

SVO

SILICON VALLEY
ORTHOPAEDICS

Postoperative Instructions: Unilateral Knee Arthroplasty (U.K.A.) Total Knee Arthroplasty (T.K.A.)

❖ GENERAL

- Your surgery was performed through an incision at the front of your knee. It is normal to experience some sharp pain in the front of the knee when working on moving your knee. You are not doing any damage by moving the knee and feeling this pain.

❖ DIET

- Begin with clear liquids and light foods (jellos, soups, etc.)
- Progress to your normal diet if you are not nauseated.
- If you develop nausea you can try over the counter medications such as Dramamine, Bonine, or Nauzene.

❖ WOUND CARE

- Maintain your operative dressing, loosen bandage if swelling of the foot and ankle occurs, or wrap your foot and ankle with an ACE wrap.
- Remove topical ace wrap and gauze dressing post op day **three** **-KEEP REMAINING THICK BROWN BANDAGE DIRECTLY OVER THE WOUND ON**. You may now shower and get surgical site wet but do not submerge operative site (i.e. bath/pool) and do not scrub over brown thick film bandage. Simply pat dry after shower.
- If you note increasing drainage on the gauze, increased redness around the wound (spreading), or milky drainage from the wound, please call the office.

❖ MEDICATIONS

- The incisions are injected with a medication that makes the area numb; however, this will wear off in 8-12 hours. We recommend that you start pain medications when you get home so that it's in your system before this wears off.
- Most patients will require narcotic pain medications for a short period of time (max. 6 weeks)- this must only be taken as prescribed/written on the bottle.
- Common side effects of the pain medication are nausea, drowsiness, and constipation- to decrease the side effects, take medication with food- if constipation occurs, consider taking an over-the-counter laxative.
- If you are having problems with nausea and vomiting, please contact the office at (510) 739-6520 and speak with a staff member about possible medication changes.
- **Do not** drive a car or operate machinery while taking the narcotic medication.

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- To prevent blood clots, make sure to take your Aspirin 325 mg twice a day for the first month as prescribed.

❖ ACTIVITY

- Elevate the operative leg ABOVE chest level whenever possible to decrease swelling. This involves lying completely flat with the leg elevated. The first 48 hours is a balance between mobilization (which is encouraged) and elevation (to be done whenever possible).
- **DO NOT PLACE A PILLOW UNDER THE BACK OF YOUR KNEE** (i.e. do not maintain knee in a flexed or bent position). Pillows should be under the ankle which will keep the knee straight when elevating. You will feel a pull at the back of the knee when you perform this, this is normal.
- You can put full weight on your leg as can tolerate. Use the walker for support at the least for the first couple days after surgery then transition to walk without the walker as soon as you believe you can safely do so.
- Do not engage in activities which increase knee pain/swelling (prolonged periods of standing or walking) over the first 7-10 days following surgery.
- Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks.
- NO driving until instructed otherwise by physician and no driving while taking narcotic pain medications.
- May return to sedentary work ONLY 3-4 days after surgery, if pain is tolerable. If any work notes are needed, please contact Becca or your designated clinic (U.S. Healthworks).

❖ ICE THERAPY

- Begin immediately after surgery.
- Use ice machine or ice (if machine not prescribed) every 2 hours for 20 minutes daily until your first post-operative visit. Icing is a perfect time to also perform elevation.

❖ Physical Therapy

- ☐ **Please make sure both home physical therapy and outpatient physical therapy appointments are confirmed and pre-scheduled before surgery date.** Home physical therapy should be arranged to start post op day 1. The goal is to see home therapist three times a week for the first two weeks. Then outpatient physical therapy will start post op week 3 for twice a week for 6 weeks initially.

❖ EXERCISE

- **IMMEDIATELY AFTER SURGERY:** While you wait to meet your home therapist you can start straight leg raises, quad sets and ankle pumps directly after your surgery per tolerance. Try to do sets of 10-30 three times a day. (See demonstrations at the end of packet)

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- You cannot do too many ankle pumps (another good reminder to do them during commercials on TV).
- Discomfort and knee stiffness is normal for a few days following the surgery.

❖ Dental Work

- Please remember to refrain from any dental work for the first 3 months after your surgery. After the 3 month marker you can resume dental visits as needed.

❖ Travel

- Please discuss any travel plans soon after surgery with your surgeon. Typically we prefer you postpone any domestic flights for 2 weeks post op and any international flights for 3 months post op.

❖ EMERGENCIES**

- Contact Becca (cell phone: 408-707-0613) if any of the following are present:
 - Painful swelling or numbness
 - Unrelenting pain
 - Fever greater than 101.5° at least 48 hours after surgery or chills
 - Redness that is spreading around incisions
 - Continuous drainage or bleeding from incision (a small amount is expected)
 - Excessive nausea/vomiting
 - Difficulty breathing/chest pain- Call 911 or go to the nearest emergency room.
- **If you have an emergency after hours or on the weekend, contact Becca on her cell number. She can connect you with me.
- ***Do NOT call the hospital or surgery center.**
- **If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

❖ FOLLOW-UP CARE/QUESTIONS

- You will receive a call within 48 hours of your surgery to check on your status.
- If you do not already have a postoperative appointment scheduled, please contact the office during normal business hours (8:00am-5:00pm) and ask to schedule one week postop for Dr. Reynolds patients and two weeks post op for Dr. Gay patients.



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Recommended Home Exercises:

I. Ankle Pumps

II. Quad Sets

III. Straight Leg Raises*

Stop any exercise that causes sharp or increased knee pain, dizziness, shortness of breath, or chest pain

Doing these exercises regularly after knee surgery may help speed up your recovery.

I. Ankle Pumps:

Ankle pumps can help prevent circulation problems, such as blood clots or ankle swelling. We recommend ankle pumps on both your legs unless told otherwise.

How to start:

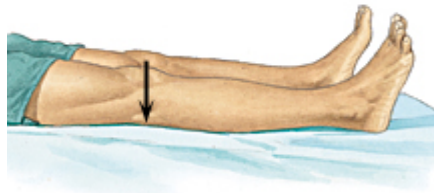
- 1) To perform ankle pumps start by pointing and flexing both your feet.
- 2) Then, follow this with “drawing” large circles or tracing the alphabet letters in the air with your big toe. This will count as one set.
- 3) Keep your knee and leg as still as possible during this exercise.
- 4) Start by doing 10-30 reps three times a day (this equals = 3 **sets**). As you get stronger, slowly increase the number of reps and sets. You may do as many as six sets per day, but only if comfortable.



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II. Quad Sets:



- 1) Lie on your back in bed, legs straight.
- 2) Tighten the muscle at the front of the thigh (quad) as you press the back of your knee down toward the bed. Hold for a few seconds. Then relax the leg.
- 3) Be sure the quad muscle tightens during this exercise.
- 4) Start by doing 10-30 reps three times a day (this equals = 3 **sets**). As you get stronger, slowly increase the number of reps and sets. You may do as many as six sets per day, but only if comfortable.

III. Straight Leg Raises*:



*If you have had ACL surgery, ONLY perform "Straight Leg Raises" when cleared by a healthcare provider (MD, NP)

- 1) Lie on your back in bed. Bend your **NON-surgical** leg. Keep the surgical leg straight and flat on the bed. **IN ADDITION**, keep leg brace on if you have been given one post-surgery.
- 2) Tighten the muscle at the front of the thigh, your quad, to prepare to lift the leg.
- 3) Lift your straight leg as high as you comfortably can, but not higher than 12 inches. Hold for a few seconds. Then slowly lower the leg.
- 4) Be sure the quad muscle tightens during this exercise.
- 5) Start by doing 10-30 reps three times a day (this equals = 3 **sets**). As you get stronger, slowly increase the number of reps and sets. You may do as many as six sets per day, but only if comfortable.