



TWIN CITIES ORTHOPEDICS

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POST-OPERATIVE INSTRUCTIONS

Total Knee Arthroplasty

Activity

- You can weight bear as tolerated on the operative leg. Assistive devices such as a **walker** or **cane** may be used to help provide support and aid in ambulation. Patients can gradually wean off of these as they are able and develop a steady gait.
- Try and take it easy the first few days following surgery. Walk around the home, to and from the bathroom, up and down stairs, but avoid long distance ambulation (i.e. miles of walking).
 - 1) To ascend stairs: step up first with your unaffected leg. Then bring the affected leg up to the same step. Bring your cane up.
 - 2) To descend stairs: reverse the order. Put your cane down on the lower step. Then bring the affected leg down to that step. Finally, step down with the unaffected leg.
- Walking is truly great therapy for a new knee, as well as climbing stairs. If you have access to a stationary bike this can also be very helpful for rehabilitation. If you don't already have formal physical therapy scheduled the need for this will be assessed at your post operative appointments by Dr. Murar or his Physician Assistant and a referral for physical therapy can be given to you at that time.
- Return to work varies on the patient and the type of job. On average, patients may need anywhere from 1-2 weeks off of work for a safe recovery. Return to heavy labor or excessive ambulatory activities will be determined by Dr. Murar.
- Driving is not recommended for the first 2 weeks following surgery and contraindicated when taking narcotic pain medication.

Dressings

- Dressing should remain in place for 7 days. You can shower with the dressing on as it is waterproof. After 7 days, it is okay to remove the dressing. Leave the steri-strips intact, they will fall off on their own. You can then shower with the dressing off after day 7 but do not vigorously scrub at the incision site.
- Please **DO NOT BATHE, HOTTUB, OR SOAK/SUBMERGE THE INCISION IN WATER** as this can increase risk of infection. Wait one month from surgery or until you are directed to do so.
- Small amounts of bloody drainage, numbness at incision site, swelling, and bruising are normal findings following surgery.
- Do not use bacitracin or any ointments under band-aids.

Medication

- You have been prescribed one of the following **pain medications**:
 - 1) Oxycodone – Please take 1 tab every 4-6 hours as needed for pain.
 - 2) Ultram – Please take 1 tab every 6 hours as needed for breakthrough pain
- In addition to narcotics it is advised that you take scheduled **NSAID (non steroidal anti-inflammatory)** and **Tylenol** (alternating) for the first three days and then as your pain gradually improves you will wean off the narcotics and take NSAID/Tylenol on an as needed basis.
 - 1) **Tylenol (Acetaminophen)** – take no more than 4,000 mg in a 24 hour period. Do not take if you have liver disease.
 - 2) **Ibuprofen (Advil)** – take no more than 2,400 mg in a 24 hour period. Do not take if you have kidney disease, history of ulcers, or GI bleeds.
 - 3) **Naproxen (Aleve)** – if you prefer this over the counter NSAID over Ibuprofen/Advil you may take this instead. **DO NOT TAKE BOTH IBUPROFEN & NAPROXEN** as this increases your risk for toxic side effects. Please take no more than 1,500 mg of Naproxen in a 24 hour period. Do not take if you have kidney disease, history of ulcers, or GI bleeds.
- **ICE** – while you are resting use cryo-cuff or place cold ice packs on your knee for 15-20 minutes at a time. Place a clean, dry towel or pillowcase between your skin and the cold pack. Ice can be used as much as possible for the first 3-4 weeks to help decrease the swelling.
- You have also been given a prescription for **enteric coated Aspirin 325 mg** which you should take once daily with food to decrease the risk of post-operative blood clot formation.
- You may have also been given a prescription for **Senokot** to take 2 tabs daily as needed for constipation. Sedation during surgery, narcotic medications, decreased fluid intake, and decreased activity all contribute to constipation. Do your best to get up and walk as well as take in fluids. If you find that you are still constipated despite the Senokot medication, there are other over the counter medications that you can try: Miralax, Fleet enema, or bisacodyl suppository.
- If you have any side effects (i.e. Nausea, rash, difficulty breathing) from medication discontinue its use and call our office.

Follow Up

- You have likely already been scheduled for your first post-operative visit. If you have not received an appointment please contact the office to schedule an appointment for 10-14 days after your surgery.
- You will be seen by Dr. Murar or his Physician Assistant – Katie Peterson. Your first post-operative visit will include a review of your intra-operative findings, x-rays, and to go over any questions you may have.
- Sutures/staples will also be removed at that time if necessary.
- Call the office immediately if you develop a fever (>101.5), chills, excessive drainage from the incision, calf pain, or persistent lower extremity numbness.
- If you have any questions or concerns please feel free to call the office.

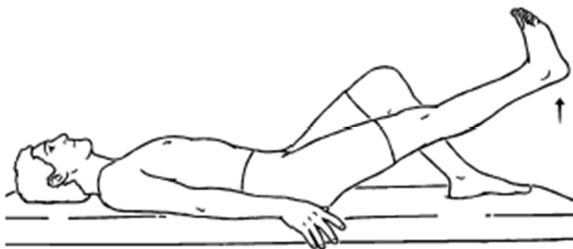
Knee Precautions

- Do not kneel or deep squat
- Do not pivot or twist on your operative leg

Exercises

- You can **perform the following exercises 3-5x per day** to help strengthen your muscles

- 1) Straight leg raises.** While lying on your back, tighten the muscles on the top of your thigh, stiffen your knee (keep knee straight), and raise your surgical leg up (about 12 inches). Try to hold for 5 – 10 seconds. Slowly lower your leg down, rest, and repeat.
- 2) Short Arc Quads.** Lie on your back with a towel rolled under your knee. Slowly straighten your surgical knee by lifting your foot up while keeping your thigh on the roll. Repeat this 10 times.
- 3) Heel Slides.** Lie on your back. Bend your surgical knee by sliding your heel toward your buttocks. Repeat this 10 times. You may use a bed sheet/hand towel/exercise band hooked around your foot to help you slide your heel.



- 4) You can also try exercises 2 and 3 while sitting in a chair.** To work on knee flexion (or bending your knee), sit with a towel under your surgical leg. Your feet should be flat on the floor. Slide surgical foot back, bending at the knee. Hold for 5 seconds, then slide your foot forward. Repeat 10 times. To work on knee extension (or straightening your knee), sit on chair and try to lift up your surgical foot to straighten your leg. Repeat 10 times.

