



## TOTAL KNEE ARTHROPLASTY

- **It is normal for the knee to be swollen**, numb, ache, and feel warmer than the other knee. You may hear or feel clicking and popping. These feelings may last 6 months before they gradually go away. Spend time each day lying on your bed with your legs elevated 10-15" above your heart to help decrease the swelling.
- **You will feel more tired** and may need to nap during the day. You may have problems sleeping during the night. The abnormal sleep and wake cycles return to normal after 1-2 months.
- **Pain from arthritis goes away quickly**. The pain that you have now is because of the surgery. This will continue to improve during your rehab.
- **Physical Therapy is important for regaining strength and motion**. Home PT is helpful for the first 2 weeks. However, it is important that you start outpatient therapy as soon as possible. You will be given an outpatient physical therapy prescription and may transition to this setting sooner if you desire.
- You may "set off" metal detectors in airports, federal buildings, etc. No documentation is needed.
- **If you go to the dentist or plan to have major or minor surgery:**
  - We will prescribe an appropriate antibiotic that will be taken 1 hour prior to procedure.
  - These precautions are currently necessary for 2 years following your knee replacement.
  - Antibiotics are not needed for colonoscopy.
- **Feel free to resume activities** as tolerated with your assistive device.
  - It is NOT recommended that you run or jump on your new knee.
  - You will be able to kneel eventually.
  - Do not resume driving for 4-6 weeks after surgery. You cannot drive while taking narcotic pain medicines.
- **You may travel locally** by car at any time (less than 30 min of travel).
- **You may travel long distance by car or air** after 4-6 weeks as long as you get out of your seat every 2 hours and pump your ankles. Report any signs of calf pain or swelling to a local emergency room (wherever you are). Traveling before 4 weeks is occasionally necessary so let us know if you need to travel so we can prescribe an appropriate blood thinner.



**1. Medications:**

**A. Blood thinners:**

- \_\_\_\_\_ Aspirin 325mg once a day X 4 weeks
- \_\_\_\_\_ Xarelto 10mg ONCE daily 10 days

**B. Pain Medication:**

- \_\_\_\_\_ Percocet 5/325mg (oxycodone 5mg/acetaminophen 325mg)
- \_\_\_\_\_ Ibuprofen 800mg 3 times a day, not to exceed 2,400mg a day
- \_\_\_\_\_ Tylenol 1000mg 2 times a day, not to exceed 3,200mg in a day
- Other:

**\*\*DO NOT TAKE PERCO CET AND TYLENOL IN COMBINATION\*\***

**\*\*\*\* Please call our office at 907-771-3500 before you run out. Allow 48-72 hour notice as per our office policy. \*\*\*\***

**C. Laxatives / Stool Softeners:**

Choices are:

- MiraLAX 17g (1 TBSP) in 8 oz water per day (OTC)
- Senokot 2 tabs once per day (OTC)
- Colace 100mg 1 tab once per day (OTC)
- Milk of Magnesia 30ml once per day (OTC)
- Dulcolax suppository once per day

**2. Wound Care**

- A. Dressing changes and duration of coverage will be decided by your surgeon. Generally, you should leave bandages on until first postop appt.
- B. Continue to wear compression stockings x 2 weeks.

**3. Activity**

- A. Perform simple ankle pumps to promote circulation.
- B. Walk as much as tolerated increasing a little bit every day.
- C. Spend time lying flat on your bed with your legs elevated 10-15" above your heart to help decrease the swelling.