

TOTAL KNEE EXPECTATIONS



First of all,

Thank you for allowing us to take care of your knee.

STAGE I: FIRST 6 WEEKS



The first phase is about the patient learning to reconnect with their new knee.

Physical therapy is important and the rehabilitation aspect for the first 6 weeks is the most important to regain your mobility.

During this time, it can be very difficult to actually hurt or damage your knee and new implant. But the effort required to regain your range of motion, does cause the knee to hurt. This is okay!

You need to push through this and exercise will make it easier on the healing process.

Stopping because the knee hurts will result in stiffness and a painful knee.

You **MUST** push beyond the comfort zone from day one.

Tips



Learn to relax your muscles, which makes the prosthesis and progress easier for your knee.

- **Ice bag:** Use a freezer ziplock bag with 1/3 rubbing alcohol and 2/3 water, then reinforced with a second freezer bag. Place her in the freezer overnight. Is a very useful and reusable icepack that molds around the knee.
 - Ice as needed for 20 minutes several times a day at least 3 hours in between each ice treatment.
- **Massage:** Massage the tissue around the knee, this will soften up the skin and desensitize the nerves.
- **Ted hose: Wear them for the first 2 weeks it is important to decrease swelling. It is most important to wear them during the day, optional at night.**
- **My knee is not straight** – Knee extension (getting your knee straight) is the most important motion for walking normally. The time to get your knee straight is typically shorter than getting your knee bent. To help you achieve your goal, please do the following:
 - (1)Place 5 lbs. of rice (or a 5 lbs ankle weight) in an old pillow case and heat it in the microwave for about 10 minutes (DO NOT MICROWAVE the ankle weight.)
 - (2)Place a warm, wet washcloth over your knee
 - (3)Sit at the edge of a chair and support your heel on a step stool, ottoman, or coffee table
 - (4)Place the warm pillowcase of rice / ankle weight on the knee and let gravity stretch the knee
 - (5)Start at 2-3 minutes per session, for 5 times per day
 - (6)Increase the time as you can tolerate. (You can do this up to 15-30 min every 1-2 hrs, as needed.)

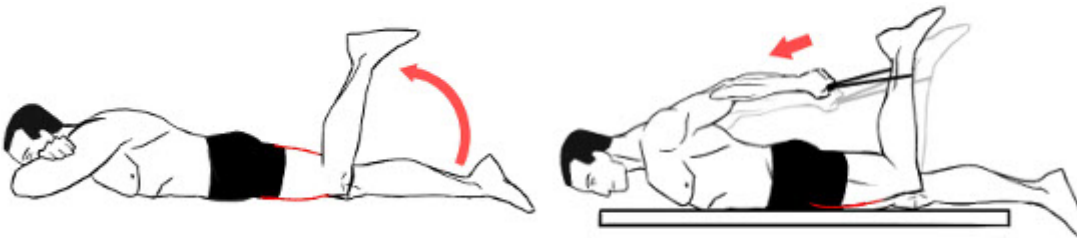


Another option to get your knee straight is “PRONE HANGS.”

Stretch your knee straight (“prone hangs”) several times a day. Start with 2-3 min. up to 30 minutes 5 times a day. The leg should be supported just above the kneecap so the knee can hang straight. You can use an ankle weight as a counter weight.



Bend your knee upwards (“prone flexion”) often while you are performing prone hangs to break up the stretching, and to help regain the flexion in the knee. Perform at least 10 repetitions at a time, at least 3 times/day. You may use a towel or band around the ankle to help bend further.



Physical therapy



It is important to have supervised physical therapy. But it is important to follow the instructions the physical therapist provides to obtain optimum results.

- It is important for the physical therapy to start as soon as possible after surgery.
- **Remember, the patient is responsible for scheduling Physical Therapy visits with the information and prescription provided by our office.**

Pain medication



Use the pain medication as needed.

Most of the time over-the-counter medication is enough to control the pain. Remember that using narcotic medication has multiple side effects, like constipation, nausea, drowsiness and bloating.

The sooner you wean yourself off the narcotic medications the better for you.

But not at the expense of being miserable with pain.

- At night for the first 4-6 weeks, sleeping may be difficult because the knee does not like to be in one position for too long. It will get better, it just takes time.
- Do not take daytime naps.
- Use Benadryl at night 25-50 mg at bedtime and or a pain pill.

STAGE II :STRENGTHENING AND ENDURANCE

This stage is different for each patient. But you will know when you have reached this stage, when you are sleeping better and off pain medication for the most part.

You may need an occasional pain medication and that is okay.

Swelling is improving but still present at some degree.

Exercising the knee involves you doing exercises that you enjoy.

For example cycling, treadmill, walking, hiking, swimming, weights and other activities. If you golf, start with chipping and putting is okay. Your new knee may not be ready to do a full swing but realistically the knee will let you know if you did too much.

The goal is to continue stretching and not lose the range of motion that you have achieved.

110° is the goal for flexion which allows you to do your activities of daily living. Anything past 110° is a plus.

But remember if your knee was stiff before surgery it may be stiff after surgery and you may lose a few degrees but if you work hard at regaining your range of motion then you will be very satisfied with your outcome.

At 2.5 months from surgery we will obtain an x-ray of the prosthesis. If there is good healing of the implant and your mobility has been regained at this time, you may start your physical activity as tolerated without any restrictions.

Exercising the knee involves you doing exercises that you enjoy. For example cycling, treadmill, walking, hiking, swimming, weights and other activities. Your new knee may not be ready to do all of your activities but realistically the knee will let you know if you did too much.

Stage III: Final phase



To reach this phase can take up to a year. The knee continues to heal up to the 1st year from surgery. Millions of patients have had their knee replaced. They have gone through this process before and have achieved excellent results.

- During this stage, healing continues and at this point it is safe to do all your activities as tolerated. You will know when you have reached this final phase.
- However, remember it is not your 30-year-old knee it is an artificial knee and it will remind you from time to time.
- Also, there may or may not be a persistent click in the knee and this is perfectly normal. That is because there is metal and plastic inside your knee.
- Kneeling: If you can tolerate kneeling on your knee it is ok to do so.

At this stage you can return to full activities of playing golf, tennis, pickle ball, hiking and swimming. These activities are all perfectly acceptable and the main reason why you probably had your knee replaced. Exercise is encouraged!

Frequently asked questions after surgery

How long I have to wear the wide surgical stockings?

The surgical stockings must be worn during the day for 2 weeks after surgery. They may be removed at night while you sleep and/or for showers. However, the stockings can help with swelling control and can be worn longer if you wish to minimize swelling of the operative leg.

When he can shower?

On the third day following surgery. Surgical dressing is waterproof. You do not need to use any special soap. Pat dry incision after your dressing is removed.

When can I remove surgical dressing?

Surgical dressing needs to be removed 1 week after surgery.

How long will I be using the walker and a cane?

Patient's typically uses a walker for 1-2 weeks after surgery and then progress to a cane. Your physical therapist will provide you and make that decision when to make those transitions.

How long do I have to take aspirin?

If you are taking Aspirin to thin your blood, please continue at the twice per day dose for a full 30 days from surgery. At that time, you may go back on your normal Aspirin dose, or discontinue the Aspirin if you were not taking Aspirin before surgery.

How long will I be going to physical therapy?

Patient will participate in outpatient physical therapy depending on the surgery, a prescription will be provided for 2-3 visits for 6-8 weeks. Some patients may need more or less depending on their recovery.

When can I return to work?

Returning to work is dependent on the type of work that you do. It is important that you obtained proper time off from work to allow for rehabilitation after surgery. We ask patients to take 3 months of FMLA. Patient's may or may not need the full amount and return to work to full duty can be discussed during postoperative follow-up visits.

How do I get my pain medications refilled?

Pain medications can be refilled through our office during your postoperative period. Please call our office between Monday through Thursday, during working hours and all prescription medications will be done electronically (except for those needed to be taken to a military facility). We suggest you call when you start running low (10 pills or less). Do not await until the last minute to refill your medications. You may need to wait 24 hours for electronic prescriptions to be filled by your pharmacy.

Refills will not be available on Fridays or weekends.

Is it normal to have difficulty sleeping after surgery?

Yes, a significant amount of patients have difficulty sleeping after surgery. Especially knee replacement. Most patients average 2-4 hours of sleep at a time. When you wake up at night, consider taking pain medication and doing a short walk to decrease the stiffness. Try Benadryl 25 or 50 mg to help with sleep.

Is it normal to have poor appetite after surgery?

Yes, it is common and mostly due to a combination of medications and pain. It is important that you eat a healthy diet, high in protein and/or well-balanced meals. You must ensure that you get the proper amount of healthy calories on a daily bases after surgery.

When can I resume sexual activities?

You may resume activities when you feel well enough, and it makes sense to you as the patient.

When can I return to the gym, recreational and/or outdoor activities?

Approximately 3–6 weeks after surgery, depending on the type of activity. Stationary / recumbent bike and pool activities after 2 weeks as long as the incision is completely dry, is safe. It is safe to do all the exercises provided by physical therapy. At 6-8 weeks, most patients can return to their normal activities and this can be discussed during your second post operative office visit.

Will I set off metal detectors?

Yes and no, most metal detectors do not go off. But in some areas, security has different parameters on their metal detection. It would be a good idea, to let security know you have a new prosthesis and/or give yourself enough time to travel through security just in case. You do not need an implant ID card.

Do I need a joint replacement card to travel? – No. The TSA does not change the way you are screened with or without a joint replacement card. For more information, please follow the Disabilities and Medical Conditions link at www.tsa.gov.

What can I put on my surgical incision?

Do not use any scented lotions until the wound has healed. You may use vitamin E oil / lotion or any product for minimizing scars, i.e. Mederma, and/or Scar therapy silicone bandages sold over-the-counter at the pharmacy.

Remember to use sunscreen on your incision for the first several months after surgery.

When can I drive? – Yes, most patients feel comfortable driving at around 2 weeks. Please no driving while on narcotics.

My knee is still.... – Typical concerns at this time are continued stiffness, warmth, swelling, or night pain. These are all completely normal, and part of the healing process. Remember, maximal healing from knee replacement typically takes **1 full year**. The concerns you have now should resolve by then.

My knee feels “numb” on the outside – This is a normal sensation as the nerve that gives sensation to the skin along the outside of the knee was disturbed with surgery. This area may also burn as the nerve attempts to regenerate. Nerve regeneration is a very slow process, with maximal improvement coming by 1-2 years.

Can I kneel on my new knee? – Yes. Mechanically, kneeling on your knee does not harm the implants. However, most people find it “uncomfortable” to kneel on their knee replacement. With repeat practice, this should not be an issue for you.

Do I need a joint replacement card to travel? – No. The TSA does not change the way you are screened with or without a joint replacement card. For more information, please follow the Disabilities and Medical Conditions link at www.tsa.gov.

Do I need antibiotics for routine dental cleanings? – No. The January 2015 American Dental Association clinical practice guideline states, “In general, for patients with prosthetic joint implants, prophylactic antibiotics are not recommended prior to dental procedures to prevent prosthetic joint infection.” For more information, please search www.ada.org.

Are there any restrictions on my knee replacement? – No. Please use good common sense, but there is no specific activity you need to avoid. If your knee hurts too much, you are simply doing too much. With normal activities, the plastic used in your knee replacement should last about 30 years. We will check your new knee with periodic x-rays to monitor for wear or mechanical issues.

Please enjoy your new knee, and you can also visit Dr. Petrow's homepage at www.TucsonRoboticJointReplacement.com for additional information.

PATIENT PRE-OP CHECKLIST

SCHEDULING DAY

- ☐ Pick surgery buddy
- ☐ Get surgery handbook.
- ☐ Get pre-op orders, i.e. labs, PT, CT, etc.
- ☐ Confirm appointments, schedules, etc.

3 WEEKS BEFORE SURGERY

- ☐ Get pre-op labs done.
- ☐ Get CT done.
- ☐ Get PT scheduled after surgery.
- ☐ Have surgery buddy help with organizing home for after surgery. (Sleeping area, kitchen, food, rugs, pets, etc)
- ☐ Have a back up plan if surgery buddy is not available.

DAY BEFORE SURGERY

- ☐ Make a list of the specific items you want to take with you.
- ☐ Have list of medications, medical lists (some patients have personal medical history forms). Bring to pre-op.
- ☐ Pack electronics, toiletries needed, chargers for phone / tablet, etc.

