

# Total Joint Replacement

at Taylor Hospital

CROZER-KEYSTONE  
HUMAN MOTION INSTITUTE

TAYLOR HOSPITAL

## A GUIDE FOR PATIENTS AND FAMILIES



We're 5 hospitals, 2,600 doctors and nurses,  
and 7,100 caring people with 1 vision.

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## Welcome to Taylor Hospital

Thank you for choosing Taylor Hospital for your joint replacement surgery. We understand the careful consideration that goes into selecting a facility for orthopedic treatment, and we are proud that you have chosen us. Our record of offering state-of-the-art care in a community setting has earned us a reputation of excellence. We are confident that our services and staff will meet your expectations.

Taylor Hospital's joint replacement program offers each patient specialized, personalized care that begins the moment a joint problem is diagnosed and continues throughout completion of rehabilitation and beyond.

Our comprehensive approach is designed to get you back to your normal routine as quickly and safely as possible. Prior to surgery, we work to educate and prepare you for surgery to help ease anxiety and encourage you to become an active participant in your treatment. Trained in the most advanced surgical approaches, our surgeons strive to provide the best outcomes modern medicine can offer. After surgery, our team of nurses and therapists assist and encourage you through your recovery.

We value you as a patient at Taylor Hospital, and your needs are important to us. This is why we have prepared this guide to familiarize you with the procedures at our facility and help you feel as comfortable as possible. If you have any questions after reading this booklet, please feel free to call us at (610) 595-6540.

Sincerely,

**Diane Miller**

*Chief Operating Officer, Taylor Hospital*

## An Introduction to Joint Replacement

### What is total joint replacement?

An arthritic or damaged joint is removed and replaced with an artificial joint called a prosthesis.

### What is a joint?

A joint is formed by the ends of two or more bones that are connected by thick tissues. For example, your knee joint is formed by the lower leg bone, called the tibia or shin bone, and your thigh bone, called the femur. Your hip is a ball-and-socket joint, formed by the upper end of the femur, the ball, and a part of the pelvis called the acetabulum, the socket.

The bone ends of a joint are covered with a smooth layer called cartilage. Normal cartilage allows nearly frictionless and pain-free movement. However, when the cartilage is damaged or diseased by arthritis, joints become stiff and painful. Every joint is enclosed by a fibrous tissue envelope or a capsule with a smooth tissue lining called the synovium. The synovium produces fluid that reduces friction and wear in a joint.



### Why is total joint replacement necessary?

The goal is to relieve the pain in the joint caused by the damage done to the cartilage. The pain may be so severe that a person will avoid using the joint, weakening the muscles around the joint and making it even more difficult to move it. A physical examination, possibly some laboratory tests and X-rays will show the extent of damage to the joint. Total joint replacement will be considered if other treatment options will not relieve your pain and disability.

### How is a total joint replacement performed?

You will be given an anesthetic and the surgeon will replace the damaged parts of the joint. For example, in an arthritic knee the damaged ends of the bones and cartilage are replaced with artificial surfaces that are shaped to restore knee movement and function. In an arthritic hip, the damaged ball (the upper end of the femur) is replaced by a metal ball attached to a metal stem fitted into the femur, and a plastic socket is implanted into the pelvis, replacing the damaged socket. Although hip and knee replacements are the most common, joint replacement can be performed on other joints, including the ankle, foot, shoulder, elbow and fingers.

The materials used in a total joint replacement are designed to enable the joint to move just like your normal joint.

*(courtesy of the American Academy of Orthopaedic Surgeons)*

### Pre-Admission Testing Appointment Checklist

Prior to your appointment, you may eat normally and take your usual medications, unless you have been instructed otherwise. It is helpful to wear comfortable clothing.

Please bring the following items to your pre-admission testing visit:

- Health insurance information
- All current medications and herbal supplements
- Results from recent diagnostic or imaging tests

## Your Pre-Admission Experience

As a patient scheduled for joint replacement surgery at Taylor Hospital, you will be seen prior to surgery in our Pre-Admission Testing Unit. A Pre-Admission Testing clerk will call you to schedule your appointment and give you instructions on what to bring with you and what to expect during this visit.

At your appointment, you will be asked about your health history and receive a physical examination that may include laboratory tests and diagnostic studies. This testing may include an electrocardiogram (EKG) and chest X-ray. In order to eliminate repetitive testing, if you have had testing done recently, please bring those reports with you.

During your pre-admission visit, a registered nurse will review all the medications and herbal supplements that you take. You will be told which medications and supplements you should stop, and when, and which medications you need to take the morning before surgery.

Your surgeon may have discussed pre-operative autologous blood donation with you. Autologous blood donation is when you donate and store your own blood prior to your surgery. Thus, if you require a transfusion during surgery, your donated blood is used. If this is an option for you, your surgeon's office will schedule this procedure with Taylor Hospital.

Additionally, you will be asked if you have a "living will" and/or a "power of attorney for health care." You will also be asked if you are an organ donor.

A living will is a document that gives direction to health care providers about your future treatment choices in certain circumstances, should you be unable to express your wishes. A power of attorney for health care allows you to name someone to make health care decisions for you if you are unable to make these decisions yourself. A living will and power of attorney for health care are not required, but if you do have these documents (called "advance directives"), you can present them at your visit. You can also request information on writing advance directives.

You will be offered a tour of the hospital inpatient unit that you will go to post-operatively. You will receive information on what to expect from your post-surgical physical and occupational therapy experience.

After your visit, an anesthesiologist will review your information and results. You may need to have additional tests done as a result of this review.

You will receive a phone call by one of our clinical resource managers prior to your surgery day to review your discharge options.

## The Weeks Before Surgery

Prior to your joint replacement surgery at Taylor Hospital, there are certain things that you can do to help reduce stress and ensure an easier and faster recovery.

### Dental Work

Prior to joint replacement surgery, it is important to have tooth or gum problems treated and under control. Finish any dental work that may be underway. This helps prevent infection that can be caused when microorganisms in your mouth enter your bloodstream and infect your new joint. Surgery could be delayed if you have dental problems.

### Podiatry Consult

If you are a diabetic, your surgeon may order a consult with a podiatrist.

### Familiarize Yourself with Post-Surgery Devices

You will require special equipment and devices after your joint replacement surgery. It is recommended that you familiarize yourself with these items before surgery. These devices may include:

- An elevated toilet seat, which may be necessary to keep the knees lower than the hips when sitting on the toilet (for hip replacement patients only)
- A shower seat to provide support while bathing
- Handrails and grab bars to help you steady yourself while getting in and out of the tub
- A long-handled shoehorn or a sock aid, to help you put on and take off your shoes and socks without bending over (for hip replacement patients only)
- An extension "reacher" or "grabber," for picking up objects that are too low for you to reach (for hip replacement patients only)

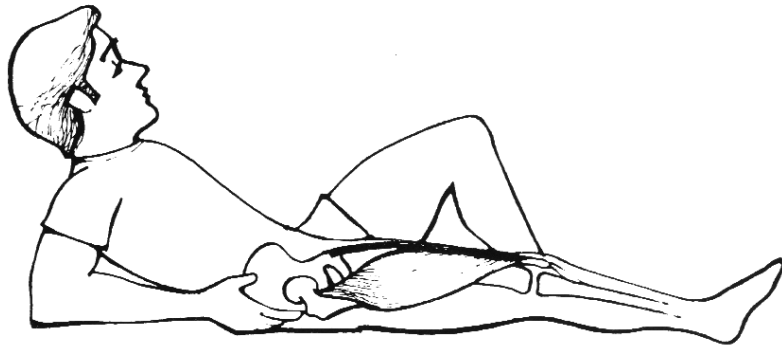
### Pre-Surgery Exercises

Pre-surgery exercises help to prepare your body for surgery. They also help you become familiar with some of the exercises that you will need to do after surgery.

Exercises can strengthen muscles surrounding the affected joints, which can help you recover faster. Before surgery, it is helpful to learn and practice the exercises that will be prescribed for you post-operatively. Also, doing exercises to strengthen your upper body will help you use crutches or a walker after surgery.

## Sample Exercises

### Quad Set



**Purpose:** To strengthen your thigh muscles (quadriceps).

**Position:** Half-sit with your weak leg as straight as possible. Bend the other leg as illustrated.

**Action:** Tighten (flex) the muscles on the top of your thigh. This will make your kneecap move toward your hip.

(Your leg should still be straight and lying on the bed.) Hold. Do not hold your breath.

Relax.

Repeat.

### Ankle Pumps



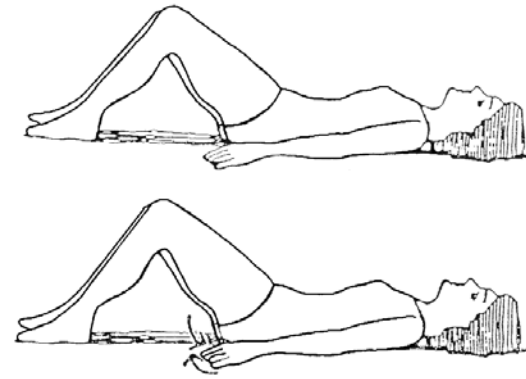
**Purpose:** To increase motion in your ankles, to improve circulation, and to improve strength of your ankle muscles.

**Position:** Sit in a chair and place both feet flat on the floor. (This can also be done lying in bed.)

**Action:** Leaving your heel on the floor, tap your foot up and down. Each time, raise your foot up as high as possible.

Repeat.

### Glut Sets



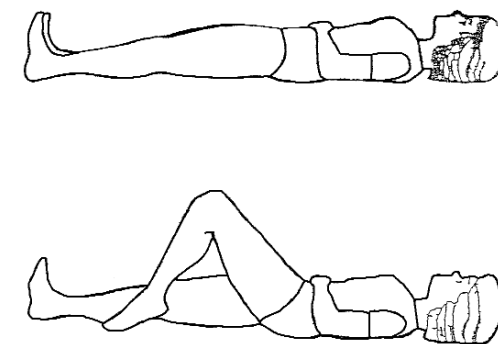
**Purpose:** To strengthen your buttock muscles (gluteus maximus).

**Position:** Lie on your back with your knees bent and feet flat on the mat, bed or floor.

**Action:** Squeeze your buttocks as tight as possible. Release slowly.

Repeat.

### Heel Slides



**Purpose:** To strengthen the hip muscles and/or to maintain the motion of the hip.

**Position:** Lie on your back with your legs straight.

**Action:** Lift your leg, bending it at the hip and knee. Bring your knee toward your chest.

Return to starting position.

Repeat.

## What to Expect of Your Hospital Room

Your room will have a phone and a television, which features two patient education channels (channels 20 and 21). Your nurse will review with you and your family sections that will benefit in your recovery. Please remind visitors to use cell phones in the lobby or outside the hospital only. Also ask your visitors to only use public restrooms and not the restrooms designated for patients' use.

## Preparing Your Home

Preparing your home before your surgery will make your recovery and rehabilitation safer and easier. Keep in mind that it will be difficult for you to move about your home, and that "one-floor" living is preferable during your early recovery. Make sure lighting is bright and that furniture is arranged in a way so that you can move around easily on crutches or with a walker or cane.

Additionally, make sure your home is well-stocked with frozen or prepared meals. Prior to your surgery, pay upcoming bills and make arrangements for pet care. Align a "relay team" of relatives and friends who can help you with daily activities, and have someone check in on you every day.

Tour your home and ask yourself the following questions. If you answer "no" to any, consider making changes to that area:

### GENERAL HOUSEHOLD AREAS:

Yes No

- Are light switches easily accessible upon entering a room?
- Are throw rugs removed or tacked down, or is non-skid backing applied?
- Are hallways free from clutter?
- Are raised door thresholds clearly marked?
- Are electrical and telephone cords away from hallways and walking areas?
- Do you have a portable phone with emergency numbers easily at hand?
- Do you have furniture with good back and arm support that you can get in and out of easily?

### STAIRWAYS:

Yes No

- Are stair treads in good condition?
- Is there a sturdy handrail on both sides of the stairs?
- Are the stairs brightly lit?

### BEDROOM:

Yes No

- Is there a lighted pathway from the bedroom to the bathroom?
- Is there a clear pathway from the bedroom to the bathroom?
- Do you keep a charged flashlight near your bed for emergencies?

### BATHROOM:

Yes No

- Do you have safety or grab bars?
- Do you have skid-resistant strips or a rubber mat both in or in front of the bathtub?

### KITCHEN:

Yes No

- Do you use a wide-based sturdy step to reach into high cabinets?
- Are spills immediately wiped up?
- Do you avoid using a high-gloss floor wax?
- Do you store frequently used items at waist or chest level and less-frequently used items in higher cabinets?

*Checklist adapted from Home Safety Checklist/US Department of Health and Human Services/Office of Human Development and Services Administration on Aging*

## Just Before Your Surgery

The day before and the morning of your joint replacement surgery, you will be asked to follow specific instructions to prepare yourself. Basic preparations are described below. Your physician and anesthesiologist will inform you if you need to modify these instructions.

### Eating and Medication

It is important that you not eat or drink after midnight the night before your joint replacement surgery in order to prevent vomiting. You may brush your teeth.

### Showering Before Surgery

Showering prior to joint replacement surgery helps prevent the infections that, in rare situations, can occur after surgery as a result of microorganisms on your skin.

At your pre-admission visit, you will receive antibacterial soap. It is used to add an “extra step” to your regular shower routine. Pay special attention to the joint and surrounding area of your body affected by your surgery.

Take a shower (not a bath) the evening before your surgery, and follow the instructions below:

1. If you need to wash your hair, do this first.
2. Wash your body as you normally would, using a clean washcloth.
3. After your routine shower, wash the skin covering and surrounding the joint to be operated on with the soap you have been given. Wash for two minutes and rinse.
4. Use a clean towel to dry off.
5. Wear clean clothing to sleep.

On the morning of your surgery, if time allows, repeat steps 3 and 4 again.

### Packing for the Hospital

The clothes you have with you when you are admitted to Taylor Hospital will be kept for you for your discharge. Please leave all valuables, such as jewelry, credit cards, and checkbooks, at home for safety. You will be responsible for hearing aids, glasses, dentures, etc. Taylor cannot be responsible for any valuables that you bring to the hospital.

Have a family member bring the following items for after discharge from the acute care facility: non-skid shoes that are closed in the back of the heel, loose-fitting clothes, loose-fitting pajamas, a light robe, and personal hygiene items. You may also like to have books, crossword puzzles, cards, and other interest items to help you occupy your time.

## Your Surgery Day

### When You Arrive at Taylor Hospital

Please arrive at the hospital one-and-a-half hours before your scheduled surgery time. Prior to your surgery, you will be asked to make sure your bladder is empty. You will then be asked to change into a hospital gown and wear a surgical cap. Any dentures, contact lenses, or prostheses must be removed. All clothing, including undergarments, must be taken off.

A nurse will ask you if you have had anything to eat or drink after midnight the night before (surgery could be canceled if you have). Your vital signs will be taken. An identification bracelet will be placed on your wrist.

A nurse will insert an intravenous (IV) line into your arm. The needle will prick and burn when first inserted, but this will ease in a few minutes. The IV is necessary to give you fluids until you are able to drink again. It also can be used to give you medicine in the operating room.

A nurse will prep the operative area according to the type of surgery and the physician's orders.

If you smoke or have a history of lung or respiratory disorders, you may be required to have a respiratory treatment. This is done to open the airways in your lungs and help your breathing during surgery.

### The Holding Area

When your pre-surgery preparations are completed, you will be transported to the Holding Area on a stretcher. At this time, a member of the Anesthesia department will talk to you. You will be given antibiotics to increase your resistance to infection after surgery. Your surgeon will greet you in this area to verify and mark the operative site, and will answer any questions you may have.

### The Operating Room

Upon arriving in the Operating Room, you will be asked to move from the stretcher onto the operating room table. You will be “hooked up” to a cardiac monitor and a supply of oxygen. This is a precaution that is taken with all patients to ensure their safety during a procedure. You will then receive anesthesia to make you comfortable during the procedure.

### Your Family

Your family will generally be able to stay with you until you go to the Holding Area to await your surgery. When you leave for the Holding Area, your family will be asked to wait in the Surgical Family Waiting Room. After the surgery, your surgeon will talk to your family either by phone or in person.

The Meditation Room, on the first floor, is open 24 hours a day. It is a place for our visitors to spend a quiet time of personal reflection.

Family should use their cell phones outside the hospital or in the main lobby only. Pay phones are located throughout the hospital and outside the Surgical Family Waiting Room.

## Protecting Your Privacy

While you remain in our hospital, we will do our best to provide you with the high-quality care that you have come to expect. In light of new government regulations, and in accordance with hospital policy, please be assured that your confidentiality will be protected. In order to meet this policy, staff members are not allowed to give out information on your condition. We ask that family and friends call you directly to discuss your condition.

In the event that you are unable to accept phone calls, you or your emergency contact person will be asked to identify one spokesperson. The spokesperson will be given a special word or number to identify themselves when calling the nurse's station. Only this person may obtain information regarding your condition (e.g., how you spent the night; pain; nutritional status; plans for discharge; etc.). Your spokesperson must have the special patient identifier to obtain any information. If they, or you, have any questions about test results or diagnosis, please contact your doctor.

## After Your Surgery

### The Post Anesthesia Care Unit (PACU)

After your surgery is completed in the Operating Room, you will be transferred to the PACU on a bed with an overhead frame and a "trapeze" (a triangle-shaped bar over your bed). The cardiac monitor and oxygen will still be in place. The nurses will monitor your pulse and blood pressure frequently. You will stay in the PACU until the anesthesiologist determines your condition is stable. You will then be transported to your assigned hospital room.

The nurses in the PACU will update you and your family.

You will have the following equipment in your room:

- An intravenous (IV) line for medications and IV fluids. You will be instructed to use the call bell to call the nurse if your IV pump begins beeping or if you have any pain or swelling around your IV site.
- An incentive spirometer, which improves breathing and helps remove mucous.
- A nasal cannula to provide you with oxygen for the first 24 to 48 hours.
- A sequential compression device to prevent blood clots and aid in circulation (or you will be asked to do ankle pumps).
- A Foley catheter for urine collection until you are more mobile.
- Ice bags or a controlled cold-therapy device. If a cold-therapy device is used, you will need to ship it back to the company after you are finished using it. A postage-paid shipping container will be provided so that you may send the device back to the company. There are no costs to you to ship it.

Total hip replacement patients will have a pillow placed between their legs to ensure proper leg position.

After your surgery, your nurse will have you breathe deeply and cough. This helps loosen congestion in your lungs and to rid the lungs of secretions. This should be done at least every two hours. For deep breathing, inhale as deeply as possible and hold for five 10-counts. For coughing, exhale deeply from your abdomen.

## What To Expect During Your Hospital Stay

Your acute-care hospital stay will generally last four days. Your physician will see you daily, and the nursing staff will tend to your personal needs.

On the day after your surgery, you will generally be guided out of bed for the first time, and you will gradually be reintroduced to a standard diet. You will continue to receive pain medicine. Pain medication plays a vital role in your rehabilitation process and is as important as any other prescribed medication. Patients whose pain is under control are better able to participate in therapy and recover more quickly.

During your acute-care stay, you will encounter the following specialists:

- A *physical therapist*, who will assist you in learning exercises tailored to your needs. You will receive physical therapy twice daily on weekdays and once daily on weekends. Your physical therapist will assist you in learning exercises to improve circulation, strength, range of motion, and functional mobility. You will concentrate at first on getting in and out of bed or a chair and walking, and will progress to climbing stairs, balance, safety, and community reentry. The physical therapist will also help to recommend your next level of care (e.g., home care, Rehab unit, nursing home, or outpatient therapy).
- An *occupational therapist*, who will see you the day after your surgery and will work with you once a day. Occupational therapists help you adapt to the new everyday challenges you will face (such as dressing, bathing, toileting, and preparing meals) and will assess which adaptive equipment, such as a raised toilet seat or a reaching device, you will require when you return home.
- A *case manager*, who will evaluate your needs at discharge. The case manager will help set up care for when you return home, make sure you have the equipment you will need, and that therapy and/or nursing care is planned and set up. If need be, the case manager will consult with a social worker to aid the transition.



## Going Home After Acute Care

### Discharge Instructions

#### Incision Care

Your surgical incision will be closed with staples, which are used instead of stitches and have the advantage of causing fewer infections. The staples are removed approximately 10-12 days after your surgery by your care providers (either the Home Care nurse, or the doctor or nurse at the rehab unit or nursing home). Steri strips are usually applied; they will gradually loosen and fall off on their own. You will receive written instructions on your incision care.

#### Other Instructions

You also will receive instructions on hygiene, diet, medications, therapies and follow-up physician appointments.

### Anti-Embolism Stockings

Your surgeon may order below-knee anti-embolism stockings, known as TED stockings. TED stockings are sometimes worn for one month after your surgery. The purpose of anti-embolism stockings is to prevent blood clot formation by exerting pressure on small vessels of the legs. This pressure forces blood into large veins, aiding the flow so the blood won't pool and cause clot formation.

Your legs must be measured to ensure correct fit and to prevent stockings from being too tight or too loose. If they are too tight, circulation could be affected. If they are too loose, they are not effective.

Apply stockings to clean, dry legs. Elevate your legs for five minutes if you have been walking or sitting before putting on the stockings. Be sure the stockings are smooth, or they may cause too much pressure. Remove the stockings at bedtime, and put them back on in the morning. After removal, check your legs for redness, open areas, or increased swelling.

Stockings may be rinsed and hung to dry if soiled. Make sure stockings are completely dry before putting them back on.

### When to Call Your Doctor

Your physician will give you specific instructions on what to look out for as you recover. You should call your doctor if:

- You experience increased pain.
- You develop a temperature above 101 degrees.
- You notice redness, heat, or yellow-green drainage around your incision site.
- You have pain in the calf of your leg.
- You experience chest pain, shortness of breath, or difficulty breathing.
- You have any other symptom that you don't understand.

## Taylor Hospital Home Health

Your physician may recommend home care. Taylor Hospital Home Health is a group of skilled professionals who work in cooperation with each patient's physicians to formulate an individualized plan for care for the post-hospitalization period.

As you receive home services, your physicians are kept up-to-date on your progress. You will continue to make regular office visits.

Taylor Hospital Home Health care providers include:

- skilled nurses
- home health aides
- physical, occupational and speech therapists
- social workers

Home health services are personalized for each patient. Intake specialists make arrangements for care and do a full evaluation of insurance coverage prior to the first home care visit. For more information, call Taylor Hospital Home Health at (610) 595-6430.

### Inpatient Rehabilitation

The goal of rehab is to help you return to and/or improve your level of functional activities both at home and in the community. Depending on your individual status and insurance, a decision is made regarding where you will receive rehabilitation services.

Some Taylor Hospital joint replacement patients proceed to Taylor's inpatient Rehabilitation Unit before returning home. In this unit, patients continue to receive the therapy and care they need to get back to their normal lives and routines.

The length of time a patient stays in Taylor's Rehabilitation Unit depends on many factors, including the severity of the joint problem prior to surgery and the patient's age, health status, home environment, and insurance coverage.

While in the Rehabilitation Unit, your rehabilitation team will include a rehabilitation physician, nurses, physical therapists, occupational therapists, recreational therapists, a social worker and/or a case manager and, if needed, psychiatrists/psychologists and speech therapists.

Your care will be individualized according to your needs as determined by your physicians. A rehab physician will see you daily, and your orthopedic physician will see you on an as-needed basis. A social worker will update you on your length of stay and discharge date, make arrangements for family teaching sessions, continuing services post-discharge, or any other issues related to your discharge in order to have a smooth transition from rehabilitation to home. A case manager will assist with insurance issues, referrals for home care, and in ordering equipment prior to your discharge.

## Taylor Hospital Outpatient Rehabilitation

Your physician may recommend outpatient physical therapy. Outpatient rehabilitation is vital to a successful orthopedic recovery. The specialists at Taylor Made Physical Therapy recognize that each patient's rehabilitation needs are unique, and through one-on-one consultation with each patient determine the best, most appropriate rehabilitation approach. Outpatient rehabilitation aims to restore function by helping the patient regain strength, movement, and endurance.

Taylor Made Physical Therapy is proud to offer, at no cost to you, the **Total Joint Program**.

Included in the program:

- Tour of our comprehensive outpatient facility
- Free gift just for stopping by
- Fifteen-minute one-on-one educational session to better prepare you for the rehabilitation and recovery process following your total joint surgery

For more information, to schedule an appointment, or to redeem your tour pass, please call Taylor Made Physical Therapy at (610) 237-9993.

## Skilled Nursing Facility

Patients may need to go to a skilled nursing facility for a short period prior to discharge home. The social worker will help you and your family choose a nursing home for short-term care.

## Mobility After Surgery

As you resume movement after your total hip replacement surgery, it is important to modify the way you move. Moving the wrong way could put added stress on your new joint or could cause dislocation.

## If You've Had a Hip Replacement. . .

There are several activities that you must avoid FOREVER because of your hip surgery:

- Never bend your hip past 90 degrees. When sitting, keep your legs below your hips. Avoid bending over at the waist to pick something up from the floor and never squat.
- Do not take tub baths.
- Do not run or jump.
- Never sit on a soft or low sofa or chair.
- Never cut your own toenails.

When in doubt, remember this saying:  
"A straight knee makes a safe hip."

For four months:

- Do not cross your legs. Sit with your legs 3 to 6 inches apart
- Do not turn your operated leg inward ("pigeon-toed").
- If applicable, follow your doctor's advice on using a cane, walker or crutches to keep weight off of your hip as it heals.

## If You've Had a Knee Replacement. . .

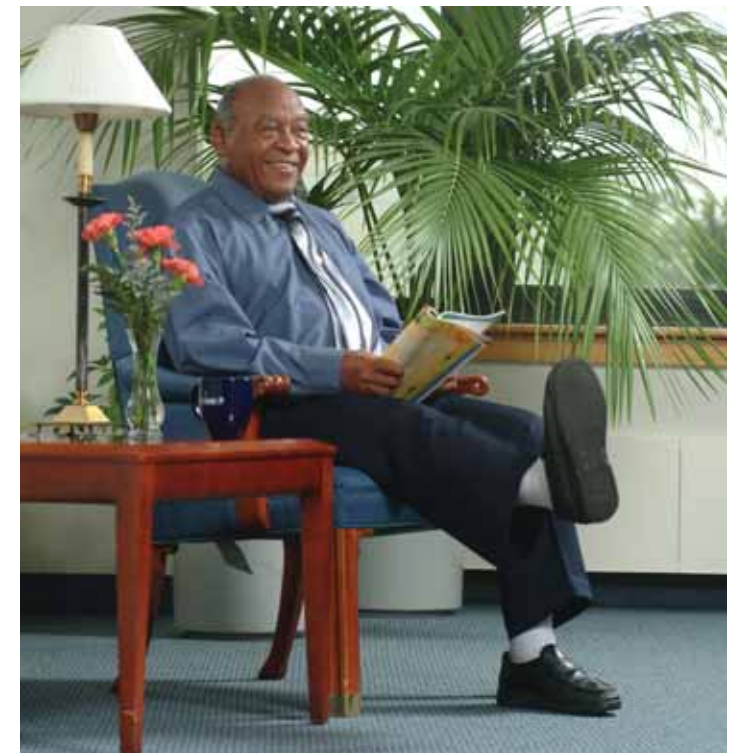
- Don't twist or pivot.
- Don't squat.
- Don't kneel until 4-6 months, then do so on a soft, padded surface.

If applicable, follow your doctor's advice on using a cane, walker or crutches to keep weight off of your joint as it heals.



Do bend your knee as much as you can.

Do straighten your knee all the way. Push your knee "flat as a pancake."



## Life After Joint Replacement Surgery

Each joint replacement surgery patient's experience is individual. Here are answers to some common questions about what to expect after surgery. . .

### How much pain will I have after surgery?

All surgery involves some pain. As you begin to use your new joint, you will likely have some temporary pain because the surrounding muscles are weak from inactivity and the tissues are healing. Most patients are surprised how heavy their leg feels after surgery. Over the following weeks you will find that the pain caused by arthritis or other conditions will be relieved.

### Will I be able to get back to all of the activities I enjoy?

For several weeks, you will use a walker and crutches. In four to six weeks you may need to use a cane. After healing and rehabilitation, you will likely be permitted to participate in physical activities, such as walking and swimming. However, more strenuous sports, such as running, racquetball, and jumping sports, are prohibited.

### How soon until I can drive?

It is essential to regain muscle control before resuming driving. Physicians generally recommend that joint replacement patients wait six weeks before resuming driving. For left-hip patients, driving a stick-shift car would extend the waiting period. Hip replacement patients should not drive a small sports car that is low to the ground, as these cars force you to sit with your knee higher than your hip.

### Do I have to eat special foods after my surgery?

When you return home, you will be eating a regular diet. Your doctor may recommend that you take vitamin supplements, especially those containing iron and vitamin C, and that you limit caffeine and alcohol. According to the American Academy of Orthopaedic Surgeons, you should avoid excessive amounts of vitamin K while you are taking blood thinner medications, which are prescribed after surgery. Foods rich in vitamin K include broccoli, cauliflower, Brussels sprouts, liver, green beans, garbanzo beans, lentils, soybeans, soybean oil, spinach, kale, lettuce, turnip greens, cabbage and onions.

*If you have any questions please call your doctor. You may also call Taylor Hospital at (610) 595-6540 and your call will be directed to the appropriate department.*

## Getting to Taylor Hospital

### From Center City, Philadelphia

- Take I-95 South to exit number 8, Ridley Park.
- Turn right at the top of the ramp.
- Go to the traffic light and turn right onto Chester Pike (Route 13).
- Taylor Hospital is approximately 3/10 mile down the road on the left.

### From Delaware

- Take I-95 North to exit number 8, Ridley Park.
- Keep left on the exit ramp and make a left at the traffic light.
- Go to the second light and turn right onto Chester Pike (Route 13).
- Taylor Hospital is approximately 3/10 mile down the road on the left.

### From New Jersey -- Commodore Barry Bridge

- Take Route 322 West to the Commodore Barry Bridge.
- Take the I-95 North exit toward Philadelphia.
- Take I-95 North to exit number 8, Ridley Park.
- Keep left on the exit ramp and make a left at the traffic light.
- Go to the second light and turn right onto Chester Pike (Route 13).
- Taylor Hospital is approximately 3/10 mile down the road on the left.

### **From New Jersey -- Walt Whitman Bridge**

- Take I-295 South to the I-76 exit, number 26 (on the left), toward Camden/Philadelphia.
- I-76 becomes the Walt Whitman Bridge.
- Take I-95 South to exit number 8, Ridley Park.
- Turn right at the top of the ramp.
- Go to the traffic light and turn right onto Chester Pike (Route 13).
- Taylor Hospital is approximately 3/10 mile down the road on the left.

### **From the Norristown/Plymouth Meeting Area**

- Take I-476 South and follow to the exit for I-95 North.
- Take I-95 North to exit number 8, Ridley Park.
- Keep left on the exit ramp and make a left at the traffic light.
- Go to the second light and turn right onto Chester Pike (Route 13).
- Taylor Hospital is approximately 3/10 mile down the road on the left.

### **Parking:**

- Turn left onto Morton Avenue (first street after you pass the hospital).
- There is a visitors' parking lot at the top of the hill on your right.

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TAYLOR HOSPITAL

175 East Chester Pike  
Ridley Park, PA 19078



We're 5 hospitals, 2,600 doctors and nurses, and 7,100 caring people with 1 vision.

**Crozer-Keystone. Something to feel good about.**

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