

Orthopaedic and Spine Institute
21 Spurs Lane, Suite 245, San Antonio, TX 78240
www.saspine.com
Tel# 210-487-7463
Joel B. Nilsson, M.D., P.A.

Discharge Instructions Following Total Knee Replacement

FOLLOW-UP

Please call 210-487-7463 to schedule a postoperative appointment 10-14 days after your surgery date.

This handout includes many of the questions you might have following your discharge to home.

If you have other questions, please call the office at 487-7463.

If you should have SHORTNESS of BREATH or CHEST PAIN, call 911 or go to the nearest emergency department (ED)

CALL OUR OFFICE AT 487-7463 IF YOU HAVE ANY OF THE FOLLOWING:

- If you have any drainage or redness associated with your wound
- If you have a fever greater than 101.5° F° (38.5°C)
- If you have persistent calf pain or swelling that does not improve with elevation (putting the leg on two or three pillows bringing it above the level of your heart).
Calf pain or swelling could be an indication of a blood clot.
- If your pain seems to be worsening
- If you have difficulty urinating or if you have symptoms of burning with urination

MEDICATION:

You will be given prescriptions for pain medication. Take your pain medicine as directed on the instructions.

ANTICOAGULATION:

After surgery you will be placed on a blood thinner to prevent blood clots. Most people are started on Lovenox while they are in the hospital. You will take

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Lovenox by self injection for 2-3 weeks following surgery. You will not need to have blood work done to monitor your levels. Once you stop taking the Lovenox you should take one aspirin (325 mg) twice a day for two more months.

WOUND CARE

Dr. Nilsson routinely uses staples to close his incisions. These are least reactive with the skin and are less likely to strangulate the skin margins.

You may shower seven days after surgery. Use a gentle soap and pat (not rub) the surgical site dry. We would prefer that you not soak in a tub until one month after surgery.

You may also experience some numbness on either side of your incision. This is normal and is due to the nerve endings being cut when the incision was made at surgery. A sense of numbness may always be there; however, in time it may decrease in severity.

PHYSICAL THERAPY

Perform the exercises that were explained to you by the therapists while in the hospital. A therapist will come to your home for two to six weeks to do range of motion exercises with your knee, as well as to teach you additional exercises to do on the days he/she does not come to your home. It is necessary to do these exercises to prevent your knee from becoming stiff, resulting in loss of function of your knee. You may feel some pulling and tightness in your knee during exercise; this is normal, although severe pain should be avoided.

You may place all of your weight on your leg. The therapist will instruct you in the use of crutches or a walker for additional support while walking.

HOW LONG MUST I WEAR THE WHITE TED STOCKINGS?

TED stockings must be worn for six weeks from the surgery date. They are used to help control swelling and improve circulation of blood back to your heart. TED stockings must be worn during the day and may be removed at nighttime, as long as you put them back on when you wake in the morning.

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SWELLING

- Swelling is normal after this type of surgery. The swelling may last for six weeks to three months and will gradually decrease.
- To reduce swelling, lie flat and elevate the leg on two or three pillows. Do this for 30 minutes, three times a day.
- To help aid in decreasing swelling, ice should be applied to your leg (using the ice-cuff) three to four times a day at 20-minute increments.

WHEN MAY I DRIVE?

Due to weakness in your leg muscles and the danger of having an accident, we do not allow you to drive a car until six weeks after your surgery. After that, it is up to you as the responsible driver to determine whether you are safe to drive or not. It is okay for you to go for a ride in the car with someone else driving.

It is advisable that you not sit for any longer than 30 minutes at a time as this may cause increased swelling. After sitting for 30 minutes you should get up and walk around.

WHAT MAY I DO FOR ACTIVITY FOLLOWING SURGERY?

You may walk as much as tolerated, using pain and swelling as your guide. You should limit the number of times you climb stairs, as this may increase your pain and swelling. At four to six weeks after surgery you may slowly increase stair climbing. Swimming and stationary biking are good forms of exercise. When using a stationary bike, you will initially need to make the seat high and the resistance low. Use crutches or a walker for support when walking, and advance to a cane when your therapist advises you it is safe to do so.

WHEN MAY I SWIM?

You may resume swimming at four to six weeks postop. This will be discussed at the time of your four-week follow-up appointment.

HOW LONG WILL I BE OUT OF WORK?

You may usually return to work approximately ten to 12 weeks after surgery. If you have

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a sedentary job, you may be able to return sooner. Limitations and precautions in the workplace will be discussed prior to your return to work.

WILL I HAVE ANY PERMANENT RESTRICTIONS FOLLOWING KNEE REPLACEMENT?

You should not kneel on the operated knee as this will cause pain. Additionally, if you kneel/twist just right when getting up, there is a chance you could dislocate the prosthesis.

You should not do high-impact activities such as jumping or running. These types of activities can cause the prosthesis to wear out sooner or become loose.

You should limit walking on uneven ground as you could sprain your ligaments.

Long Term Follow Up:

- 10-14 days: Wound check, staple removal and ambulation evaluation.
- 6 Weeks: Xray; Motion check; manipulation if poor range of motion.
- 3 Months: Xray
- 6 Months: Xray; Alignment film for knees.
- 12 Months: Xray
- Annual checkup thereafter.