THE ORTHOPEDIC CENTER OF ST. LOUIS | Dr. Charles S. Grimshaw, M.D.
JOINT RECONSTRUCTION & SPORTS MEDICINE

POST-OPERATIVE INSTRUCTIONS
TOTAL KNEE REPLACEMENT

MEDICATION

- One of two pain medications, Norco (hydrocodone), or Percocet (oxycodone) will be prescribed to you. Take as instructed and as needed.
    - Pain medication may cause constipation. You may take an over the counter stool softener (Colace, Senekot, etc) to help prevent this problem.
    - You should take these medicines with food or they may nauseate you.
    - You may not drive or operate heavy equipment while on narcotics
    - Pain medication is refilled on an individual basis and only during office hours.
- If you have a nerve block, begin taking the pills as you feel your sensation returning to prevent a sudden onset of extreme pain (typically 10-12 hours after your surgery). **DO NOT WAIT UNTIL THE BLOCK COMPLETELEY WEARS OFF.**
    - Most patients find it helpful to take two pills 10-12 hours after surgery and another two every four hours the first night after surgery, decreasing the amount as you feel the pain improving.
    - The first 48 hours are typically the worst for pain and gradually improves.
- If prescribed Lovenox or Xarleto for prevention of blood clots, begin the day AFTER surgery and finish all injections or pills.
- Take one regular aspirin (325 mg) twice a day for 30 days unless you have been prescribed Xarelto, Lovenox, are on another blood thinner, or have a history of stomach ulcers.
- **Resume all home medications unless otherwise instructed.**
- Call immediately to the office (314-336-2555) if you are having an adverse reaction to the medicine.

WOUND CARE

- Do not remove your bandages. Call the office if there is drainage or an issue with your bandages.
- Incisions may not get wet. NO submersion of wounds (bath, hot tub, pool) until a minimum of 2 weeks after surgery.
- Do not shower or bathe. Pat dry if knee gets wet.

WALKER

- You may place full weight on the involved leg unless instructed otherwise after surgery to help with balance and stability.

- A walker will be needed initially for comfort unless instructed otherwise until you can walk with a **normal gait** (heel to toe walk)**.**

EXERCISE

- Following surgery three main goals exist:
    1. Full knee extension
    2. Quadriceps contraction and activation
    3. Control of pain and swelling.
- To help gain full knee extension, place a small rolled up towel under your ankle and push back of knee to touch the floor by contracting your quadriceps muscle.
- DO NOT put pillows under the knee while you sleep.
- Elevate your leg for several days if you are sitting to help with swelling.
- Being up and around after surgery will help diminish the risk of blood clots.
- Therapy is a key aspect of recovery and should start within 1-2 days after surgery.

CPM

- The motion machine should be used for 4-6 hours a day in 1-2 hour increments as tolerated for 2-3 weeks.
- Start at 0-50 degrees and increase 5-10 degrees as tolerated unless instructed otherwise. If this becomes too painful, you may decrease the flexion to a tolerated degree.
- The machine is NOT A SUBSTITUTE for physical therapy exercises
- DO NOT sleep in the machine.

COLD THERAPY

- Ice should be used for comfort and swelling. Use it at least 20 minutes at a time. Many patients use it an hour on then an hour off while awake for the first day or two.
- **Never apply directly to exposed skin. Place a dish-towel or t-shirt between your skin and the ice.**
- After the two days, use 20-30 minutes every 3-4 hours if possible.
- A simple bag of frozen peas may be used as an inexpensive ice pack. Buy several bags of peas, place in a gallon size zip-lock bag making them about an inch thick and removing as much air as possible. Return to freezer, lying flat when done.

BRUISING

- The lower leg may become swollen and bruised, which is normal and is from the fluid and blood in the knee moving down the leg. It should resolve in 10-14 days.
- **<u>If you experience severe calf pain or swelling, call the office immediately</u>**.

EMERGENCIES

- If you have an emergency contact Dr. Grimshaw's office at 314-336-2555.
- Contact the office if you notice any of the following:
    - Uncontrolled nausea or vomiting, reaction to medication, inability to urinate, fever greater than 101.5 (low grade fevers 1-2 days after surgery are normal), severe pain not relieved by pain medication, redness or continued drainage around incisions (a small amount is normal), calf pain or severe swelling.

- **If you are having chest pain or difficulty breathing, call 911 or go to the closest emergency room.**

DRIVING

- You may drive when off all narcotics and feel you can adequately react. You must be able to brake firmly and comfortably.

FOLLOW UP APPOINTMENT

- Your first post-op visit will be 1-2 days after surgery. This should be scheduled already.
- **If you have any questions, please call 314-336-2555**