How Joint Camp Impact the Surgical Outcomes for Joint Replacement Patients in UMC



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BACKGROUND

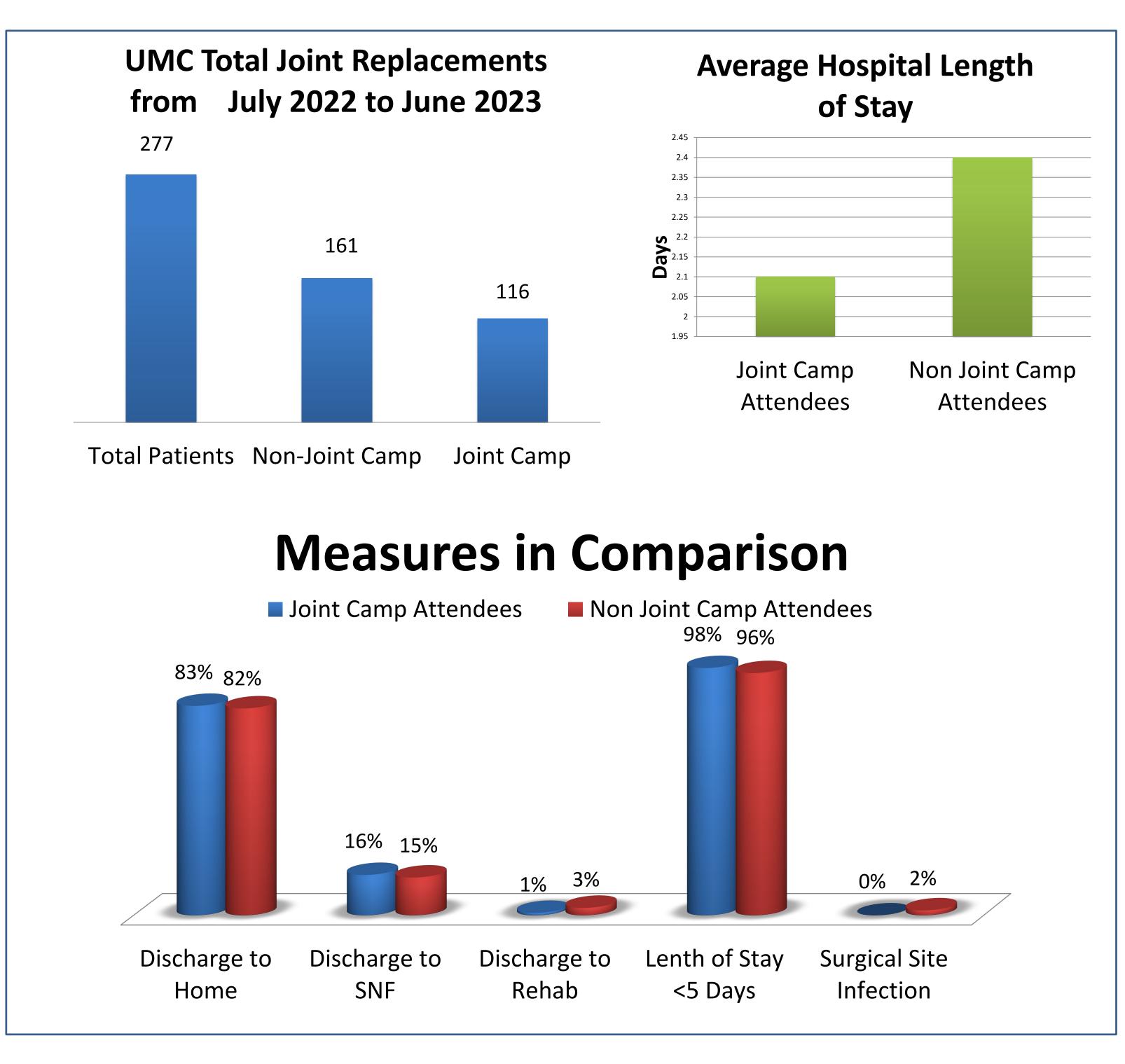
UMC's joint program offers a Joint Camp (pre-surgery class) to all the patients who come to UMC for joint replacement surgeries. The class is designed to prepare the patients physically and mentally for the surgery and a safe and comfortable recovery. The patient is guided through the whole process of preparing their home environment from the day of class, to the day of discharge from the hospital. UMC offers a Tranquility Program to help patients manage their pain in addition to the use analgesics during their recovery. In the class, patients are introduced to the interdisciplinary team such as Physical/Occupational Therapist, Tranquility Nurse, Case Manager, Perioperative Nurse, & Nurse Navigator. This interaction with the staff helps to give patients the comfort of open communication and plan their care during their hospital stay.

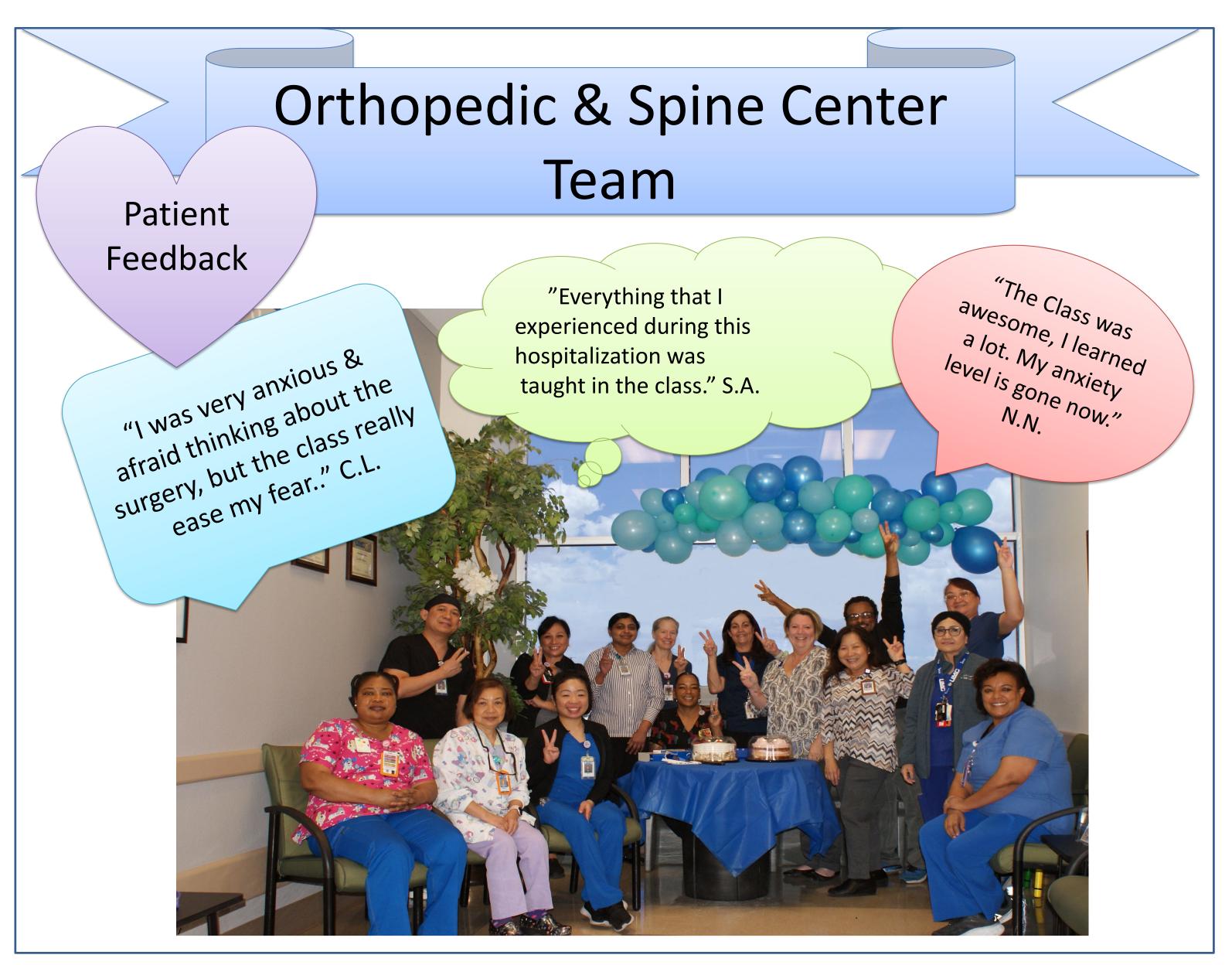
PURPOSE

The Orthopedic and Spine Center Unit base Council is testing if the Joint Camp has an impact on the surgical outcomes of Total Hip & Total Knee Replacements in areas such as hospital Length of Stay, Disposition or Discharge, and Surgical Site Infections.

METHODS

A one year data collection and comparison of data of Total Joint replacements at UMC through Epic, comparing length of stay, disposition/discharge, and occurrence of surgical site infections between the joint patients who attended and did not attend the Joint Camp Class. The data was collected from July 2022 to June 2023 at the Orthopedic & Spine Center, UMC.





RESULTS

With a total of 277 Total Joint replacement surgeries done at UMC from July 2022 to June 2023, only 116 patients (42%) attended the Joint Camp. With this group of patients who attended the Joint camp, the average Length of Stay is 2.1 days. That is 0.34 days less than those patients not attended the class. The disposition of patients discharged to home in the Joint Camp group was 83% where as the non Joint Camp group was 82%. The Length of Stay that is 5 days or less was 98% for the Joint Camp attendees, and 96% for the non-attendees. The Surgical Site Infection during the study period was 2% and those patients did not attend the joint camp.

CONCLUSIONS

This performance improvement project demonstrated that having the Joint Camp class is very beneficial for the patients undergoing joint replacement surgeries. The patients who attended joint camp class had reduced Length of Stay, and increased Discharged to Home instead of Discharged to Rehab/SNF, and reduced incidence of Surgical Site Infections compared to those who did not attend the Joint camp .

REFERENCES

Jones, Eric D.; Davidson, Lynda J.; Cline, Thomas W.. The Effect of Preoperative Education Prior to Hip or Knee Arthroplasty on Immediate Postoperative Outcomes. Orthopaedic Nursing 41(1):p 4-12, January/February 2022. | DOI: 10.1097/NOR.0000000000000814

Giardina, Julie L.; Embrey, Katrina; Morris, Kathy; Taggart, Helen M.. The Impact of Preoperative Education on Patients Undergoing Elective Total Hip and Knee Arthroplasty: The Relationship Between Patient Education and Psychosocial Factors. Orthopaedic Nursing 39(4):p 218-224, July/August 2020. | DOI: 10.1097/NOR.0000000000000674

Prouty, Anne; Cooper, Maureen; Thomas, Patricia; Christensen, Judy; Strong, Cheryl; Bowie, Lori; Oermann, Marilyn H.. Multidisciplinary Patient Education for Total Joint Replacement Surgery Patients. Orthopaedic Nursing 25(4):p 257-261, July 2006.

Moyer, R., Ikert, K., Long, K., & Marsh, J. (2017, December). The Value of Preoperative Exercise and Education for Patients Undergoing Total Hip and Knee Arthroplasty. *JBJS Reviews*, *5*(12), e2–e2. https://doi.org/10.2106/jbjs.rvw.17.000150

Edwards, P. K., Mears, S. C., & Lowry Barnes, C. (2017). Preoperative Education for Hip and Knee Replacement: Never Stop Learning. *Current reviews in musculoskeletal*

PATHWAY

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medicine, 10(3), 356–364. https://doi.org/10.1007/s12178-017-9417-4