

Post Op Instructions: Total Knee Replacement

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ARTHROSCOPIC SURGERY | JOINT RECONSTRUCTION



WOUND CARE

- Loosen bandage if swelling or progressive numbness occurs in the extremity.
- It is normal for the joint to bleed and swell following surgery — if blood soaks onto the ACE bandage, simply reinforce with additional gauze dressing for the remainder of the day and re-check. The ACE bandage can be laundered in a normal fashion and reused.
- Keep a waterproof bag over your leg to keep the dressing dry while showering. As long as the edges are sealed, you may shower the next day after surgery, you may shower the next day after surgery. Do not take a bath or submerge your knee in water until your incisions are checked at your first post-op visit. Your stitches are buried under the skin and will dissolve away over time. You may remove the dressings two days after surgery. Please keep SteriStrips on when showering. It is OK if they fall off in the shower but do not rub the incision site.
- You may have bruising around your knee that can track down your leg. If you notice that there is bruising on your thigh, knee, calf, ankle, or foot (and you don't have pain in these places), then don't worry, this is normal.

MEDICATIONS

- You can begin the prescription pain medication provided to you upon arriving home and continue every 4-6 hours as needed for pain.
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per the directions on the bottle.
- Common side effects of the pain medication are nausea, drowsiness, and constipation – to decrease the side effects, take medication with food – if constipation occurs, consider taking an over-the-counter laxative such as Dulcolax or Colace.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed (1-800-974-5633)
- Do not drive a car or operate machinery while taking narcotic medication.
- Ibuprofen 200-600mg (i.e. Advil) may be taken in between the narcotic pain medication to help smooth out the post-operative 'peaks and valleys', reduce the overall amount of pain medication required, and increase the time intervals between narcotic pain medication usage.
- A **blood thinning medication** will also be given to you. You will take this as prescribed starting the day after your surgery. Continue to take this medication until your post op appointment in the office.

ICE THERAPY

- Beginning immediately following surgery, use the ice machine (when prescribed as directed for the first 2-3 days following surgery. Ice at your discretion thereafter.
- When using "real" ice, avoid direct skin contact > 20 mins to prevent damage/frostbite of the skin. Check the skin frequently for excessive redness, blistering, or other signs of frostbite. When using the ice machine, it is okay to ice continuously as long as you check the skin frequently.

ACTIVITY

- You can put your full weight down on your operative leg immediately after surgery and use a walker for assistance initially.
- It is great for you and your new knee to go for a walk 3-4 times a day. However, don't overdo it. Increase your activity level by small increments daily.
- You should end every day feeling like you could have done more and not like you did too much. If the next day you walk for longer and have pain, then you are doing too much. Every day you should feel a little better and experience a little less pain.
- Once you come into the office for your first post-op visit, we will give you a prescription for outpatient physical therapy. This will be twice a week and for approximately 6-12 weeks.
- Air travel is permitted 14 days after surgery. Air travel and immobility increase the risk of blood clots. Unless you have been previously instructed to avoid aspirin products for medical reasons or you are under age 16, ensure that you are taking 81 mg baby aspirin twice daily beginning the day after surgery to minimize the risk of blood clot.

DRIVING

- You may drive approximately 2-3 weeks after surgery if you are not taking pain medication. If your right leg is the operative side, then you must have good control of your leg prior to driving.

DIET

- Begin with clear liquids and light foods (Jello, soup, etc.).
- Progress to your normal diet as tolerated.

APPOINTMENT

- Your postoperative appointment will be made prior to surgery. You will receive a reminder from the office prior to the visit. This will be 10-14 days after surgery at your surgeon's office.

****EMERGENCIES****

Contact the practice hotline at 1-800-974-5633 if any of the following are present:

- Unrelenting pain, despite taking medications as prescribed.
- Fever (over 101°). It is normal to have a low-grade fever following surgery.
- Continuous drainage or bleeding from incisions (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting uncontrolled

DO NOT CALL THE HOSPITAL OR SURGICENTER FOR EMERGENCIES IF YOU HAVE A NEED THAT REQUIRES IMMEDIATE ATTENTION, PROCEED TO THE NEAREST EMERGENCY ROOM

HIP / KNEE - 9 Self-Mobilization: Knee Flexion (Hook-Lying)

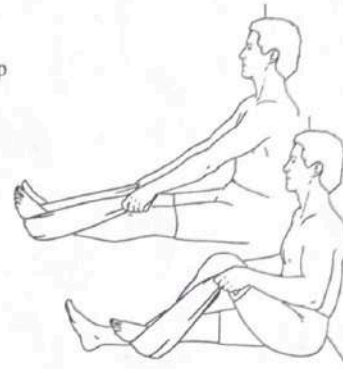


Bend operated knee as far as possible, then use other leg to gently push until stretch is felt. Hold 20 seconds. Relax.

Repeat 3-5 times per set. Do 2 sets per session. Do 2-3 sessions per day.

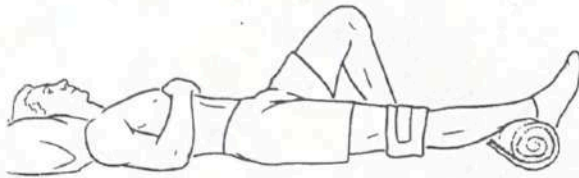
HIP / KNEE - 46 PROM: Knee Flexion

With towel around heel, gently pull knee up with towel until stretch is felt. Hold 20 seconds.



Repeat 3-5 times per set. Do 2 sets per session. Do 2-3 sessions per day.

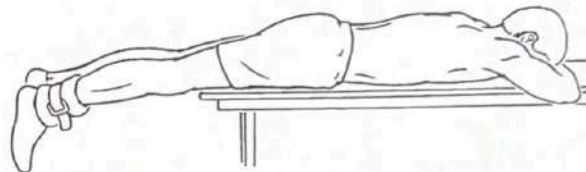
HIP / KNEE - 70 Knee Extension Mobilization: Towel Prop



With rolled towel under ankle, place pound weight across knee. Hold 1-2 minutes or as tolerated.

Repeat 3 times per set. Do 2 sets per session. Do 2-3 sessions per day.

HIP / KNEE - 71 Knee Extension Mobilization: Hang (Prone)



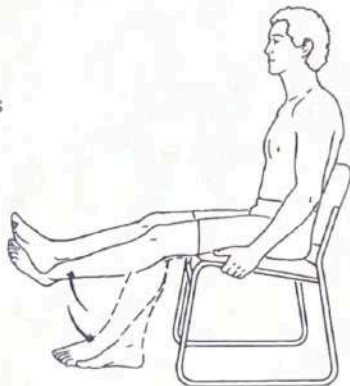
With table supporting thighs, place pound weight on ankle. Hold 1-2 minutes or as tolerated.

Repeat 3-5 times per set. Do 2 sets per session. Do 2-3 sessions per day.

HIP / KNEE - 6 Self-Mobilization: Knee Flexion / Extension (Sitting)

Gently push operated leg back with other leg until a stretch is felt. Hold 20 seconds. Relax. Recross bent legs at ankles. Slowly straighten legs, pushing with lower leg. Hold 20 seconds.

Repeat 3 times per set. Do 2 sets per session. Do 2-3 sessions per day.



These are exercises specifically designed to increase your knee's range of motion for bending and straightening. It is extremely important to perform these exercises regularly and faithfully, in order to ensure optimal results after your Total Knee Replacement surgery.

Set aside about 15 to 20 minutes each session, 2-3 times a day. You are on your way to success and recovery!

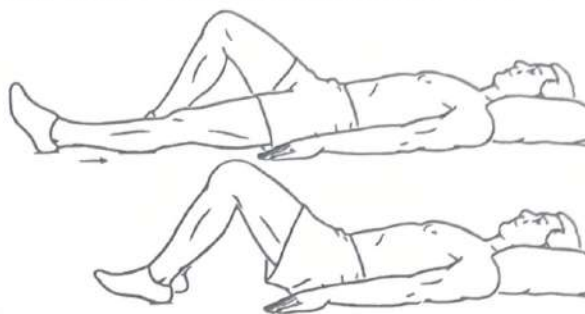
HIP / KNEE - 11 Strengthening: Quadriceps Set



Tighten muscles on top of thighs by pushing knees down into surface. Hold 5-10 seconds.

Repeat 10 times per set. Do 2 sets per session.
Do 2-3 sessions per day.

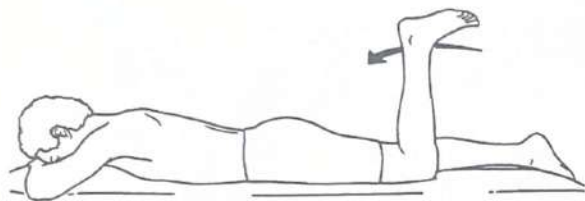
HIP / KNEE - 65 Self-Mobilization: Heel Slide (Supine)



Slide heel toward buttocks until a gentle stretch is felt. Hold 5-10 seconds. Relax.

Repeat 10 times per set. Do 2 sets per session.
Do 2-3 sessions per day.

HIP / KNEE - 8 Self-Mobilization: Knee Flexion (Prone)



Bring heel toward buttocks as close as possible. Relax.

Repeat 10 times per set. Do 2 sets per session.
Do 2-3 sessions per day.

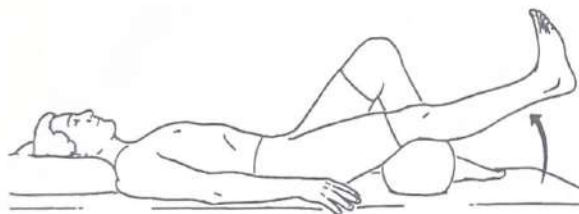
ANKLE PUMPS



With leg relaxed, gently flex and extend ankle. Move through full range of motion.

Repeat 20 times per set. Do 2 sets per session.
Do 2-3 sessions per day.

HIP / KNEE - 23 Strengthening: Terminal Knee Extension (Supine)



With knee over bolster, straighten knee by tightening muscles on top of thigh. Keep bottom of knee on bolster.

Repeat 10 times per set. Do 2 sets per session.
Do 2-3 sessions per day.

HIP / KNEE - 50 Hip Abduction / Adduction: with Extended Knee (Supine)



Bring leg out to side and return. Keep knee straight.

Repeat 10 times per set. Do 2 sets per session.
Do 2-3 sessions per day.