Hospital Stay:

- 1. A large team will take care of you in the hospital. This includes members of Dr. Charles team such as nurses, physician assistants, physical therapists, hospitalists and discharge planners.
- 2. You will be evaluated by physical therapy. You will have 1-2 sessions per day. The goal of therapy while in the hospital is to get you mobile and safe to transition back home.
- 3. A case manager will assist in making your discharge plans. You will have already discussed this with the surgeon, but the case manager will execute the plans. If there are no extenuating circumstances, it is my preference for you to be discharged home with home health/physical therapy. This will decrease the risk of any hospital-acquired infections and is associated with lower rate of complications and readmission. However, if there is a concern for your safety during your hospitalization then you may need to transition to a rehab/SNF facility.
- 4. Highly-motivated patients may be discharged home the same day. There are specialized physical therapy and case management protocols for this and more detail can be provided.
- 5. You will continue to receive a specialized pain regimen designed to limit narcotic pain medications.
- 6. You will be placed on a blood thinner to reduce the risk of blood clots
- 7. You will be given 24 hours of antibiotics to minimize the risk of infection
- 8. A sliver-based dressing will be placed to help with wound healing. This will remain on until 7 days after the operation.
- 9. You will be sent home with prescriptions for pain medications, laxatives, and anticoagulants.