

DISCHARGE INSTRUCTIONS FOLLOWING TOTAL KNEE REPLACEMENT SURGERY

PAIN CONTROL

- Several methods may be used to help manage your pain:
 1. **Cold Therapy.** Ice packs should be applied to your knee for approximately **20 minutes** at a time, several times a day as needed for pain and swelling. Care should be taken during cold application. Use a damp towel between the skin and ice and only keep the ice on the knee until the skin becomes numb.
 2. **Medication.** Several different types of medication are used to help reduce pain. They usually work best when they are used along with other methods of pain management.
 - **NSAIDS** (Non-Steroidal Anti-Inflammatory Drugs) such as Aspirin, Aleve or Ibuprofen. These medications reduce pain and swelling. They relieve mild to moderate pain. They can be used in addition to Narcotics. They may or may not be prescribed for you. Do not take if you are on blood thinners or have a stomach ulcer history.
 - **Narcotics** such as Norco, Vicodin or Hydrocodone. These medications are used to reduce your pain ***and must not be taken any more often than prescribed.*** In an effort to keep your pain under good control, you should take the pain medication routinely as prescribed during the first 24-48 hours following surgery. As the pain lessens, begin taking it as needed (within the prescribed guidelines). As you become more comfortable, you may substitute Tylenol or an NSAID for pain control.
 - **Nausea** – Pain medication should be taken with food as this will help to prevent any stomach upset or nausea which is common.
 - **Do not drink alcoholic beverages while taking pain medications.**
 - **Do not drive while taking pain medication.**
 - Requests for pain medication should be made during normal office hours. Please Note: **Pain medication will only be ordered during regular office hours** and cannot be called in to a pharmacy.
 - The goal is to have you off narcotics 6 weeks after surgery or sooner if possible.
 - You may resume your routine medications unless otherwise instructed. No other blood thinners until you are off of Lovenox or Xarelto.
 3. **Nerve Blocks.** You may receive a nerve block before, during or after your surgery to help manage your pain. If you are a candidate, your anesthesiologist will explain this to you prior to the procedure.
- **Constipation** – Is common with narcotic pain meds. Increase your fluid and juice intake, eat more vegetables and bran. Also, you may purchase Pericolace, a stool softener at any pharmacy to help with constipation. Take this two times per day.

BLOOD CLOT (DVT) PREVENTION

- Aspirin 81 mg twice a day for two weeks to help prevent blood clots (DVT). **Do not take** Aspirin if you are on blood thinners, i.e. Coumadin, Eliquis, Xarelto, Pradaxa, have an allergy to Aspirin, or have a history of stomach ulcers.
- For those patients already on Coumadin, your prothrombin time will be closely monitored by your primary physician with weekly blood draws for the first month following surgery and the dosage determined by your primary physician.
- Ankle pumps every 1-2 hours throughout the day. Begin as soon as you are able.
- You should have two pair of TED hose stockings for your legs. These aid in circulation following surgery and should be worn for six weeks following surgery. The stockings may be removed twice a day for about 30 minutes each time. Apply a clean pair daily, washing the dirty pair by hand and line drying. This helps to maintain the elasticity in the stockings. Your legs need to be elevated on the bed or couch when reapplying the stockings. *You will need help to reapply them.*

WOUND CARE

- **Dressing** – You should leave your dressing in place for the first 7 days. The incision is usually closed with staples. Keep a dressing on your incision site as long as there is any drainage. When the drainage stops, the dressing may be removed. However, if you are more comfortable keeping a dressing on your incision site, change it daily or if it becomes wet.
- **Shower** – You may shower. Keep the incision site covered until there is no further drainage from your incision site.
- **Bathing** – No tub baths or hot tubs until your incision sites are completely healed and your staples have been removed (at least two weeks). Do not soak your knee under water.
- Swelling and **discoloration/bruising** of the knee are expected. This will gradually resolve.

PHYSICAL ACTIVITY

- **Crutches/Walker** – Walk with a walker/crutches, with weight bearing on your affected leg as instructed by Physical Therapy, gradually increasing the length of walking as tolerated.
- **Physical Therapy** – You will have Physical Therapy following your surgery. This usually begins sometime within the first two weeks following surgery unless otherwise instructed.
 - Pump your ankles frequently (every hour while awake) to help prevent blood clots from forming.
 - Do frequent leg raises.
 - Use a raised toilet seat extension at home, if helpful.
- **Elevate** your knee – Lie down and elevate your leg on 1-2 pillows (above the level of your heart) or the blue wedge. The pillows should be placed under your lower leg only and not under your knee. After the first few days once you begin increasing your activity, plan several rest periods throughout the day and elevate your leg above your heart. This will help to relieve the swelling and pain.
- **Driving** – You most likely will be able to resume driving six weeks after surgery. Discuss this further with your doctor.
- **Work** – Light sedentary jobs can often be resumed in 4-6 weeks. Return to heavy or strenuous occupations will need to be discussed with your doctor.

OTHER INFORMATION:

- Be aware that your joint may trigger metal detection devices.
- You may obtain a temporary handicap parking permit application from this office if you feel it is needed. You will need to take this to the Secretary of State's office to obtain the actual permit.

FUTURE DENTAL OR SURGICAL PROCEDURES

- If you are going to have any dental work (including cleaning), any surgical or other invasive procedures done, notify your doctor/dentist that you have had a joint replacement. Your doctor/dentist will order an antibiotic for you prior to these procedures to prevent microorganisms from spreading to your new joint. **IT IS IMPORTANT THAT YOU TAKE THESE PRECAUTIONS FOR YOUR WHOLE LIFE.**

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FOLLOW UP APPOINTMENT

- You should be seen in the office for follow up **10-14 days** following your surgery. A wound check, details of your surgery, and expectations will be reviewed. **Call the office today if you do not already have an appointment.**
- OAM has a physician available by phone 24 hours per day for **EMERGENCY** orthopaedic needs. Routine questions, including requests for pain medication, are best handled during weekday business hours. (616) 459-7101.

QUESTIONS?

- If you have any questions that have not been covered by this handout, please contact OAM at **(616) 459-7101.**