



## ALASKA ORTHOPEDIC SPECIALISTS

Alaska Orthopedic Specialists, LLC  
4015 Lake Otis Parkway, Suite 201  
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Phone (907) 771-3500 | Fax (907) 771-3550  
[www.akortho.com](http://www.akortho.com)

### UNICONDYLAR KNEE ARTHROPLASTY

- For the first 16-24 hours your knee will be somewhat numb from the pain block that the anesthesiologist gave you. However, it may not get rid of all the pain. Begin using your pain pills the evening of surgery if you have any pain. Some even suggest if you have no pain to still take one or two before going to bed. This is in case the block wears off during the night.
- Ice your knee at least 1 out of every 3 hours- 20min at a time. In the initial few weeks after surgery, it's almost impossible to ice your knee too much. However, ensure that there is a barrier (a towel or ace wrap) between the ice pack and your skin to prevent frostbite.
- It is important that you not be too aggressive with range of motion for the first two weeks. "No pain, no gain" does not apply right after surgery! Physical therapy 5 days a week is not better than the more realistic recommendations that we have listed below.
- Formalized physical therapy usually does not begin in the first week following surgery. This allows the skin to begin healing before the physical therapist begin manipulation.
- Physical therapy will last approximately 6-8 weeks, in some cases up to 3 months. Much of therapy for a partial knee replacement is simply walking.
- You will likely 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.
- A responsible adult must accompany you after discharge and we recommend that someone stay with you for the first 24 hours. Be aware of the nerve block which will cause altered/ decreased sensation. Wear the knee immobilizer for the first 24 hours to help ambulate while the block is active. Once sensation returns you should discontinue the immobilizer.



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## 1. Medications:

### A. Blood thinners:

- Aspirin 325mg once a day x 4 weeks
- Xarelto 10mg ONCE daily x 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 hours 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.