



**NATIONAL
ORTHOPAEDIC
HOSPITAL**
CAPPAGH

Implementation of Daycase Total Hip Replacement Surgery

Anne-Marie Flanagan

Enhanced Recovery Arthroplasty CANP

Why Day Case THR's?



- ▶ Evolution of Enhanced Recovery Programme
- ▶ A Clinical Challenge
- ▶ Patients get back to normal sooner
- ▶ Less time spent 'unwell'
- ▶ Cost saving

DAY CASE HIP REPLACEMENT CRITERIA

▶ Inclusion Criteria

- ▶ Motivated patient
- ▶ ASA 1 or 2
- ▶ Good home support

▶ Exclusion Criteria

- ▶ BMI > 40
- ▶ Regular strong opioids
- ▶ Obstructive Sleep Apnoea
- ▶ Ischemic Heart Disease
- ▶ VTE - (Venous Thromboembolism)

PRE OPERATIVE MANAGEMENT



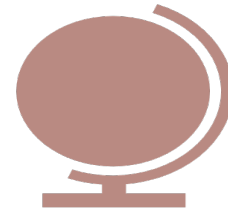
Counselling by surgeon

Patient booked
for PAC



PAC

Consultant
Anaesthetist
Multidisciplinary
team and CANP
Set expectation
Motivate patient



Education

Physio one-one
OT
Analgesia
Prescription in
advance



Same day admission

Short starvation
Water until 0600
First on list

PERI OPERATIVE MANAGEMENT



On arrival

Gabapentin 300-600mg
Pantoprazole 40mg
Walk to OR



Induction room

Midazolam 1-2mg
Short-acting spinal-
Prilocaine
Sedation-propofol
Antibiotics
1g IV Tranexamic Acid



Operating room

Posterior approach
Peri-articular injection
Ketamine 20-40mg
IV diclofenac/paracetamol



© Can Stock Photo

Recovery Room

IV fluids d/c (1000-
1500ml)
PO Oxycodone 5-10mg
Water

POST OPERATIVE MANAGEMENT



Return to ward

Sit out
PU
Physio x 3-4
visits
Eat and drink



Medications

Education by
Pharmacist/CANP
Paracetamol/ondansetron
Oxycodone 5-10mg 4hrly
PRN
1G IV Tranexamic Acid -
(started giving a 2nd dose
to patients in December
2020)



Discharge planning

Discharged from
physio
No/min PONV
Pain controlled
with PO
Eating
Wound
Instructions



Discharge 7pm

Diclofenac
PR 100mg
Cefuroxime
750mg
Enoxaparin
40mg sc

AT HOME



Moving/posture

Self directed physio
Sleep on side/back
Crutches 2-3/52
Min 'hip precautions'



VTE prophylaxis

TED stockings to knee 6/52
Aspirin 150mg x4/52



Wound

Dissolvable sutures
Waterproof dressing
Advice
Check at 10/7



Queries

Designated ward out of hrs
CANP contacts on Day 1
Anaesthetist contacts on Day 2

MEDICATIONS AT HOME



Analgesics

Oxycodone 5-10mg 4-6hr PRN x48hr
Paracetamol x1/52, PRN x2/52
Diclofenac 75mg bd x 1/52, PRN
x1/52
Gabapentin 200mg bd, 300mg
nocte x2/7
and 200mg nocte x 2/52



GI

Cyclizine 50mg TDS/ PRN
Pantoprazole 40mg x
4/52
Senna 2 tabs x2/7 then
PRN X 3/7
Lactulose 15ml bd x2/7
the PRN 3/7



VTE

Aspirin 150mg x 4/52

CANP ROLE - Enhanced Recovery Arthroplasty

- ▶ Funding received from the NMPDU
- ▶ Evolved from CNS role
- ▶ Based in OPD Department
- ▶ Aim is to start Day Case Partial TKRs

