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

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