

**IMPORTANT
PATIENT
INFORMATION
ENCLOSED**

MY GUIDE TO TOTAL KNEE REPLACEMENT

**MIDDLESEX
HOSPITAL
ALLIANCE**



Please bring this booklet with you to each of your hospital visits, including your preadmission appointment and hospital stay

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WELCOME TO THE MIDDLESEX HOSPITAL ALLIANCE

On behalf of all the staff at the Middlesex Hospital Alliance, we would like to welcome you. Our total hip and knee replacement program started in 2007, performing over 200 procedures annually. In June 2011, we celebrated the completion of 1000 total joint replacements.

This booklet was created to help address the many questions and concerns you may have about your upcoming total knee replacement. It includes information on what the surgery involves, how to prepare yourself for the surgery, what to expect in the days following the surgery, how to prepare your home for when you are discharged from the hospital, and tips that will hopefully make this experience as positive and stress-free as possible.

Please read this guide thoroughly and write down any questions you may have on the “My Notes” page at the end of this booklet. Bring this booklet with you on the day of your surgery and for follow-up visits.

If you have any questions about the contents of this booklet, please contact the *physiotherapy department* at Strathroy General Hospital at: 519-246-5901

CONTACT PHONE NUMBERS

Dr. Rajgopal's Office

Office 3rd floor, Suite 332 (519) 245-5775
Fax: 519-245-7806

Dr. Chant's Office

Office 3rd floor, Suite 332 (519) 246-9797

Strathroy Middlesex General Hospital

Main Directory	(519) 245-5295	
Surgical In-patient Unit (Two South)	(519) 245-5295	Ext. 5521
Operating Room	(519) 245-5295	Ext. 5018
Preadmission	(519) 245-5295	Ext. 5550

Physiotherapy / Occupational Therapy Departments

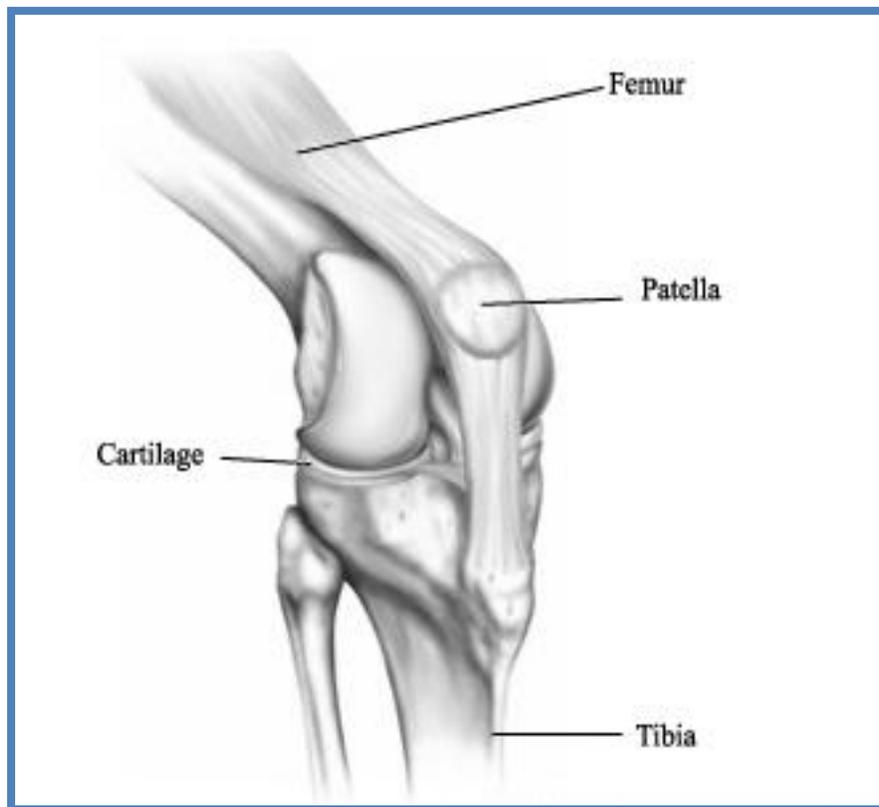
Strathroy Middlesex General Hospital	(519) 246-5901	Fax: 519-246-5928
Four Counties Health Services	(519) 693-6501	Fax: 519-693-1202

CCAC Intake Office (London)

(519) 473-2222

THE HEALTHY KNEE

- The knee joint is the largest joint in the body and is made up of the kneecap (patella), thigh bone (femur) and shin bone (tibia)
 - Articular cartilage is a smooth elastic tissue that covers and cushions the surfaces of these bones and allows them to move smoothly
 - Menisci are “pads” of cartilage found between the femur and tibia that act as shock absorbers to protect bone surfaces
 - Ligaments give support to the knee in all directions
 - The knee moves like a hinge; these movements are generated by powerful leg muscles



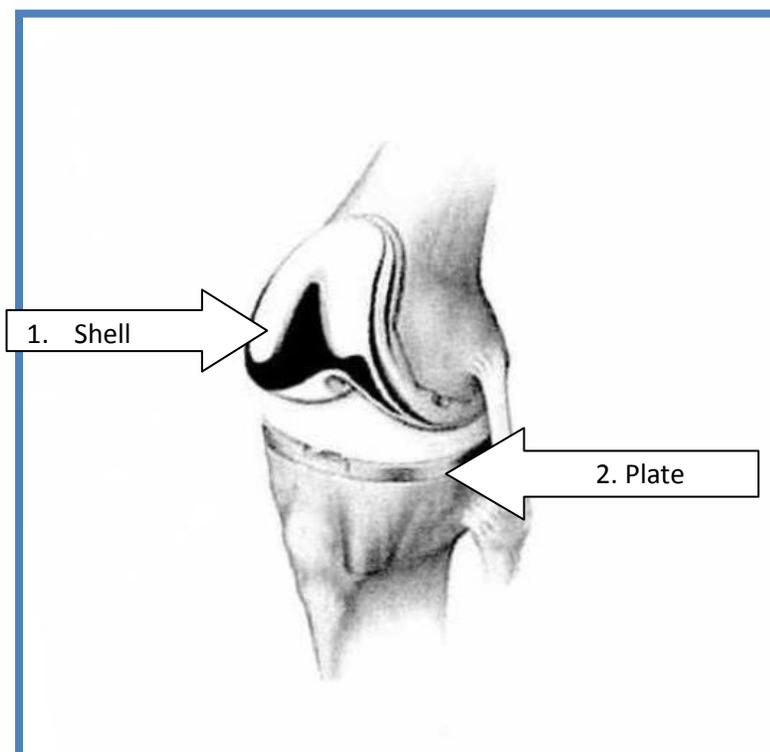
TOTAL KNEE REPLACEMENT

A healthy knee moves without pain because the joint surfaces are covered and protected with cartilage. When the cartilage wears away, the bones rub together causing pain. Bony spurs can form in the knee joint or under the kneecap, which can make weight bearing, walking and even sitting very painful. This damage to the knee structures can be caused by osteoarthritis, rheumatoid arthritis, and previous knee injuries.

When other treatments no longer work and you cannot carry on with normal activities because of pain and limited movement, your doctor may recommend a total knee joint replacement.

There are 3 parts to the artificial knee:

1. The metal shell on the end of the thigh bone (femur)
2. The metal and plastic plate at the top of the shin bone (tibia)
3. The plastic button on the back of the kneecap (not shown on diagram)



BEFORE YOUR SURGERY

Research shows that those who are prepared for their surgery have better outcomes and recovery periods. This section contains important information on what you can do before surgery so that your joint replacement is as successful as possible.

EXERCISE / ACTIVITY

People with a painful knee joint are often afraid to be physically active because they worry it will do more damage to the joint. This is not the case. Research has shown that exercise can help you decrease pain, improve strength, and keep your heart in good condition before surgery. This in turn will help in your recovery after surgery. Refer to the section “Knee Exercises” in this booklet for an example of several exercises to try before your surgery.

Endurance activities are good for your heart, lungs, circulation, and muscles. Activities to increase endurance include walking, stationary bike, and swimming. It is important with any exercise program that you start slowly. Begin with a few minutes each day and gradually progress until you can exercise at least 3 times per week for 20 to 30 minutes. If you have any questions about starting an exercise program, speak with your family doctor or other health care professional.

NUTRITION AND WEIGHT MANAGEMENT

Research has shown that during walking the hips, knees, and ankles bear three to five times a person's total body weight. Because of the way joints work, the pressure in your knee joints is more than your body weight when you walk. For every pound a person is overweight, 3-5 lbs pounds of extra weight is added to each knee during walking. Even a small weight loss can make a big difference to your joints. If you are overweight and have arthritis in any of your weight-bearing joints, losing weight will help you more than any food supplements. For example, a 10 – 15 lb weight loss results in 30 to 50 lbs of extra stress to be relieved from the joints and increase your ability to do daily activities by almost 30%. Talk to your family doctor or registered dietician about an appropriate weight loss program if needed. For more information about healthy eating visit **Canada's Food Guide** at www.healthcanada.gc.ca/foodguide or **The Arthritis Society's Nutrition Guidelines** at www.arthritis.ca.

EDUCATION & PRE-HAB EXERCISE CLASSES

We are pleased to offer two types of classes to prepare you for your upcoming surgery:

1. Education Class
2. Exercise Class

Each class will be held in the physiotherapy gym at Strathroy General Hospital. The classes are not mandatory, but are highly recommended by your surgeon and health care team in order to make the most of your knee replacement. See below for more information on each class.

Education Class

These sessions consist of a presentation from a registered dietician and physiotherapy team member. The dietician will discuss and answer any questions you may have regarding nutrition and weight management strategies before and after your surgery. In addition, a physiotherapy team member will go over specific equipment and home needs that you will need to get prepared prior to surgery. This is a great opportunity to ask any questions you may have leading up to your surgery. It is recommended that you bring a family member or friend (preferably the person who will be helping you after the surgery) to this class.

Exercise Class

This class is taught by a physiotherapy team member and will involve group exercises in a circuit style aimed to prepare the individual for their surgery. Studies have shown exercise prior to surgery can help decrease pain and improve function. The goal of the exercise class will be to teach you how to perform these exercises safely so that you can continue a home-based program while you are awaiting surgery.

You will need to ***call ahead to pre-register for either class***, so please let us know which class it is you are planning on attending (one or both) and to confirm the dates that the classes will be held. Openings for the exercise class are limited due to space constraints so please book early!

TO BOOK, PLEASE CALL OR DROP INTO
THE STRATHROY PHYSIOTHERAPY DEPARTMENT at (519) 246-5901

Education Class: one Monday monthly, 1pm-2pm

Exercise Class: every Monday and Thursday, 2pm-3pm

ASSISTIVE EQUIPMENT

The following is a list of equipment that may assist you in your everyday activities following surgery. You will need to get these devices before your admission to the hospital and it is recommended you practice using these devices before your surgery. All of the equipment can be either rented or purchased within the community. For a list of vendors in your community, please see the list attached at the back of the booklet or visit www.jointreplacement.thehealthline.ca and click on “Medical Equipment and Supplies”

<p>Gait Aids</p>	<p><input type="checkbox"/> Standard Walker (Mandatory) Will assist with your walking. It should NOT have wheels</p> <p><input type="checkbox"/> Cane and/or Crutches (Mandatory) Will assist you on the stairs and with your walking later on in your recovery</p> <p><input type="checkbox"/> Handrails These should be installed along stairs at home for safety</p>
<p>Bathroom Equipment</p>	<p><input type="checkbox"/> Raised Toilet Seat with Arms Clamp-on or molded plastic styles for regular or oval toilet bowls</p> <p><input type="checkbox"/> Grab Bars Can be mounted into a studded bathroom wall or clamped to the side of the tub</p> <p><input type="checkbox"/> Bathtub Transfer Bench Useful for getting into and out of the tub. You will not be able to bathe until your staples have been removed (usually 2 weeks after your surgery) or until instructed by your surgeon</p> <p><input type="checkbox"/> Hand Held Shower For use with the tub bench</p>
<p>Dressing Devices</p>	<p><input type="checkbox"/> Sock Aid To help put on socks or hosiery</p> <p><input type="checkbox"/> Long-Handled Reacher To help reach objects on the floor, overhead, or for dressing</p> <p><input type="checkbox"/> Long-Handled Shoehorn Useful to put on shoes or take off socks</p>

ASSISTIVE EQUIPMENT

Standard Walker - MANDATORY



Raised Toilet Seat with Arms



Bathtub Transfer Bench



Long-Handled Shoehorn



Sock Aid



Reacher



PREPARE YOUR HOME

- If there are a lot of stairs to go up to your bedroom, consider moving your bed to the main floor temporarily. Look into borrowing or renting a bed if necessary.
- If you don't already have them, install handrails on at least one side of each stairway, including any stairs outside the house. Consider installing a temporary ramp to access the house if needed.
- Remove scatter rugs and loose electrical cords as they may cause you to fall.
- Place things that you use often where you can easily reach them such as a telephone or lamp by your bed
- Place a rubber mat in your tub and/or shower.
- Make sure there is a clear, well-lit path from your bedroom to the bathroom.
- Install a sturdy grab bar in your bathroom. DO NOT use a towel rack as a grab bar; these are not safe.
- Arrange for someone to come in and help with household chores upon your return home. You will not be able to do tasks that require heavy lifting or bending, such as vacuuming, washing floors, laundry, and washing the tub.
- It is important that you have a good supply of nutritious foods at home.
 - You will not be able to prepare meals in your kitchen for several weeks after surgery therefore it is recommended that you stock your freezer with healthy foods and pre-cooked meals
 - Arrange for family or friends to do your grocery shopping
 - If it is available in your area, you can have meals delivered to your house via *Meals-on-Wheels*. Contact your nearest Community Care Access Centre (CCAC) for details

HOME SUPPORT

It is important that you have a spouse, family member, friend, or neighbour to stay with you at home when you leave the hospital.

If you live alone, you have several options:

- Arrange to stay with a family member or friend or have them stay with you. Consider going to the house/apartment that requires the least amount of stairs.
- Arrange for a convalescence / respite bed at a retirement or nursing home for a few weeks (two to four weeks is recommended) while you recover. For a list of available beds nearest you, please contact the Community Care Access Centre (CCAC) intake office at **519-473-2222**. These beds will need to be arranged prior to your surgery (based on availability) and will cost a fee. Please book these beds starting **two days** after your surgery date.

COMMUNITY CARE ACCESS CENTRE (CCAC)

CCAC is responsible for home support services. You may have a visit from one of their therapists before your surgery to go over safety within your house, equipment, etc.

You will be set-up with in-home physiotherapy for a few weeks after your surgery. Nursing support for dressing changes will be set-up only if needed. Most people will be responsible for their own dressing supplies and changes (see “Care of your Incision” section for more information). CCAC typically DO NOT supply personal support workers for everyday needs, therefore it is important for you to arrange for help at home as stated above.

If you have any questions about CCAC services before or after your surgery, please contact the intake office at **519-473-2222**.

PRE-ADMISSION CLINIC

An appointment will be made for you three to four weeks prior to your scheduled surgery date for you to come into the hospital to assess your overall health and provide information about your surgery. This visit will take several hours.

- Bring a family member or friend with you if you have difficulty getting around or if English is not your first language
- Bring your usual medications and any over the counter / herbal supplements in their **original containers**, along with a **prescription list** from your pharmacy
- Bring your **completed Pre-anaesthesia Questionnaire** and **History and Physical Assessment** by your family doctor and/or any current reports from any specialist you may be seeing such as an internist, sleep apnea clinic, cardiologist, or hematologist
- Bring reading glasses
- Bring this guide booklet with you with a list of questions you may have about your upcoming surgery

During this visit, you will meet with a team of health professionals:

- ✓ A **nurse** will review your health and discuss what to expect during your hospital stay and ways to prepare for your discharge home
- ✓ An **anesthesiologist** will discuss anesthetic options and pain management
- ✓ A **laboratory technician** will take your blood and do an electrocardiogram (ECG) of your heart
- ✓ A **medical radiation technologist** will perform x-rays of your knee and/or chest

Note: You will be required to provide a urine sample during your visit. Please remember to ask the desk clerk in Ambulatory Care to provide you with a collection container before using the bathroom.

YOUR HOSPITAL STAY

DAY OF SURGERY:

DO NOT:

- ✗ **Shave below the waist for 48 hours prior to your surgery or your surgery will be cancelled.**
- ✗ **Eat or drink after midnight the night before your surgery except a sip of water with morning medications.**

DO:

- ✓ **Plan to arrive at patient registration **two hours before surgery** to ensure your arrival to Same Day Care (SDC) on time.**
- ✓ **Expect to be in hospital for **two nights**. You need to arrange for a ride home **two days** after your surgery as you may be discharged home at this time. For example, if your surgery is on a Monday, plan to have a ride home on Wednesday. **Discharge time before 11:00am.****
- ✓ **Bring the following items with you (please label all items):**

- Current medications and over the counter supplements in their original containers
- Standard walker (no wheels) and cane or crutches to assist with walking
- Supportive shoes with rubber soles or grips
- Slippers with a back and non-slip sole
- A light weight robe
- A small overnight bag with clothes and personal care items
- Assistive devices (i.e. reacher, long-handed shoe horn, leg lifter etc.)
- This guide booklet

YOUR RECOVERY IN HOSPITAL

<p>Tests and Treatment</p>	<p>You will have:</p> <ul style="list-style-type: none"> • An intravenous (IV) continued • Vital signs checked at regular intervals • Dressing checked and changed daily or as needed • Blood tests • Icing and/or wrapping of the knee regularly
<p>Medications</p>	<p>You may have medication for:</p> <ul style="list-style-type: none"> • Pain control • Nausea • Anti-Blood Clotting • Antibiotics • Your usual Medications <p>Pain following surgery is normal. Please inform your nurse if you are experiencing pain or nausea.</p>
<p>Nutrition</p>	<ul style="list-style-type: none"> • You will be offered a regular diet as your nausea level permits • Maintain regular sips of fluids after surgery to stay hydrated
<p>Consults</p>	<ul style="list-style-type: none"> • Physiotherapy • An anesthesiologist may follow you for pain control
<p>Education</p>	<ul style="list-style-type: none"> • Review post-op precautions & care, activity, and exercises • Review pain management and wound care • Review follow-up appointments and care of your knee at home • Review medications
<p>Discharge Planning</p>	<ul style="list-style-type: none"> • Discharge is two days after surgery before 11:00am. • Follow-up phone calls • Discuss post-op clinic check-ups, home care physiotherapy, medications and prescriptions, etc.

THERAPY FOLLOWING SURGERY

<p style="text-align: center;">Day 0 (day of surgery)</p>	<p>Your nurse may help with:</p> <ul style="list-style-type: none"> • Sit-up/stand at bedside • Transfer to commode or bathroom • Deep breathing and coughing exercises
<p style="text-align: center;">Day 1 (first day after)</p>	<p>A physiotherapist will review:</p> <ul style="list-style-type: none"> • How much weight you may put on your leg • How to protect your knee when moving • How to move safely in bed and get in/out of bed • How to transfer safely into a chair • Exercises and stretches • How to walk correctly using a walker • Use of ice and/or wrapping <p>You will:</p> <ul style="list-style-type: none"> • Participate with physiotherapy two times per day • Do range of motion and strengthening exercises • Walk short distances using a walker • Sit in a chair
<p style="text-align: center;">Day 2</p>	<p>You will:</p> <ul style="list-style-type: none"> • Continue with your exercises and walking with your therapist • Practice climbing stairs with a cane or crutches • Walk to/from bathroom independently • Continue icing/wrapping your knee • Be discharged home from the hospital with follow-up physiotherapy visits through CCAC

AFTER YOUR KNEE REPLACEMENT

ACTIVITY / THERAPY

- Upon discharge home, you will have four to six visits from a home care physiotherapist over a span of two to three weeks. After completion of therapy at home, it is your responsibility to arrange for additional physiotherapy appointments at an out-patient clinic in your area. These out-patient appointments may or may not cost a fee, depending on where you live. Most insurance benefit plans will cover out-patient physiotherapy.
- At the Middlesex Health Alliance, we are able to offer a free, supervised post-surgery hip and knee exercise program, held at Four Counties Hospital in Newbury. Please see the attached flyer at the end of the booklet for more information and how to access.
- It is important to keep active after knee replacement surgery to keep you strong and moving well. Go for several short walks daily, with rest breaks in between
- Many people are afraid to bend their knee after surgery, believing this could be harmful, especially since bending the knee is painful at first. But while certain movements should be avoided, you are encouraged to start bending your knee right away. Do it gently at first, but keep doing it!
- Use your walker or crutches until instructed otherwise by your physiotherapist
- Continue the exercises 2-3 times per day as taught by the physiotherapist. The home care physiotherapist will not come to the house everyday so it is your responsibility to do your exercises regularly, especially knee bending and straightening as much as possible
- Avoid becoming overly tired or over-working your knee. Gradually increase your activity (e.g. walking, household chores, etc.) as pain tolerates
- Ask your surgeon or physiotherapist when you are ready to use an exercise bike (typically 4-6 weeks after surgery)
- Avoid jogging, jumping, lifting heavy weights, twisting, or any other activity that places excessive stress on your new knee
- Place an ice pack (frozen peas or corn work well) around your knee for 15 minutes several times daily to help reduce swelling and pain

REST

- Sit in a chair or lie down after walking exercise. Do not let your legs hang down for longer than 1 hour to limit swelling – elevate your leg with a stool if needed
- Do NOT rest your operated knee over a pillow. This can cause stiffness in both your knee and hip, making it harder to straighten your leg
- Don't overdo it at the start. Slowly increase your walking distance to find your limits
- It usually takes a few weeks to regain your energy

PAIN & SWELLING CONTROL

Pain & swelling following surgery is normal and will continue over the next few weeks to months. It should gradually improve over 6 weeks after surgery. Each person feels pain differently and therefore what is moderately or very painful to some may be mildly painful to others.

Pain & swelling can be relieved by:

- Place an ice pack (frozen peas or corn work well) around your knee for 15 minutes several times daily to help reduce swelling and pain. Make sure to ice especially after exercises.
- Elevating your leg above your heart level to help relieve swelling & pressure. Do not let your legs dangle for greater than 1 hour.
- Balancing rest and activity
- Take pain medication as ordered. Remember, if you are in too much pain, you will not be able to do your exercises. It is a good idea to take your pain medication half an hour before your exercises. You will gradually wean off your medication as your pain improves.

DRIVING

Doctors recommend that you do not drive a car for at least 6 weeks after your surgery. It is therefore important that you arrange for transportation ahead of time for discharge home and to any follow-up medical or physiotherapy appointments.

Before getting into the car

- ✓ Have the driver park away from the curb
- ✓ Have someone move the seat as far back as it will go
- ✓ If you have cloth fabric seats, place a garbage bag on the seat to help you slide into the car

Sitting down

1. Stand with your back to the car
2. Hold onto the side of the car and the walker or dashboard
3. Lower yourself slowly onto the seat, keeping your operated leg forward: watch your head
4. Slide well back in the seat
5. Lift your legs one at a time into the car

Getting out

Have someone open the door, follow the above steps backwards.



FOLLOW-UP:

- You will have several follow-up appointments to see your surgeon at two weeks, six weeks, three months, and one year after surgery. It is very important you keep these appointments, or call to arrange another date
- Ask your surgeon when you can return to work or resume driving.

Notify your surgeon if you experience any of the following (if your surgeon is not available, inform your family doctor):

- **SUDDEN** increase in swelling, pain, or redness in your calf/calves
- **SUDDEN**, severe increase in pain in your new joint
- A foul odour, pus, or yellow or green drainage at your incision site
- Excessive bleeding
- Any other signs or symptoms of infection (i.e. bladder infection, tooth infection, etc.)
- A persistent increase in temperature (over 38°C)

BLOOD CLOTS

There is a risk of developing a blood clot after knee replacement surgery due to decreased mobility, the surgery itself, medications, etc. Deep vein thrombosis (DVT) is a type of blood clot that mostly occurs in legs. It is important to know the symptoms of a blood clot as they can lead to some very serious complications such as a pulmonary embolism (when a blood clot breaks away and travels to the lung and become lodged). Not all patients who develop a DVT will feel symptoms but if you do suspect a blood clot, go to the nearest emergency department immediately. **The best way to prevent blood clots is to keep active after surgery!**

Symptoms of a blood clot include:

- Tenderness or pain in calf muscle or behind knee
- Redness
- Sharp, shooting pain when the foot is bent up
- Warm sensation
- Dull, aching throb in the calves, especially with walking
- Widening of the surface veins

CARE OF YOUR INCISION

You may leave the hospital with a special type of bandage over your incision called Mepiplex. This bandage is to be kept overtop of your incision for two weeks after your operation. Don't worry if your bandage falls off or if it becomes unusable – you can replace the bandage with a gauze dressing and paper tape that can be found at most pharmacies. The Mepiplex can be left on while showering but do not soak the dressing. If you have a gauze dressing, you can change the gauze daily or every few days. Remove the gauze before showering (if you have glue) and reapply with a dry, clean gauze. Inspect your incision daily for any redness or drainage. **Call your surgeon if drainage continues for more than four days after you leave the hospital.**

➡ If you have your incision closed by GLUE:

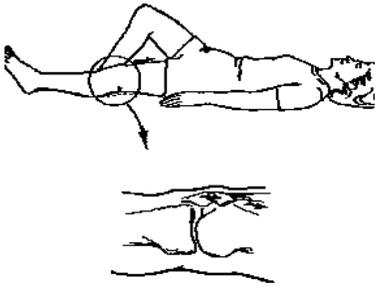
- It is a thin adhesive film that holds your incision together. The glue will remain in place usually five to ten days, enough time for your incision to heal. Then, it will naturally slough (fall) off your skin.
- Do not scratch, rub, or pick at the glue. This may result in the incision re-opening before your incision has fully healed.
- Do not apply any creams or lotions to the incision unless given permission by the surgeon.
- If you have a protective bandage covering the incision, make sure the tape of the bandage is not placed directly over the glue.
- You may occasionally and briefly wet your incision in the shower or bath. But frequent or prolonged contact with water should be avoided. Do not soak the incision (e.g. in bathtub, hot tub, pool, etc). When showering, let the water run down over the incision but do not rub or scrub with soap. After showering, gently blot your incision dry with a soft towel. If a protective dressing is being used, apply a fresh, dry bandage.

➡ If you have your incision closed by STAPLES:

- You will have a follow-up appointment with the surgeon to have your staples removed (usually around 2 weeks after your surgery)
- Do not shower or get your incision wet until the staples have been removed and your incision is healed or instructed by your surgeon
- Do not apply any creams or lotions to the incision unless given permission by the surgeon

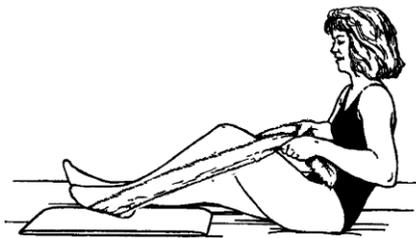
KNEE EXERCISES

These exercises can be performed *before* your surgery to keep your muscles strong and to help with pain. A therapist will review these exercises with you after your surgery while in the hospital.



** This exercise helps to strengthen your thigh muscle and straighten your knee*

1. Lie on your back with operated leg straight.
2. Tighten your thigh and buttock muscles, pushing the back of your knee down into the bed.
3. Hold 5 seconds, repeat 10 times, 3 times per day



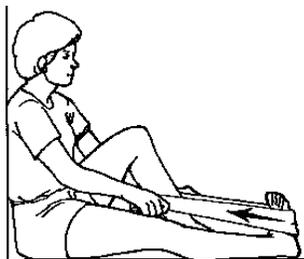
** This exercise improves range of motion of your knee*

1. Lie on your back or sit with legs straight.
2. Bend operated leg at hip and knee, sliding your heel toward buttock (you may use your strap to help)
3. Hold 5 seconds, repeat 10 times, 3 times per day



** This exercise helps strengthen your thigh muscle*

1. Lie on your back with a can or roll under knee
2. Raise your heel off the bed until your leg is straight
3. Hold 5 seconds then slowly lower; Repeat 10 times, 3 times per day.



** This exercise stretches your calf muscle*

1. Lie on your back or in sitting with leg straight out
2. Place strap around your toes and pull them up toward your hips until you feel a comfortable stretch in the back of your leg
3. Hold for 15-30 seconds, repeat 5 times, 3 times per day

Note: Place an ice or a cold pack around the operated knee before and/or after your exercises for 20 minutes to help reduce swelling & pain

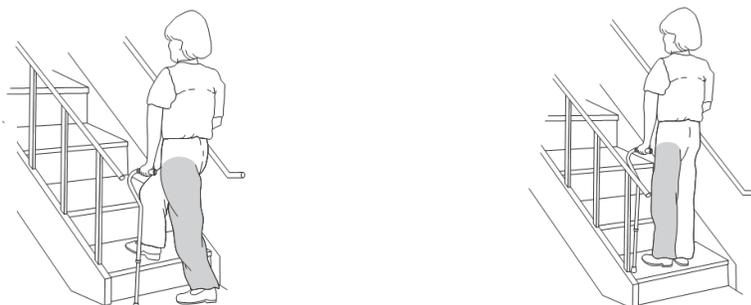
STAIRS

* When you are first home, have someone with you when you do the stairs – that person should be close behind you on the way up and should be one step below you on the way down.

Going UP stairs using a handrail – The GOOD leg steps up first

1. Stand close to the step and hold onto the handrail with one hand, the cane in the other hand.
2. Put your weight through the handrail and on the cane.
3. Step up with the good leg.
4. Straighten the good leg and step up with the operated leg, and then bring up the cane.

* Shaded leg is the operated leg

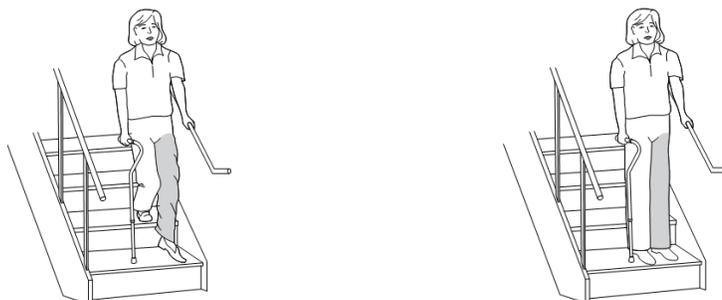


1. Step up with the good leg.
2. Cane and operated leg step up together.

Going DOWN stairs using a handrail –the OPERATED LEG steps down first

1. Stand close to the edge of the step and hold onto the handrail with one hand, the cane in the other.
2. Bring the cane down to the lower step followed by the operated leg.
3. Put your weight through the handrail and on the cane.
4. Step down with the good leg.

* Shaded leg is the operated leg



1. Cane down first, followed by operated leg.
2. Step down with the good leg.

OTHER RESOURCES

The Health Line - This website provides resources that will help prepare you for what to expect before, during and after joint replacement surgery, including access to patient guides and community resources within the South West Local Health Integration Network (LHIN) region of Ontario

www.jointreplacement.thehealthline.ca

Middlesex Health Alliance Patient Education Guides - Collection of health information developed by the Middlesex Hospital Alliance for patients that include topics such as how to use crutches, energy conservation strategies, and installing ramps.

http://www.mhalliance.on.ca/MHA_Health_Info_Online_Library

Canadian Orthopaedic Foundation www.canorth.org

The Arthritis Society www.arthritis.ca

The Bone and Joint Network www.boneandjointhealthnetwork.ca



New Hip or Knee?

MHA Post-Operative Joint Exercise Program

Have you recently undergone a hip or knee replacement or a knee arthroscopy?

The MHA is pleased to offer you an extended supervised exercise program under the guidance of a Kinesiologist. This circuit-style exercise program will be held at Four Counties Health Services and will focus on joint strength as well as flexibility.

If you have recently had a recent hip or knee replacement, or a recent knee arthroscopy, please contact your surgeon, physiotherapist or family physician about getting involved with this free program.

Thursday Afternoon 1:00pm – 2:00pm

Four Counties Health Services – 1824 Concession Dr, Newbury ON

Please contact the Four Counties or Strathroy physiotherapy department to register

SMGH - (519) 246-5901
FCHS - (519) 693 – 4441 ext. 2441

VENDOR LIST

STRATHROY			
Bossons Pharmacy	35 Front Street West, Strathroy ON, N7G 1X5	(519) 245-3810	Rent/Buy
Resolution Rehab	Kenwick Mall 51 Front Street East, Strathroy ON, N7G 4L6	(519) 245-8100	Rent/Buy
Strathroy Royal Canadian Legion	266 Metcalfe Street West, Strathroy ON, N7G 1N3	(519) 245-0683	Loan
LONDON			
Canadian Red Cross London/Middlesex Branch	810 Commissioners Road East, London ON, N6C 2V5	(519) 681-7330	Rent/ Loan
London Consistory Club	243 Wellington Road South, London ON, N6A 4V3	(519) 685-5972	Loan
Medichair- Roberts Medical	390 Springbank Drive, London ON, N6J 1G9	(519) 657-1032	Rent/Buy
Medigas London	1910 Oxford Street East, London ON, N5V 2Z8	(519) 451-7932 Fax: 519-451-7933	Rent/Buy
Motion Specialties	139 Adelaide Street South, London ON, N5Z 3K7	(519) 685-0400	Rent/Buy
Royal Canadian Legion	1276 Commissioners Road West, London ON, N6K 1E1	(519) 472-3300	Loan
Shoppers Home Health Care	301 Oxford Street West, London ON, N6H 1S6	(519) 434-3326	Rent/Buy
Shoppers Home Health Care	641 Commissioners Road East, London ON, N5Z 3J1	(519) 685-9153	Rent/Buy
ST. THOMAS			
Canadian Red Cross St. Thomas Elgin Branch	141 Wellington Street, St. Thomas ON, N5R 2R8	(519) 631-1611	Rent
Independent Order of Off Fellows/ Rebekah Lodge- Humanitarian Services Committee	54 Moore Street, St. Thomas ON, N5R 3W3	(519) 631-3330	Rent/Buy
Jewel International/ Action Medical St. Thomas	310 Wellington Street St. Thomas ON, N5R 2T1	(519) 633-9955	Rent/Buy
Yurek's Pharmacy	519 Talbot Street, St. Thomas ON, N5P 1C3	(519) 631-3764 or 1-866-631-3330	Rent/Buy

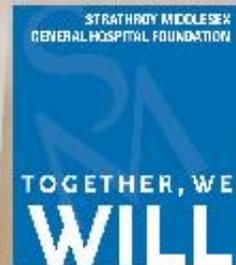
VENDOR LIST

NEWBURY			
Newbury Legion	22 Durham Street, Newbury, ON N0L 1Z0	(519) 693-4251	Loan
PARKHILL			
Red Cross	185 King Street, Parkhill, ON N0M 2K0	(519)294-0442	Loan
FOREST			
Royal Canadian Legion	58 Albert Street, Forest, ON N0N 1J0	(519)786-5357	Loan
MOUNT BRYDGES			
Lions Club	116 Lions Park Drive, Mount Brydges, ON N0L 1W0	(519) 264-1348 Contact: Frank Kovacs	Loan
ALYMER			
Hills Pharmacy	35 Talbot Street East, Aylmer ON, N5H 1H3	(519) 765-1271 Fax: 519-765-3607	Buy
BRIGHTS GROVE			
Shoppers Drug Mart	2600 Lakeshore Road, Brights Grove, ON	(519) 869-4224	Rent/Buy
SARNIA			
Medical Motion	1362 Lampton Mall Road, Unit 9, Sarnia ON, N7S 5A1	(519) 383-9900 Fax: 519-383-1031	Rent/Buy
Shoppers Home Health Care	49 Finch Drive, Sarnia ON, N7S 5P5	(519) 336-9334	Rent/Buy
Shoppers Home Health Care	516 Exmouth Street, Sarnia ON, N7T 8B1	(519) 344-9797	Rent/Buy
TILLSONBURG			
Coward Pharmachoice	165 Broadway, Tillsonburg ON, N4G 3P9	(519) 842-4081 Fax: 519-842-8013	Buy
Grand Medical Supplies	8 Washington Grand Avenue, Tillsonburg ON, N4G 3V2	(519) 842- 8949	Rent/Buy
CHATHAM			
Shoppers Home Health Care	300 Lacroix Street Unit #1, Chatham ON, N7M 1W3	(519) 354-6555	Rent/Buy
Shoppers Home Health Care	10 Grand Avenue West, Chatham ON, N7L 1B4	(519) 351-7272	Rent/Buy
Motion Specialties	785 St. Clair Street, Chatham, ON N7M 5J7	(519) 358-7096 or (866) 914-0484	Rent/Buy
GLENCOE			
Glencoe Pharmacy	253 Main Street, Glencoe, ON, N0L 1M0	(519) 287-2731	Buy
WEST LORNE			
West Elgin Pharmacy	229 Graham Road, West Lorne ON, N0L 2P0	(519)768-1440 Fax: 519-768-1449	Buy

MIDDLESEX HOSPITAL ALLIANCE FOUNDATION

CAROL HOWARTH

"I can't say enough about the experience at Strathroy. It's a very special place. I've been in hospitals before, but none are quite like SMGH."



"I injured my knee in high school and had problems with it on and off as an adult. By the time I turned 60, however, the knee was much worse. I was in constant pain. Everyday things like climbing stairs or going grocery shopping were agonizing.

"I went to see Dr. Rajgopal, a new orthopaedic surgeon at Strathroy Middlesex General Hospital, who recommended a knee replacement. Within a month, I had the surgery and walked out of the hospital three days later, pain free.

"I feel so fortunate that we have such an excellent hospital with outstanding physicians right nearby."

TO DONATE: Strathroy Middlesex General Hospital Foundation 395 Carrie St. Strathroy, ON N7G 3J4
519-246-5906 www.smghfoundation.com

