Joint Replacement Surgery and Aftercare

Nebraska Orthopaedic and Sports Medicine, P.C.

By Jessica Florez

As we age, our weight-bearing bones and moveable joints begin to

break down, and the need for joint replacement surgery and appropriate aftercare rises. Nebraska Orthopaedic and Sports Medicine, P.C. has helped

many patients with these procedures. Starting in April of 2016, healthcare legislation has changed some requirements for treatment and post-operative management for joint replacement therapy in Nebraska. James Gallentine, MD, wants us to know that Nebraska Orthopaedic and Sports Medicine is here to help us navigate the new rules and prepare for joint replacement procedures.

Osteoporosis and arthritis are common for women as they enter their 40s and 50s. Knee arthritis, says Dr. Gallentine, is particularly on the rise for women. Arthritis of the knee slowly breaks down the knee joint, which can eventually lead to knee replacement surgery. The nationwide popularity of the procedure is one reason that it is targeted in the Patient Protection and Affordable Care Act (PPACA), which is now changing the way that Nebraska hospitals and others approach knee and hip replacement care. "Patients are now going to be expected to play a larger role in their pre- and post-operative care," explains Dr. Gallentine. "This includes controlling current health conditions" before surgery can be performed.

In 2014, more than 1 million total hip and total knee procedures were performed in the United States; approximately half of these were covered by Medicare. A new program called the Comprehensive Care for Joint Replacement (CJR) model is the first mandatory bundled care system that was rolled out to 67 metropolitan areas, including Lincoln. This model focuses on knee and hip replacement surgeries because they are common and expensive procedures. The hope is that this model will standardize the level of care across the country and ensure that physicians and post-operative care clinicians are working together to achieve coordinated care at a reduced cost.

What does this mean for patients? First of all, there will be more requirements to qualify for joint replacement surgery. The goal is to reduce overall patient complications and ensure a higher quality of care. Physicians will focus on medical conditions that might lengthen a patient's hospital stay, increase the risk of infection, and increase the likelihood of re-admittance to the hospital.

"Obesity is a factor for post-surgery complications, which can lead to a delay in treatment," shares Dr. Gallentine. Anyone with a body mass index (BMI) higher than 30 is considered obese; over 40 is considered extremely obese. Patients with a high BMI generally heal slower and are more likely to get infections. Under this new model, patients may need to be within a certain BMI

before surgery in order to ensure that the procedure is considered successful for the patient.

Diabetes that is not being properly controlled and smoking may also lead to a hospital re-admittance post-surgery, which can directly affect the hospital's quality of care rate and reimbursement rates through Medicare under the CJR model. With this new heightened care system, it will be even more

important for the physician performing the procedure to help in setting expectations and ensuring that patients are properly managing their health before and after surgery.

Addressing potential risks before surgery will likely lead to better and more efficient care, but the system requires a whole new level of education for the patient. Patients may need to address any medical conditions that could affect their quality of care before they qualify for surgery. They must learn more about their physician's expectations and how to best avoid pre- and post-operative complications.

Hospitals have noted a correlation between a patient's length of stay in the hospital and the readmission rate within the first 30 days after surgery. "It's important that patients are mobilized earlier and out of the hospital sooner to prevent any post-operative infections or setbacks," says Dr. Gallentine. Prior to a procedure at Nebraska Orthopaedic and Sports Medicine, all patients and their coaches (caregivers or family members) are required to attend a class that walks them through pre- and post-surgical expectations.

This also means that patients will be responsible early on for their pain management care and having a post-surgical care plan in place. No longer are patients staying in the hospital for several days and being dismissed to a skilled nursing facility. They now play a larger and more educated role in their own post-operative care.

Dr. Gallentine and the team at Nebraska Orthopaedic and Sports Medicine, P.C. are here to help us get where we need to be so our treatment and recovery can begin. For more information, visit their website at NebraskaOrtho.com or call them at 402-488-3322.



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