11782 SW Barnes Rd. Suite 300 Portland, OR 97225

# Murray/Scholls

14795 SW Murray Scholls Dr. Suite 109 Beaverton, OR 97007



Put Your Life in Motion

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#### KNEE REPLACEMENT SURGERY FAQs

- Prior to Surgery Online Resources
  - Orthopedic + Fracture and/or St Vincent Total Joint Booklets (mailed to you)
  - o American Association of Hip and Knee Replacement Surgeons
  - o American Academy of Orthopedic Surgeons
- Post-operative appointments
  - o 2-week follow-up (with myself or a physician assistant)
    - Wound check
    - Range of motion check goal of 90 degrees total motion
    - Answer questions
  - 6-week follow-up (with myself or a physician assistant)
    - Wound check
    - Range of motion check goal of 110-120 degrees total motion
    - Xrays to look at hip replacement
    - Answer questions
  - o 3-4 month follow-up
  - o 1 year follow-up
  - o Every 5 years
- Rehabilitation principles
  - o This is a hard recovery
  - You need to fully dedicate 6-8 weeks for your recovery, working first and primarily on your knee range of motion and secondly on your quadriceps strength
    - Full extension
    - Full flexion
    - Straight leg raise and quadriceps sets
  - You should have formal physical therapy set up and staring within 7 days of your surgery
  - You should be doing home exercises 10+ times per day for the first month
  - o Here is another good reference: <u>American Academy of Orthopaedic Surgeons</u>
  - o The goal is 90 degrees of motion by 2 weeks, and 120 degrees of motion by 6 weeks
- General Guidelines
  - o Ice and Elevate to decrease pain and swelling over the first few weeks
  - o Pain
    - It is safe to take over-the-counter Tylenol every 4-6 hours

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- It is safe to take over-the-counter anti-inflammatory medications (ibuprofen, naproxen, etc.). Please take with food to prevent GI upset
- Take the narcotic pain medications as prescribed, however, it is encouraged to wean off the narcotics as able
- We will prescribe narcotic pain medication for the first 6 weeks after your surgery, but after this, you will have to go through your primary care doctor
- Expect to have a moderate amount of pain the first few days after surgery, which should slowly get better over the next few weeks
  - Knee replacement surgery is a hard surgery to recover from
  - You may require narcotics for up to 4-6 weeks after surgery
  - As you become more active over the first few weeks, you may notice an increase in your pain and swelling (versus when you were more sedentary)
- o Incision
  - I routinely close incisions with absorbable suture, not staples depending on your skin thickness and quality
- o Dressing
  - The majority of patients will have a standard dressing, with an extra one given by the nursing staff at the hospital / surgery center
    - This is a waterproof dressing (for showers, not baths)
    - Leave this dressing on for one week
    - After one week, remove dressing, and shower do not scrub over your incision, just let water drip down, and lightly pat dry
    - Then place new dressing and leave in place until seen in clinic at your first follow-up appointment
- o Swelling
  - It is normal to have a moderate amount of <u>swelling</u> over the first few weeks after surgery over your knee and entire lower leg – do not be alarmed
  - It is also normal to have <u>bruising</u>
    - This may happen around your incision and up in your thigh region
    - It may also occur in your calf and lower leg below your knee (this is due to gravity bringing blood down your leg)
- o Muscle spasms
  - Common after knee replacement surgery
  - Try a combination of ice and heat to help, as well as anti-inflammatory medications

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- If these persist, we can prescribe an anti-muscle spasm medication
- o Nausea
  - This can happen as a result of anesthesia during surgery as well as the narcotics
  - Try to decrease the amount of narcotics you are taking
  - If this is not getting better, call our office, and we can call an anti-nausea medication in for you
- o Constipation
  - This can also happen as a result of anesthesia during surgery as well as the narcotics
  - Follow the separate constipation handout that we provide
  - Try to decrease the amount of narcotics you are taking
  - Take over the counter stool softeners as well as a high fiber diet
  - You should continue to pass gas after surgery, and should have a bowel movement by 3-5 days
  - If it has been >5 days since your last bowel movement, please call our office
- o Showers
  - You will have a waterproof dressing
  - It is okay to shower starting on post-operative day 3
  - Do not scrub over your incision for >1 month after your surgery just let water drip down, and pat dry
  - Keep covered for 2 weeks
- o Baths/Soaking/Hot Tubs
  - Prohibited for 6 weeks after your surgery
- o Lotions
  - Prohibited around your incision for 6 weeks after your surgery
- o Fevers
  - It is not uncommon to have a low-grade fever after surgery
  - This is most commonly due to some fluid accumulation in your lungs
    - Take deep breaths and/or cough to try to clear your lungs
    - Take Tylenol
  - If you have a fever >101.5 degrees F, please call our office
- Things to watch for If you have any of these do not hesitate to call our office
  - Bright red skin around your incision site
  - Drainage from your incision >1 week after your surgery
  - Fevers >101.5 degrees F
  - Chills and/or night sweats

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- Activities
  - o Assistive devices
    - Typically people use a walker for 1-3 weeks
    - Then transition to a cane for an additional 2-6 weeks
    - Then back to no assist device
  - o Driving
    - This is very patient dependent on when you feel comfortable and safe driving, not only for yourself, but for the safety of others
    - You must be off narcotic pain medications
    - Typically, it is around 2-4 weeks surgery for a left knee replacement, and 3-6 weeks after surgery for a right knee replacement
  - o Work
    - This matters what your occupation is
    - Ideally you have a minimum of 4-6 weeks off of work, but if you have a desk job, you can often return working from home sooner than this
    - I have found that patients who return too soon do not focus as much time on their recovery, rush back to work too soon, and may not be as happy with their outcome
  - o Leisure activities
    - This is extremely variable per person, and often depends on your activity level prior to surgery
    - Please talk to me regarding the activity(ies) you want to get back to
    - Almost all are safe hiking, bicycle, swimming, golf, doubles pickleball or skiing
    - The only activity I ask that people don't do is frequent jogging or running
    - Full recovery from a knee replacement can take up to 1 year