



THUNDER BASIN ORTHOPAEDICS  
— AND SPORTS MEDICINE —

# Total Knee Replacement

## Indications for total knee replacement:

Most commonly, a total knee replacement procedure is indicated for patients with advanced arthritis who have failed conservative treatments. Arthritis is a condition where the cartilage, that lines and protects the joint surfaces, is worn down due to various reasons. Patients may experience pain, swelling, stiffness, and decreased range of motion of the joint. A trial of conservative treatments, such as oral anti-inflammatory medications, joint injections, activity modification, and bracing may help these symptoms. If conservative treatments do not control arthritis symptoms, you may be a candidate for a knee replacement procedure. During a knee replacement procedure, your surgeon will remove parts of your damaged knee joint and replace them with an implant designed to function like a normal, healthy knee.

## Pre-Operative Care:

- Medical clearance: this will be determined by your surgeon depending on your age and medical history. You may need routine blood work, tests, and/or an evaluation by your primary care provider depending on your age and medical history.
- Medications: stop taking all anti-inflammatory medications (NSAIDS) and OTC herbal supplements/vitamins 2 weeks prior to your surgery. These medications thin your blood and make it difficult for your surgeon to perform the surgery. All other medications will be reviewed by the surgical facility.
- Do not eat/drink after midnight. A surgical nurse will review your home medications with you and which medications you can take the morning of surgery with a small sip of water.

- Bathing before procedure: you will be given antibacterial soap to clean the surgical area 2 days prior to surgery. Specific instructions will be provided.
- Overall health – It is important to be in the best possible overall health to promote the best possible surgical experience. Increasing upper body strength is important to help you maneuver a walker or crutches after surgery. Strengthening the lower body to increase leg strength before surgery can reduce recovery time.
- Get in the mindset that it will take at least 6 weeks after surgery to start feeling back to normal again, but can take a full year to recover. Planning tips on making the recovery phase easier:
  - Prepare friends/family/hired help ahead of time to help you during your recovery phase (i.e. someone to take care of pets).
  - Time off work approved
  - Talk with people who have had this surgery
  - Make accommodations to your home to make it easier to walk with crutches/walker (i.e. move rugs or clutter out of the walk way)
  - Make freezer meals
  - Buy nonskid socks or nonslip foot wear that is easy to put on (i.e. Velcro shoes)
- Expect to go to outpatient Physical Therapy once you are discharged from the hospital. It may be helpful to line this up ahead of time.

## Post-Operative Care:

- Most patients stay 1 night in the hospital. If there is a medical reason for you to stay longer you, you may stay up to 2-3 days total after your surgery.
- Pain medication: you will typically be given a prescription anti-inflammatory medication for your baseline pain medication. You may also be given a stronger pain medication to take for breakthrough pain that the anti-inflammatory pain medication does not control.
  - Our goal at Thunder Basin Orthopaedics is to make you comfortable, but we do not expect you to be pain free.
  - Our goal is to safely taper you off of the narcotic pain medication so you do not develop unwanted side effects from the medication.

- Dressing: Leave bandage on for 72 hours after surgery, then may remove bandage and shower as normal. No soaking of the incision for 4 weeks after surgery. Leave steri-strips in place until they come off on their own.
- Ice: you may be given a cryocuff ice machine after surgery. Icing is very important to decrease swelling and pain after surgery. Leave ice on for 20 minutes at a time, and ice several times a day for the first couple of weeks after surgery.
- Weight bearing: most patients are able to bear weight as tolerated, but typically use an assistive device such as a walker for a period of time after surgery.
- Physical therapy: vital for the success of your operation. You will go to physical therapy 3 times/week for 12-16 weeks
  - Your surgeon will give you a handout of a home exercise program to do on the days that you do not go to physical therapy

## Things to watch out for:

- Blood clots: common symptoms include calf pain and swelling. With any development of chest pain or shortness of breath, go to the emergency room immediately.
  - Preventative measures: You will be required to take a blood thinning medication (i.e. xarelto, aspirin, lovenox) directed by your surgeon. Elevating the extremity, wear compression stockings, portable calf massager (SCDs), ankle pump exercises, early walking
- Infection: common symptoms include redness around incision, cloudy drainage from incision, a marked increase in pain around incision, fevers/chills.
  - Preventative measures: you will receive IV antibiotics during your hospital stay, wash hands, keep incision area clean and dry, do not soak incision until it is completely healed
  - Dental procedures: you will be required to take an antibiotic medication prior to any dental procedures for the rest of your lifetime to minimize risk of an infection in your joint replacement
- Constipation: very common side effect in the early post-operative period.
  - Narcotic pain medications are the main culprit for causing constipation. The goal is to taper off of these medications as quickly as possible.

- Drink lots of water. Some people find prune juice helpful.
- May try an OTC stool softener recommended by your pharmacist (i.e. Colace)

**Please refer to our attached frequently asked questions list. If your question has not been answered, please call Thunder Basin Orthopaedics at (307) 682-6222 – Gillette or (307) 358-6200 – Douglas.**

**Please call us at the above number if you experience severe pain that is not relieved by your medicine or if you experience a temperature over 101 degrees F, redness/swelling in your thigh or calf.**