

Total Knee Postoperative Instructions

Post-Operative Instructions after Total Knee Replacement

Care Of The Incision:

Inspect the incision once a day.

Keep the incision clean and dry.

You may shower after there has been no drainage from the incision or drain hole for at least 24 hours. This is usually 4-5 days after discharge.

Wash incision with warm soapy water and pat dry. Do not remove the Steri-Strips, these will fall off naturally in a few weeks.

Report immediately any pain, cramping or tenderness to touch in the calf or thigh, or increased redness around the incision.

Call your physician if the incision appears infected or shows increased drainage or redness.

You may notice numbness along the outside aspect of your operated knee. This is normal and may last for up to a year, or could be permanent.

Medications:

Take prescribed pain medication as directed and only as needed. Slowly taper off medication as pain lessens. Transition to Tylenol or ibuprofen as needed.

Diet:

Your appetite may be decreased. It may be helpful to eat smaller, more frequent meals.

Try to maintain a balanced diet. If you are on a special diet, contact your medical doctor and follow his/her instructions.

Protein and vitamin C help in wound healing.

Surgery and pain medication may cause constipation. Fresh fruit and juices are encouraged. Contact your medical doctor for any laxative orders.

Activities

Continue to weight bear as directed by your physician and therapist.

You will probably notice swelling of the operated leg after discharge and with walking. This is normal. Reduce swelling by laying flat and elevating your leg above your heart (place 3-4 pillows under your leg). After an hour the swelling should resolve. If swelling has not diminished with elevation or overnight, call your physician.

Use crutches or a walker as instructed until you feel stable and safe. You may transition from a walker to crutches or to a cane, as you feel comfortable. The time frame for using an assistive device varies for each patient averaging 2-6 weeks.

Walking is the best form of exercise. Begin with 15 minutes three to four times a day, and then increase the amount of time spent walking as tolerated.

Continue with the exercises as instructed in the hospital. Range of motion exercises: stretch for straightening and for bending.

You may use ice on your knee after exercising to decrease the swelling, but not more than 20 minutes at a time. Place a thin towel between your skin and the ice. Ice should never be in direct contact with the skin, it might burn you.

No driving until your physician clears you. You will not be able to drive while you are taking narcotic medication (i.e., Vicodin, Oxycodone) or while you are using assistive devices for walking.

Avoid impact activities such as jogging, running, tennis and skiing. Check with your individual physician as to variations to this rule. Walking, swimming and bike riding are great forms of exercise. To protect the incision, do not swim for four to six weeks after surgery.

Special Instructions

To help to decrease swelling and the prevention of blood clots, we advise you to wear the anti-embolic hose (surgical stockings) for six weeks after surgery or until your activity level is greater than the time you spend at rest sitting or lying down. The stockings can be hand washed and hung to air dry.

Do not roll the anti-embolic hose down as this will act as a tourniquet on your leg. Remove all wrinkles. The hose may be removed for 60-90 minutes two to three times each day. Wear the hose at night.

Sexual activity can resume when your pain has diminished and you are comfortable. If you experience knee pain, stop.

Follow-up Plans

A follow up visits will be determined by your physician. Call 503-214-5255 to schedule an appointment.

Ongoing Precautions

Maintain a reasonable ideal weight to avoid stress on your hip joint.

Avoid kneeling on hard surfaces. A foam pad or kneeling bench is helpful with housework, gardening, et cetera.

Inform all physicians who are treating you that you have a total knee prosthesis, as some long-term precautions need to be taken.

Antibiotic therapy is needed when any dental work is done. Call the clinic prior to your dental appointment for instructions. Antibiotic therapy may also be needed for some surgical procedures—call for clarifications.

Airport metal detectors will detect your prosthesis. Cards are available at the clinic for identification purposes.

If you are a golfer, putting can resume at two months after surgery with your regular game progressing by working up from short irons to woods slowly.

To aid in the prevention of blood clots you are advised to take one 325 mg tablet aspirin in the morning and one in the evening for at least six weeks after surgery or as your physician recommends. Do not take aspirin if you are taking a prescribed blood thinner, i.e., Coumadin or Lovenox.

