

Knee Replacement

Lindsay Remy, MD | Kingsport, TN
423.578.1570 | LindsayRemyMD.com

Your surgery involved the following:

- ☐ Total knee replacement
- ☐ Partial knee replacement
- ☐ Other secondary procedures:

Physical therapy

Begin physical therapy immediately! Your therapy is the most important part of achieving a successful outcome.

Activity

Weight bearing:

- ☐ **YOU MAY BEAR WEIGHT AS TOLERATED** on operative leg. Use a walker to assist with walking at first. Wean per your physical therapist's instructions.
- ☐ **DO NOT BEAR ANY WEIGHT ON YOUR OPERATIVE LEG.** Progression to increase weight-bearing status will be done at the instruction of Dr. Remy during your recovery from surgery.

Post Op Care

Ice: Apply an ice bag to the knee in a waterproof bag for 20 minutes on, 20 minutes off. Do not place ice directly on the skin. Direct contact for a prolonged period may cause a burn to the skin. **If you have a cryotherapy unit, use as often as possible for the first 48 hours then as needed.** This is just cold water and can safely be run continuously. I recommend still avoiding direct contact with your skin and checking your skin every few hours and taking a break if very red or irritated.

Elevation: Elevate the operative leg above chest level whenever possible to decrease swelling. Elevate from the ankle so that the knee stays completely straight.

Pillows: Do not place pillows under knees (i.e. do not maintain knee in a flexed or bent position), but rather place pillows under foot/ankle. This keeps the knee completely straight.

Activities: Do not engage in prolonged periods of standing or walking right after surgery. Avoid long periods of sitting without the leg elevated. Avoid long distance traveling for 2 weeks because of blood clot risk.

Driving: **NO driving** until you are no longer taking narcotic pain medicine and adequate range of motion has been gained. You can speak with Dr. Remy and your physical therapist about when you can safely resume driving.

Dressing changes and incision care

You may remove the Ace wrap and padding on **post-op day 3**. Underneath you will find a Prineo gauze (this is stuck to you with glue). This is reinforcing the absorbable sutures underneath, so please try to leave it intact. As long as this is on, it is okay to shower.

I prefer you continue using some form of compression over the knee (Ace wrap, knee sleeve, thigh high TED hose, etc) until all swelling resolves.

Avoid being under water (baths, pools, etc) for the first 4 weeks.

Do NOT use *any* ointments/creams/lotions on your incisions for the first 4 weeks following surgery. If the incisions have healed with no scabs at that time, you can begin to apply some vitamin E or scar cream. Silicone scar sheets can also be helpful to minimize scarring. You should keep your incisions protected from direct sunlight for the first year with clothing or band-aids to prevent the scars from becoming dark and thickened.

Medication

Pain medications: A short-acting narcotic pain medication such as Percocet is prescribed following surgery. Narcotic medicines may make you drowsy and/or dizzy, therefore driving a car or operating machinery is NOT ALLOWED UNDER ANY CIRCUMSTANCE. **Narcotic medicines are addictive and should be taken in the lowest dose and shortest duration needed to control your pain.** Tennessee law now severely limits the amount of pain medications that can be prescribed at surgery. Refills are rarely needed but according to new TN law, you now must be seen in person before a refill can be prescribed. You also must be seen in person in order for the type of prescription medicine to be changed.

Aspirin: It is recommended that you take a low dose aspirin daily (81mg) twice daily for 2 weeks to minimize the risk of blood clots. If you have ever had a blood clot (DVT or PE) or have a family history that puts you at high risk, please notify Dr. Remy as she may choose to prescribe a different blood thinner.

Follow-up care

Your follow-up information is as follows:

First Physical Therapy Appointment:

Post Op Appointment:

When to call your surgeon

Call the office for any concern, especially those below. If after hours, the office number will connect you to an on call provider. For emergent symptoms, please call 911 or go directly to the nearest ER.

- Fever > 101.5°F
- Increasing leg or calf pain
- Increasing swelling in calf or foot
- Hives, itching, rashes
- Shortness of breath or chest pain
- Vomiting that lasts more than 8 to 12 hours following surgery
- Drainage from incision sites that continues for more than 5 days follow surgery.

SPECIAL INSTRUCTIONS

☐ Please follow these instructions