CJRI Rapid Recovery Protocol

Purpose:

The CJRI Rapid Recovery Protocol is intended for patients who are planning on being discharged home the day following surgery.

Assumptions

- The surgeon’s office will identify the patient as “Rapid Recovery” on the booking sheet.
- Commercially insured patients having a Primary Total Hip Arthroplasty (THA), Primary Total Knee Arthroplasty (TKA), or Uni-compartmental Knee Arthroplasty (UKA), will be eligible for the CJRI Rapid Recovery (RR) Protocol.
- The healthy Medicare patient may be considered for this protocol if patient meets all discharge criteria and has needed support at home.
- RR patients are pre-certified for an inpatient procedure.
- Patients are discharged on post-op day one.
- Patients will follow CJRI Protocols when applicable.
- * Patients with OSA, and who are compliant with their CPAP machines are eligible for the RR protocol. Non-compliant OSA patients and newly diagnosed OSA patients are excluded from the RR protocol

CJRI Rapid Recovery:

- OR Scheduler:
  - OR schedule identifies patient as Rapid Recovery

- Upon admission to 9-7 or 10-7, the RR patient will:
  - Wear personal clothing.
  - No nasal O2, maintain oxygen saturation on room air.
  - Admit to floor with heplock IV; remove heplock when patient is tolerating P.O. fluids
  - P.O. Pain Meds for pain control. For breakthrough pain, manage patient “as-if” at home, obtain order for another p.o. dose.
  - Encourage P.O. fluids
  - Promote frequent ambulation.
  - Foot pumps at night only- Foot pumps: Apply in PACU, remove with first ambulation, reapply at night only.
  - Require no lab draws

- Mobility Plan for the Rapid Recovery patient
  - Physical Therapy or PACU RN/CNA mobilizes the patient in PACU.
• RR patients will have mobility orders for evening/night of surgery and POD #1 prior to discharge.
• Ambulate patient 2-3 times day/evening of surgery.
• PT evaluation prior to patient discharge.

The PT evaluation prior to discharge includes:
• Determination of appropriate assistive device for safe ambulation at home i.e. walker, cane, crutches (some patients will need both walker/cane)
• Safe chair transfers
• Safe bed transfers
• Patient able to climb stairs, if applicable, at home

• Patients will receive follow-up post-discharge call next day by a CJRI pre-op/inpatient staff.
• The patient will be seen by the Surgeon for their regularly scheduled visit typically within two weeks post-operatively.

Latest updates in blue.