**Total Joint Q & A**

**Q:** When should I have a total joint replacement?

**A:** This is a very individual decision. Basically, when you are tired of pain, stiffness and disability and are willing to undergo surgery to alleviate these symptoms. There is no "right" or "best" time.

**Q:** What is the implant made of?

**A:** Usually a combination of titanium or cobalt-chrome and high-density polyethylene (plastic).

**Q:** Will my insurance cover the surgery?

**A:** Almost all policies cover total joint replacement subject to individual deductibles and copays.

**Q:** How long is the hospital stay?

**A:** Usually two to three days or until the patient is safe to perform his/her activities at home.

**Q:** What will rehab be like?

**A:** Physical therapy starts the day after your surgery and continues daily in the hospital. Most patients then go home with home health therapy, and within three to four weeks are walking, climbing stairs, etc., better than they did preoperatively.

**Q:** How successful is joint replacement surgery?

**A:** Over half a million total joint replacements are done in the U.S. each year. Most recipients experience reduced pain, increased mobility and improved quality of life. Some studies indicate over 95 percent are happy with their prosthesis. Factors that make a difference in your outcome include health before surgery, following the surgeon’s instructions before and after surgery, your weight, activity level, and participation in physical therapy and moderate exercise after surgery.

**Policies and Procedures**

- For EMERGENCIES, call 911 or go to the nearest hospital emergency room.
- Contact your pharmacy directly for all refills and renewals of medications. Allow 72 hours for processing. Only first-time prescriptions and narcotic refills are generated from our office.
- All test and laboratory results are communicated back to the patient as promptly as possible.
- When leaving a message, please spell your name and provide date of birth, phone number, and a detailed request, including level of urgency. After hours, if you have an urgent healthcare need, please contact the HRRMC Emergency Department at (719) 530-2157.
- If you are unable to keep an appointment, please give 24 hours notice of cancellation.

**Payment**

- Payment/copay is due at time of service.
- There will be a fee for your visit. Other services, including lab tests, will be billed in addition.
- You may request an estimate of charges at time of service.
- Medicare patients of the HRRMC Medical Clinics will receive two explanations of benefits—one for the physician and one for the facility. Medicare patients are charged the same amount as non-Medicare patients, but the bill is broken down differently for Medicare reimbursement.
- A 15% prompt-payment discount is available to self-pay and uninsured patients.
- We accept cash, check, Visa, MasterCard and Discover.
- Claims with most insurance plans are filed on your behalf.
- Structured payment plans are available.
- Billing questions may be directed to account representatives by calling (719) 530-2009.
Welcome
Welcome to the HRRMC Joint Replacement Center. If hip or knee pain is keeping you from doing what you love to do, we want to help. We discuss your condition, the pros and cons of your treatment options, then decide together which option fits best with your goals and lifestyle.

Profile
E. Andrew Jonassen, M.D., is director of the HRRMC Orthopedic Joint Replacement Center. His practice complements Dr. Robert Hunter’s sports medicine practice in the HRRMC Orthopedic Center of Excellence.

Before joining HRRMC’s medical staff in 2012, Dr. Jonassen practiced in metro Denver for more than 20 years. He was medical director of orthopedic trauma at The Medical Center of Aurora, a Level II Trauma Center, and also affiliated with Rose Medical Center, Sky Ridge Medical Center and Swedish Medical Center.

Dr. Jonassen specializes in joint replacement and trauma surgery including:
• Anterior minimally invasive hip replacement surgery
• Total knee replacement
• Complex fractures
• Limb reconstruction

If you are a candidate for joint replacement surgery, there are several important FACTORS TO CONSIDER.

Design of the implant system
Different companies design and manufacture joint replacement systems and the instruments used to implant them. Some implants are designed to address special considerations such as weak or damaged muscles and ligaments, excessively damaged bone or abnormal bone formation. Surgeons choose an implant system that they feel will give you the most satisfactory results.

Performance after surgery
Many factors determine how well your joint replacement will perform after surgery, including your health before surgery, following your surgeon’s instructions pre- and post-surgery, your weight and activity level, and your participation in physical therapy and moderate exercise after surgery. Always follow your surgeon’s recommendations regarding these factors.

Activity and the health of your bones
When you walk and your foot hits the ground, the bones in your legs help absorb the stress of the impact. This is a natural process that helps keep your bones healthy and strong. If you stop using your legs, your bones begin to thin out and your muscles become very weak. Think of it as “use it or lose it.” Therefore, it is important to maintain an active lifestyle, especially after total joint replacement.

Board certification:
American Board of Orthopaedic Surgery
Medical Degree:
University of Calgary, Calgary, Alberta, Canada
Residency:
University of Calgary, Calgary, Alberta, Canada
Fellowship:
Adult Reconstruction/Arthritis, University of Colorado Health Sciences Center, Denver
Orthopaedic Traumatology, University of Washington, Seattle

Total Knee Replacement
The knee is the largest joint in the body and is made up of the lower end of the thighbone (femur), the upper end of the shinbone (tibia), and the kneecap (patella). A knee replacement (also called knee arthroplasty) might be more accurately termed a knee “resurfacing” because only the surface of the bones are actually replaced.

Dr. Jonassen uses a highly precise surgical instrument for knee replacement that is individually tailored to your knee. This innovative technology is based on a CT scan of your knee and creates a 3-D model of your knee in addition to the customized surgical instrument. This approach improves the accuracy of the implant size as well as the positioning and alignment of the implant. It can also reduce operating time and decrease the risk of bleeding and the potential for blood clots after surgery.

Total Hip Replacement
Hip replacement surgery involves replacing the femur (head of the thighbone) and the acetabulum (hip socket). Typically, the artificial ball with its stem is made of a strong metal or ceramic material, and the artificial socket is made of polyethylene (a durable, wear-resistant plastic) or metal backed with a plastic liner. The artificial joint may be cemented in position or held securely in the bone without cement.

Surgery to remove the hip joint and insert joint-replacement components may be by an anterior (from the front) or posterior (from the backside) approach. Dr. Jonassen performs both procedures and will discuss with you the best approach for your surgery.