



3030 Executive Drive, Venice FL 34292 – 941-485-1505

Post Op Surgical Packet for Total Knee Arthroplasty:

Additional Information about your Post Op care.

In most cases, we will have a Home Health Nurse and a Home Health Physical Therapist come to your home. However there are certain things you can do to participate in your own recovery. This information packet should be referred to should you have any questions, or if Home Health is not provided. The only circumstance that will prevent us from setting up home health will be your individual insurance policy. While your individual policy may state that Home Health is a benefit, if we are unable to secure an agency in the area that participates with your insurance, please follow these instructions.

Wound Care:

- After surgery, wounds are typically covered with an adhesive dressing. This will be changed the day after surgery by a Home Health Nurse. If you have to change the dressing on your own, you will want to purchase dry, sterile dressings.
- Skin stitches, or staples will be removed in the clinic. In some cases, there may not be anything to remove.
- You may shower after surgery with a watertight dressing in place. Do not submerge the wounds in water (bathtub, pool, ocean, etc) until 6 weeks after surgery. You can discontinue the watertight dressing for your showers once your post op appointment has been completed.
- If your dressings become saturated or drainage continues beyond the first 3 days after surgery, please call the office.

Icing:

- Icing is an important part of recovery from surgery, It is used to decrease swelling and inflammation. For the first 48 hours, you should ice every waking hour for 20 minutes. And then you should be icing every few hours for the first 2-3 weeks after surgery, especially before and after your Physical Therapy or Home exercises.

Diet:

- After surgery, some patients experience nausea. This can be related to anesthesia or pain medications. It is best to begin with clear liquids, and light food. You may progress slowly to your normal diet if not nauseated.
- Patients will be prescribed anti-nausea medication after surgery. This can be used to treat nausea. If nausea or vomiting persists despite the medication, please call the office.
- Pain medication can also cause constipation. An over-the-counter laxative, high fiber diet or fruit juice may be helpful.

Medication:

- Most home medications may be resumed after surgery unless specifically directed by your surgery.
- Patients are given pain medication for post op pain. Please take this medication as instructed to control your pain. The goal is to decrease use of this medication as pain improves after surgery.
- Take your pain medication with food to help decrease nausea.
- Some pain medication may already have Tylenol (Acetaminophen) missed with it. Do not take any other medication that includes Tylenol while taking these pain medications. Taking too much Tylenol can cause liver damage.
- Pain medication can be taken prior to bedtime to help with sleeping.
- Do not drink alcohol, or drive while taking pain medication.
- Pain medication will not take away all of your post op pain. It is okay to have some discomfort.
- Because of the risks of prolonged narcotic use, in most cases narcotic pain medication will not be prescribed after 4 weeks of surgery. Plan to wean narcotic use accordingly.

Blood Clot Prevention:

- Though uncommon, blood clots, also called Deep Vein Thrombosis or DVT can occur after surgery. To decrease the risk of this problem your surgeon may prescribe a blood thinner or aspirin. We will send this prescription to your pharmacy with your pain medications. If you are prescribed an aspirin, a pharmacist may tell you to purchase over the counter aspirin rather than fill it as a prescription. Please take this as instructed by your surgeon. In most cases for aspirin, this will be prescribed to take 2 times a day.
- Elevation of the operative leg above the heart will also decrease swelling and prevent blood clots.

Activity:

- A walker should be secured prior to surgery, and you should bring this to the hospital or surgery center with you.
- You may bear full weight on the operated leg immediately after surgery.
- Return to work depends on your job requirement, specifics of your surgery and pain/swelling levels. You should be off work until your first Post Op appointment and can discuss returning with your surgery at that appointment.
- Physical Therapy will be prescribed after surgery. This is an important part of your recovery, and we encourage patients to participate.
- Driving after surgery should wait until your first post op appointment. You should not resume driving until you are fully off narcotic pain medication, and you can safely transition from the gas to the brake of your vehicle. The length of time to return to driving will depend on your surgeon, and the surgical leg.

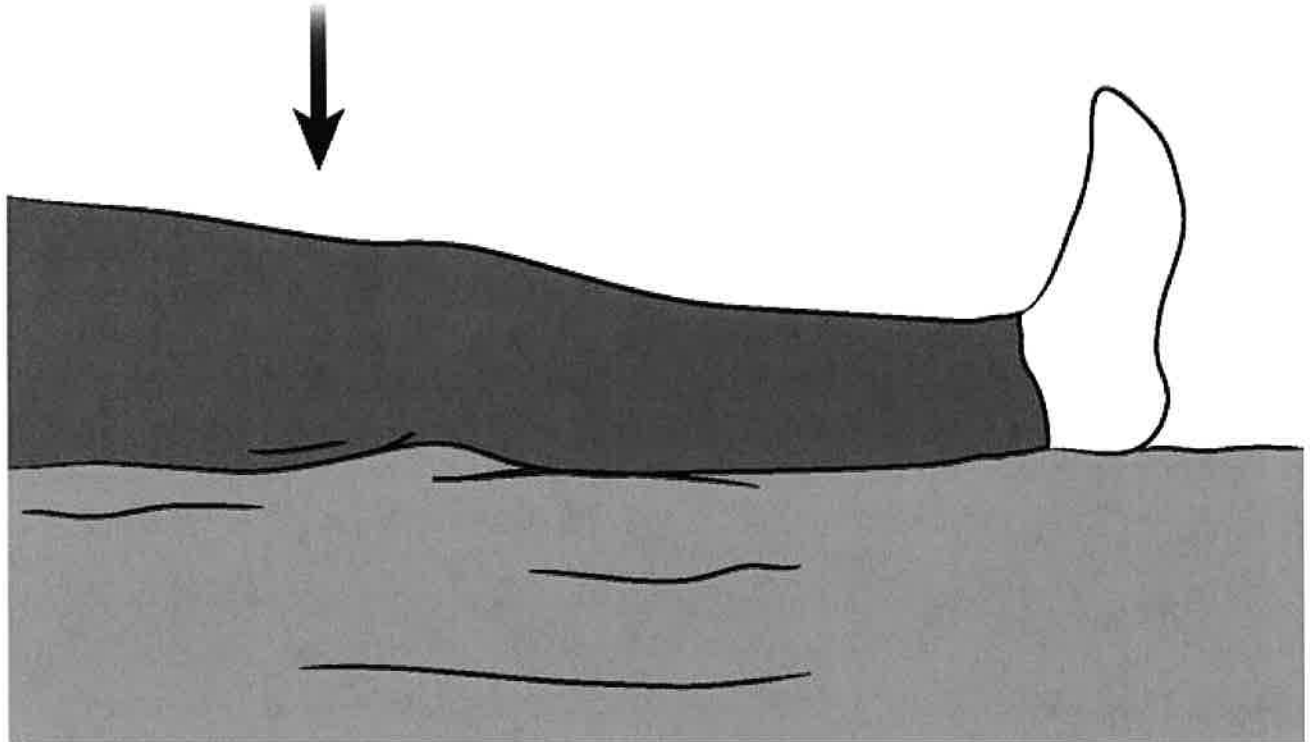
Reasons to call the office:

- Fever above 101.5
- Excess of pain or swelling of the calf
- Excess draining at the surgical incision after day 3 of your surgery.
- Worsening pain in the operative leg not controlled with medication.
- Excess nausea or vomiting.
- Constipation that lasts more than 3 days.

Home Exercises:

Quadriceps Sets

- Tighten your thigh muscle.
- Try to straighten your knee. Hold for 5 to 10 seconds.
- Repeat this exercise approximately 10 times during a 2-minute period, rest one minute, and then repeat.
- Continue until your thigh feels fatigued.



Quadriceps set

Straight Leg Raises

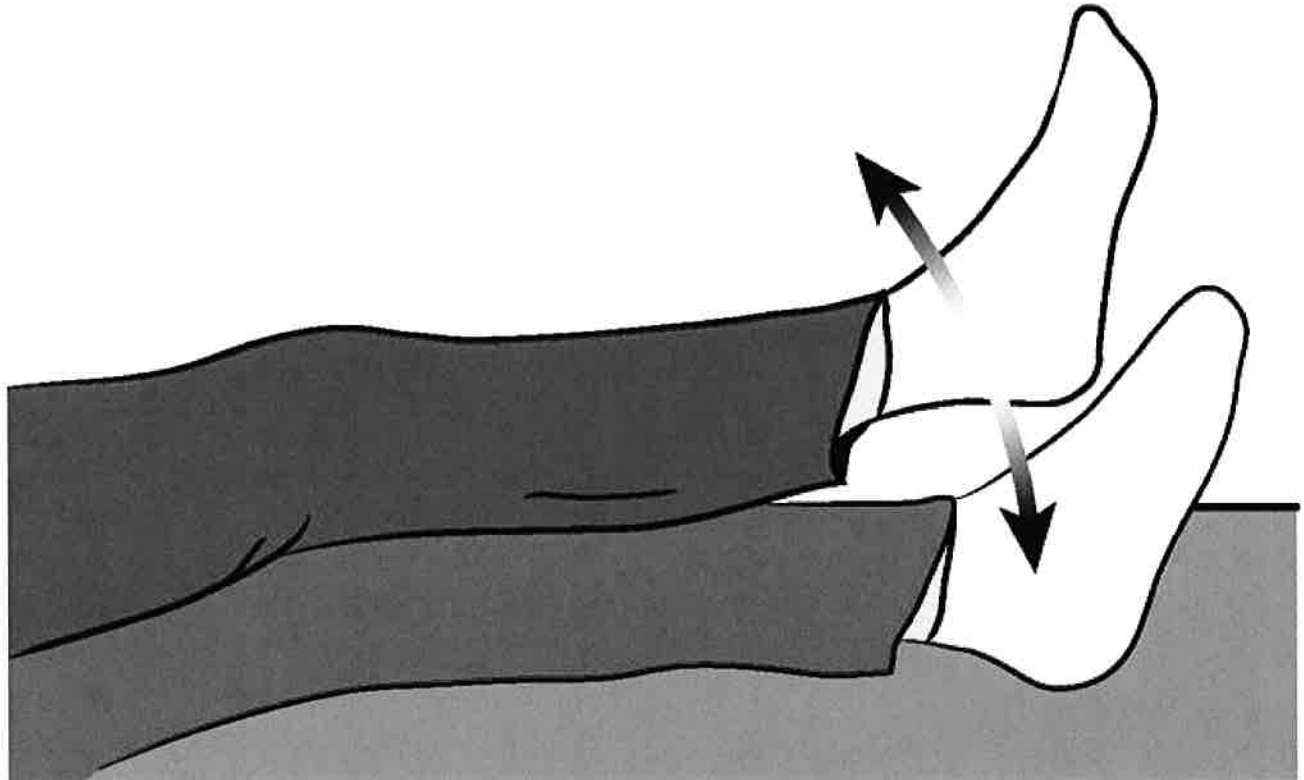
- Tighten your thigh muscle with your knee fully straightened on the bed, as with the quadriceps set above.

- Lift your leg several inches. Hold for 5 to 10 seconds.
- Slowly lower.
- Repeat until your thigh feels fatigued.
- This exercise should take 3 minutes.

You also can do leg raises while sitting.

- Tighten your thigh muscle and hold your knee fully straightened with your leg unsupported.
- Repeat as above.

Continue these exercises periodically until full strength returns to your thigh.

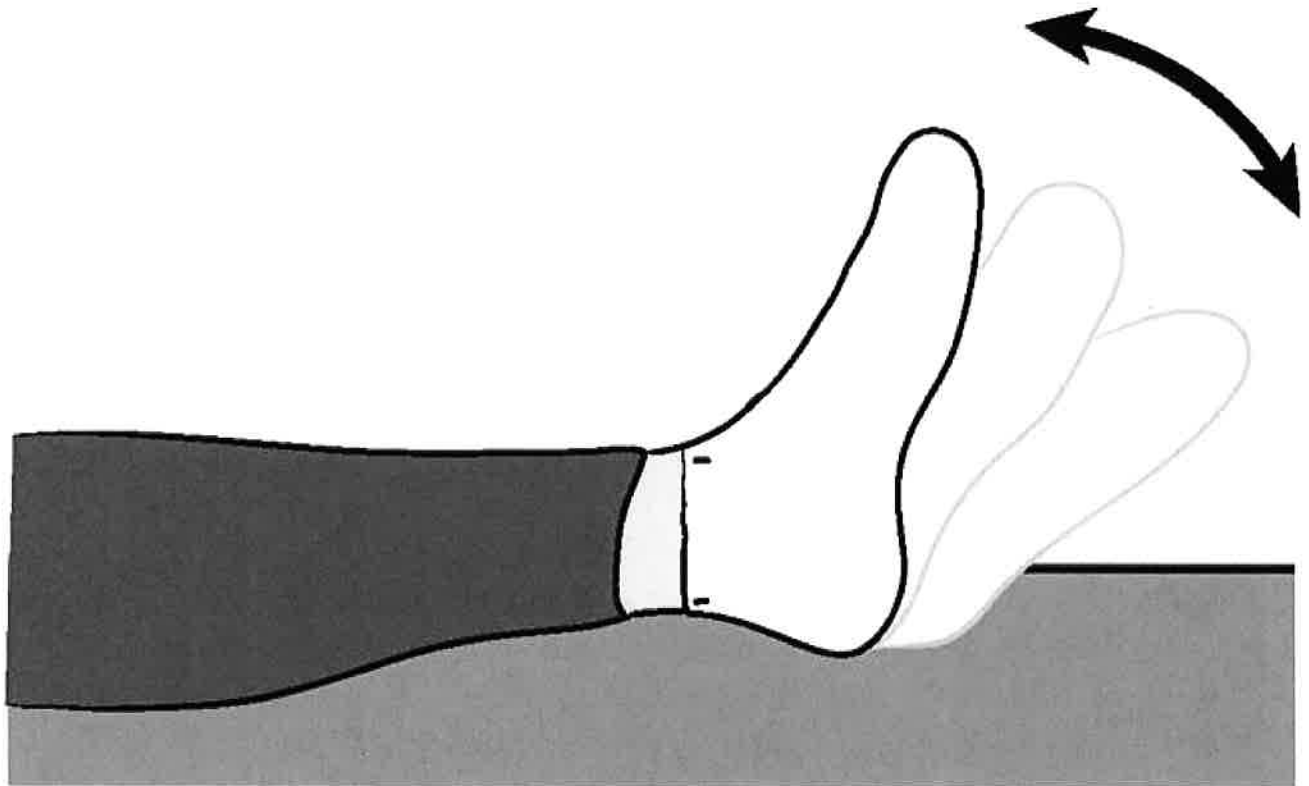


Straight leg raise

Ankle Pumps

- Move your foot up and down rhythmically by contracting your calf and shin muscles.
- Perform this exercise for 2 to 3 minutes, 2 to 3 times an hour in the recovery room.
- If you are watching TV, do this exercise during every commercial break.

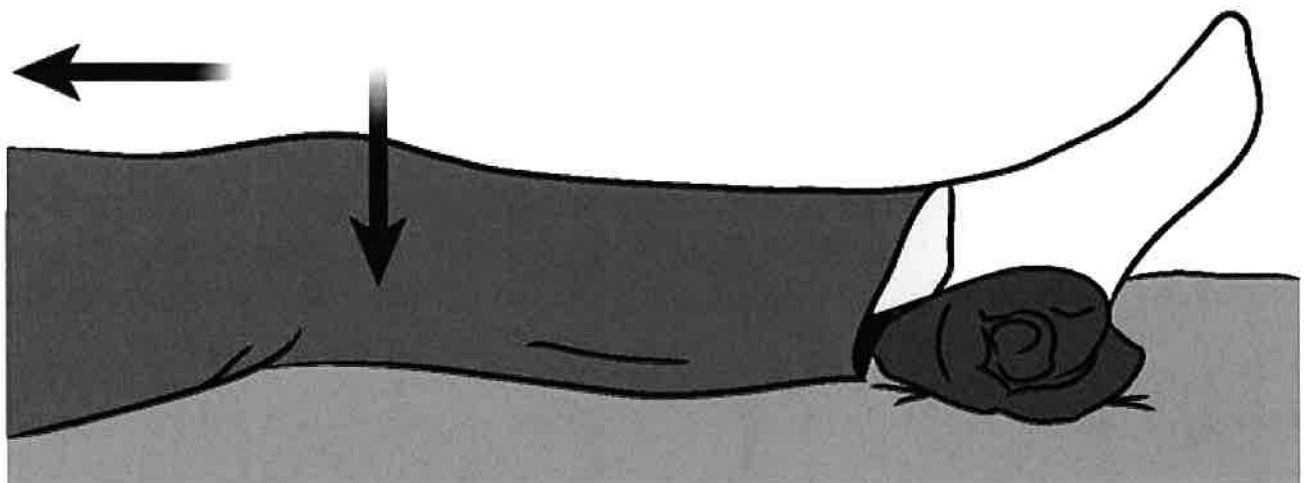
Continue this exercise until you are fully recovered and all ankle and lower-leg swelling has subsided.



Ankle pump

Knee Straightening Exercises

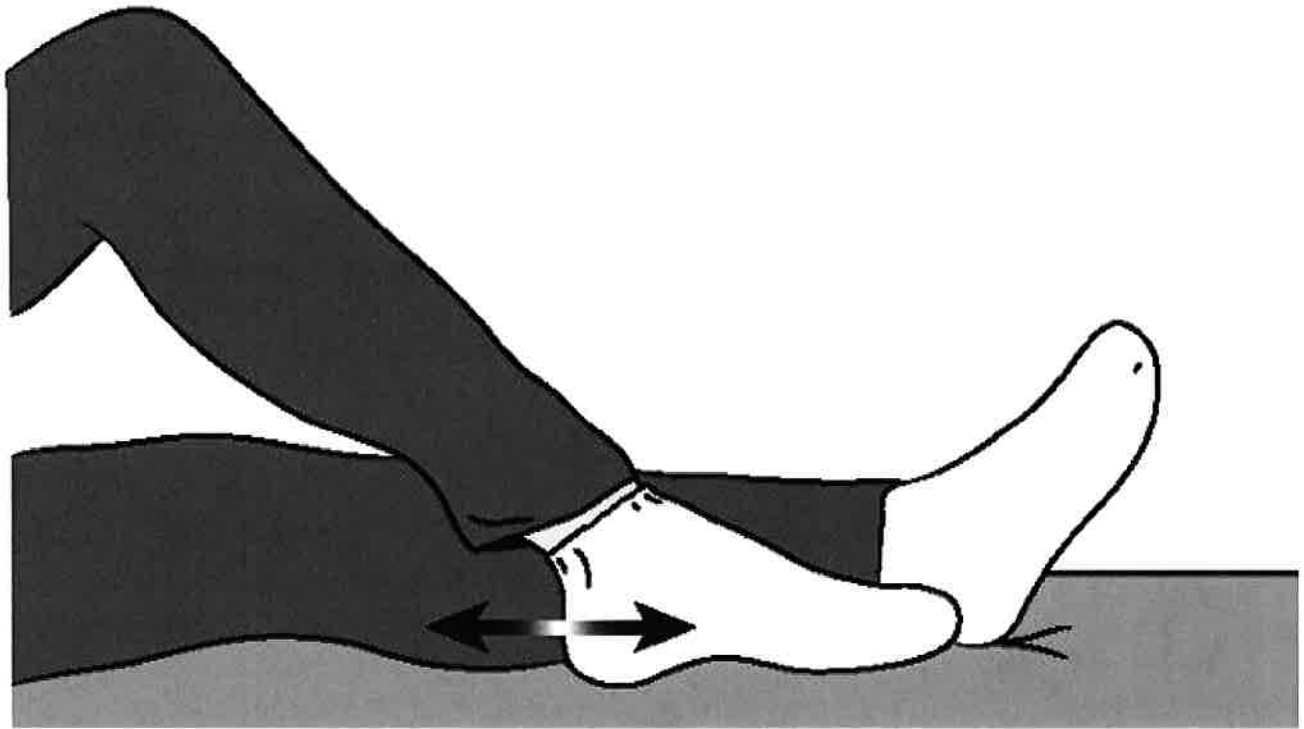
- Place a small rolled towel just above your heel so that your heel is not touching the bed.
- Tighten your thigh.
- Try to fully straighten your knee and to touch the back of your knee to the bed. Hold fully straightened for 5 to 10 seconds.
- Repeat until your thigh feels fatigued.
- This exercise should take 3 minutes.



Knee straightening exercise

Bed-Supported Knee Bends

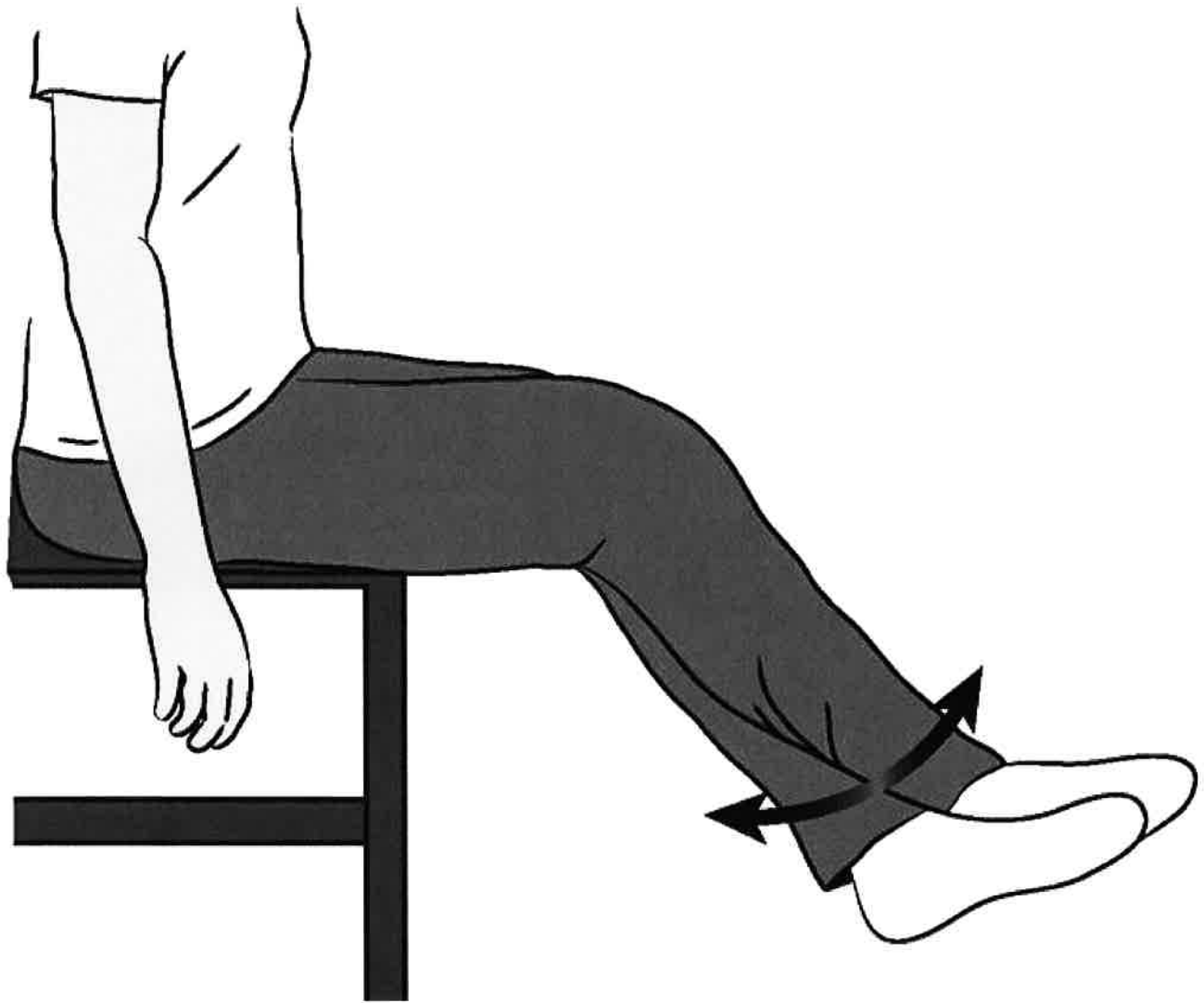
- Slide your foot toward your buttocks, bending your knee and keeping your heel on the bed. Hold your knee in a maximally bent position for 5 to 10 seconds.
- Straighten your leg.
- Repeat several times until your leg feels fatigued or until you can completely bend your knee.
- This exercise should take 2 minutes.



Bed-supported knee bend

Sitting Supported Knee Bends

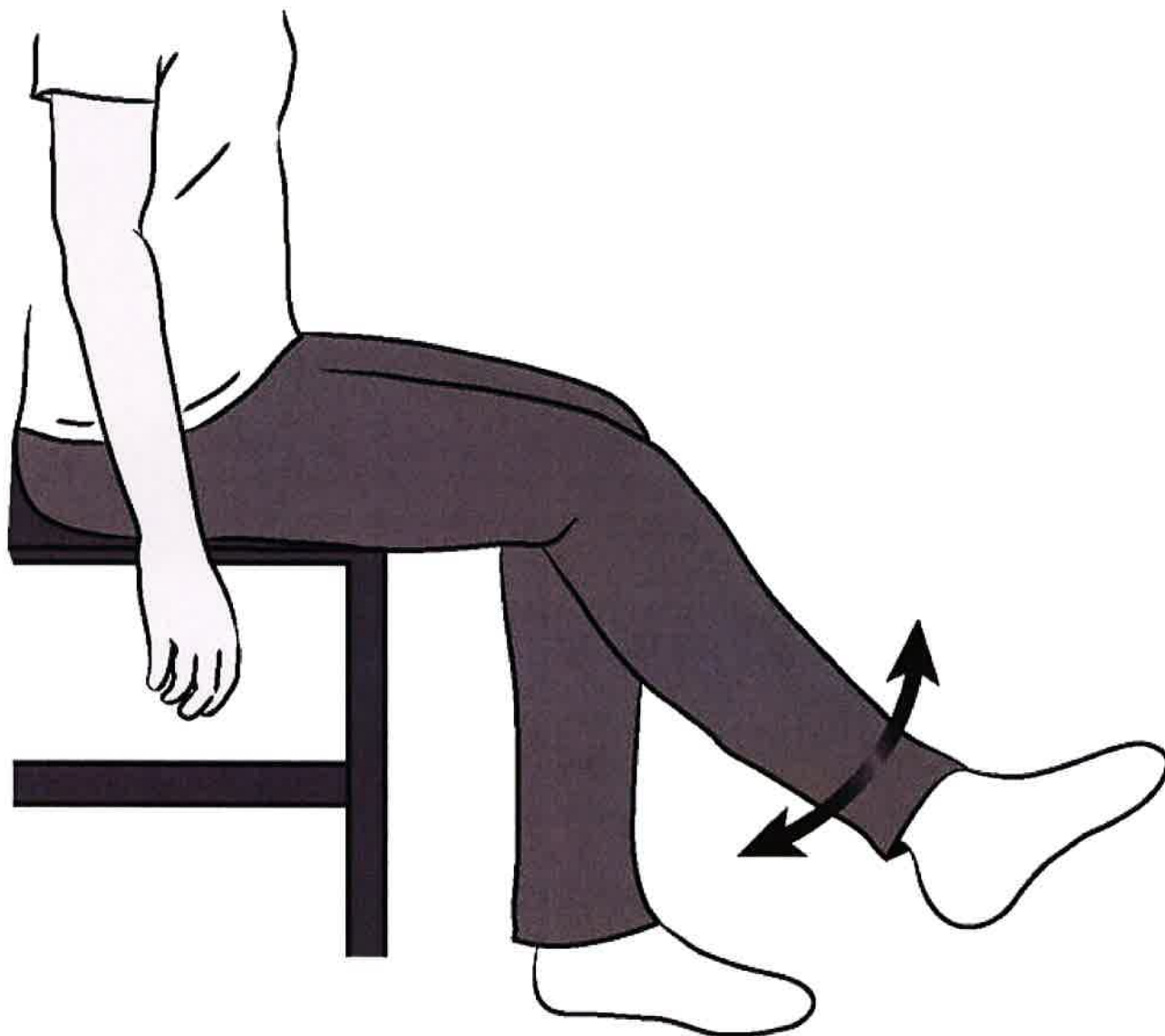
- While sitting at your bedside or in a chair with your thigh supported, place your foot behind the heel of your operated knee for support.
- Slowly bend your knee as far as you can. Hold your knee in this position for 5 to 10 seconds.
- Repeat several times until your leg feels fatigued or until you can completely bend your knee.
- This exercise should take 2 minutes.



Sitting supported knee bend

Sitting Unsupported Knee Bends

- While sitting at bedside or in a chair with your thigh supported, bend your knee as far as you can until your foot rests on the floor.
- With your foot lightly resting on the floor, slide your upper body forward in the chair to increase your knee bend. Hold for 5 to 10 seconds.
- Straighten your knee fully.
- Repeat several times until your leg feels fatigued or until you can completely bend your knee.
- This exercise should take 3 minutes.



Sitting unsupported knee bend

Early Activity

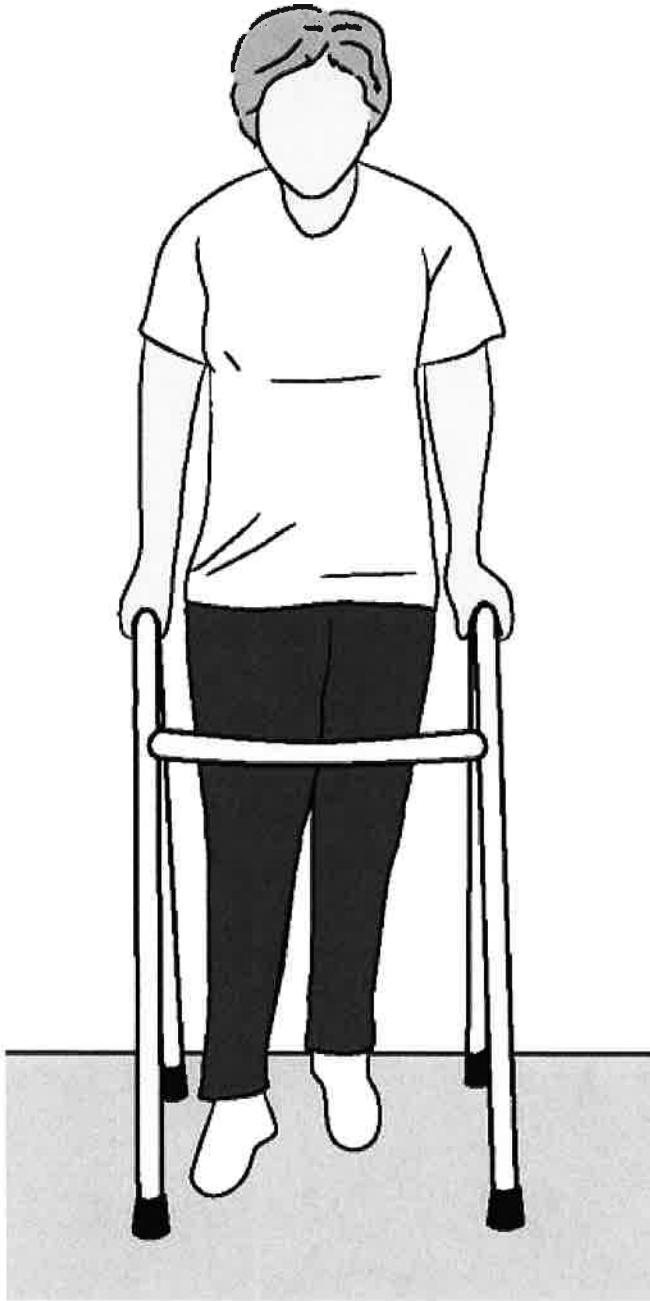
Soon after your surgery, you will begin to walk short distances in your hospital room and perform everyday activities. This early activity aids your recovery and helps your knee regain its strength and movement.

Walking

Proper walking is the best way to help your knee recover. At first, you will walk with a walker or crutches. Your surgeon or therapist will tell you how much weight to put on your leg.

- Stand comfortably and erect with your weight evenly balanced on your walker or crutches.

- Advance your walker or crutches a short distance; then reach forward with your operated leg with your knee straightened so the heel of your foot touches the floor first.
- As you move forward, your knee and ankle will bend and your entire foot will rest evenly on the floor.
- As you complete the step, your toe will lift off the floor and your knee and hip will bend so that you can reach forward for your next step. Remember, touch your heel first, then flatten your foot, then lift your toes off the floor.



Early on, walking will help you regain movement in your knee.

- Walk as rhythmically and smoothly as you can. Don't hurry. Adjust the length of your step and speed as necessary to walk with an even pattern.

- As your muscle strength and endurance improve, you may spend more time walking, and you will gradually put more weight on your leg. When you can walk and stand for more than 10 minutes and your knee is strong enough so that you are not carrying any weight on your walker or crutches (often about 2 to 3 weeks after your surgery), you can begin using a single crutch or cane. Hold the aid in the hand opposite the side of your surgery. You should not limp or lean away from your operated knee.

Stair Climbing and Descending

Stair climbing is an excellent strengthening and endurance activity that also requires flexibility.

- At first, you will need a handrail for support and will be able to go only one step at a time.
- Always lead up the stairs with your good knee and down the stairs with your operated knee. Remember, "up with the good" and "down with the bad."
- You may want to have someone help you negotiate stairs until you have regained most of your strength and mobility.
- Do not try to climb steps higher than the standard height (7 inches) and always use a handrail for balance.
- As you become stronger and more mobile, you can begin to climb stairs foot over foot.