Instructions Following Knee Replacement

1. When to contact Dr. Faulkner's team:

 Excessive bleeding; unrelenting pain; excessive wound drainage (mild drainage or spotting is normal for 3-4 days postop); persistent numbness or tingling in operative extremity; temperature of >101° F; increasing redness or swelling; calf pain, tenderness, or swelling

2. Dressings/wound care:

- A rectangular waterproof dressing will cover your incision. Leave in place until 1st postop appointment.
- If your dressing happens to be removed, cover with gauze and paper tape.
- Ok to shower 2 days postop. Ok to let soapy water run over dressing. Do not submerge your incision.

3. Blood Clot Prevention:

- Wear compression stockings for 14 days postop. Remove for hygiene and for 2 hours/day to allow the skin to breathe.
- At your preop, you will be prescribed a blood thinner to take 14 days after surgery.
- **4. Weight Bearing**: Ok to place full weight on operative leg immediately after surgery.

5. Activity after surgery:

- Avoid:
 - Placing a pillow under knee when resting (this keeps knee bent and is NOT good).
 - Ambulate without assistive device before being cleared by PT.
- Should Do:
 - Start knee range of motion after surgery (Goal is 0-90° of flexion by the 1st postop visit).
 - Quad sets and straight leg raises should be performed at least 3x daily.
 - Place a rolled towel under ankle to keep knee completely straight when resting.
- **6. Restrictions/Driving**: No driving unless cleared by Dr. Faulkner. No lifting, pushing, pulling, or carrying objects > 10 lbs. Do not climb, stoop, crawl, or kneel.

7. Cold therapy/Ice:

- Apply an ice pack or cold therapy unit to knee 30 minutes 6 x daily to help reduce pain and swelling.
 - Do not apply to bare skin. Be sure to have an ACE wrap or wash cloth between ice pack and skin to avoid frostbite.
- Remove for 30 minutes every 2 hours.



8. Pain medication:

- Take 1-2 tabs of the prescribed pain medicine with food every 4-6 hours as needed. Take the medication sparingly and discontinue as soon as possible.
- Common side effects of narcotics: constipation, drowsiness, nausea and confusion. If you experience severe nausea, itching, dizziness or other adverse reactions, call Dr. Faulkner.
- Increase your fiber intake (fruits, vegetable, grains) and use an over the counter stool softener (such as docusate or Senna-S) if you are having constipation.
- Substitute Tylenol and/or Ibuprofen or Aleve if you do not have any
 contraindication to taking these. Maximum dose/day of Tylenol is 1000 mg
 every 8 hours and Ibuprofen 800 mg every 8 hours. Stomach upset, GI ulcers
 and allergic reactions are the most common adverse reactions to antiinflammatories. You should not take more than 3000 mg of Tylenol in a 24 hour
 period.
- **9. Diet:** Anesthesia can cause temporary nausea after surgery. Begin with light with clear liquids or soft foods after surgery to minimize upset stomach. Drink at least 6-8 glasses of water daily.
- **10. Physical Therapy:** Home PT or outpatient PT should start right after surgery. We strongly encourage you to practice the knee range of motion exercises from our website videos at least 3x/day.

