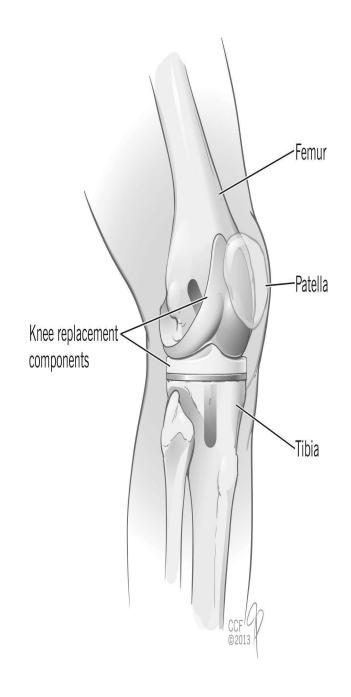
# **OVERVIEW OF TOTAL KNEE REPLACEMENT**

The knee joint is the largest joint in the body. It is the "hinge" joint of the leg. It's the joint that allows you 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 kneecap (patella covers the area where these two bones meet.

During surgery for a total knee replacement, the damaged part of your knee is removed and replaced with an implant. Implants are made of various materials such as stainless steel, titanium, chrome, cobalt or polyethylene. In addition, bone cement may be used during the repair.

The type of implant used can vary from person to person. There are several factors that are taken into consideration such as age, activity level, body type and the amount and strength of the bone and bone tissue. Your surgeon will choose the implant that is in your best interest and meets your needs and lifestyle.

A relatively thin amount of bone is removed from the end of the thigh bone, the top of the leg bone and the underside of the kneecap. This creates bone surfaces that allow proper fitting of the implant. The goal of the surgery is to also preserve the major ligaments and tendons, which enable the knee to bend and straighten, yet remain steady in position from side-to-side and front-to-back.

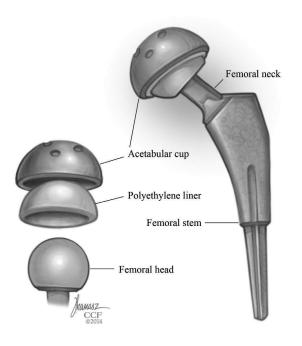


# OVERVIEW OF TOTAL HIP REPLACEMENT

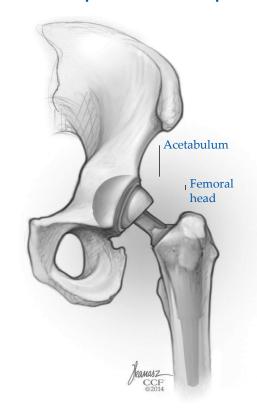
The hip joint functions to assist us in maintaining balance and supports our weight in all its movements. The upper end of the leg bone (femur) has a rounded head (femoral head) that fits into a socket (acetabulum) in the pelvis to form the hip joint.

During total hip replacement surgery, the damaged part of the hip is removed and replaced with implants, called components. Your surgeon selects the components that are best suited for you based upon age, activity level and body type.

**Total Hip Replacement Components** 



## **Location of Components in the Hip**

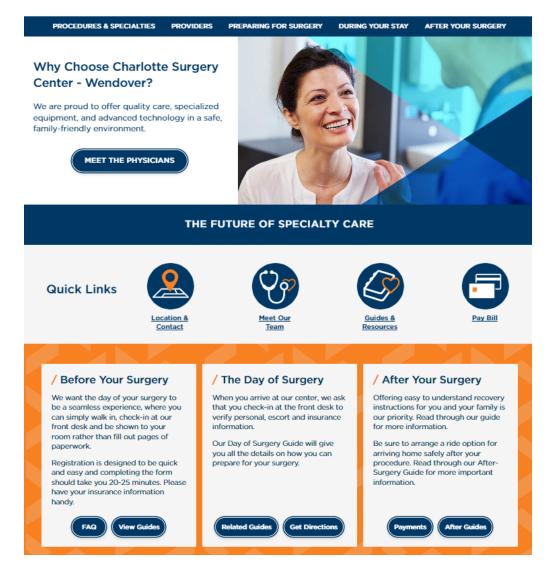


# For more information about the Charlotte Surgery Center Wendover Campus, please visit our website at

www.charlottesurgerycenterwendover.com



Have questions?
Phone: 704-206-8800
Fax: 866-998-0479



# **Your Questions**

We want to be sure to answer any questions you may have. If you have questions for your physician or the nurses, please write them down and be sure as a particle.
o ask us at any time.
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