

Hospital Discharge

Your hospital stay will typically last from 2 nights, depending on the speed of your recovery. Before you are discharged from the hospital, you will need to accomplish several goals, such as:

- Getting in and out of bed by yourself.
- Having acceptable pain control.
- Being able to eat, drink, and use the bathroom.
- Walking with an assistive device (walker or crutches) on a level surface
- Being able to perform the prescribed home exercises.
- Understanding any knee precautions you may have been given to prevent injury and ensure proper healing.

Warning Signs of Infection

- Persistent fever (higher than 100 degrees)
- Shaking chills
- Increasing redness, tenderness or swelling of your wound
- Drainage of your wound
- Increasing pain with both activity and rest

Warning Signs of a Blood Clot

- Pain in your leg or calf unrelated to your incision
- Tenderness or redness above or below your knee
- Increasing swelling of your calf, ankle or foot

In very rare cases, a blood clot may travel to your lungs and become life-threatening. Signs that a blood clot has traveled to your lungs include:

- · Shortness of breath
- Sudden onset of chest pain
- Localized chest pain with coughing

Notify doctor Hernandez if you develop any of the above signs



Recovery at Home

You will need some help at home for several days to several weeks after discharge. Before your surgery, arrange for a friend, family member or caregiver to provide help at home.

Preparing Your Home

The following tips can make your homecoming more comfortable, and can be addressed before your surgery:

- Rearrange furniture so you can maneuver with a cane, walker, or crutches. You may temporarily change rooms (make the living room your bedroom, for example) to avoid using the stairs.
- Remove any throw rugs or area rugs that could cause you to slip. Securely fasten electrical cords around the perimeter of the room.
- Get a good chair—one that is firm with a higher-than-average seat and has a footstool for intermittent leg elevation.
- Install a shower chair, gripping bar, and raised toilet seat in the bathroom.
- Use assistive devices such as a long-handled shoehorn, a long-handled sponge, and a grabbing tool or reacher to avoid bending over too far.



Place items that you use frequently within easy reach.

Wound Care

During your recovery at home, follow these guidelines to take care of your wound and prevent infection:

- Keep the wound area clean and dry. A dressing will be applied in the hospital and should be changed as necessary. Ask for instructions on how to change the dressing before you leave the hospital.
- Follow doctor Hernandez instructions on how long to wait before you shower or bathe.
- Notify doctor Hernandez immediately if the wound appears red or begins to drain. This could be a sign of infection.

Swelling

Mild to moderate swelling is normal for the first 3 to 6 months after surgery. To reduce swelling, elevate your leg slightly and apply ice. Wearing compression stockings may also help reduce swelling. Notify doctor Hernandez if you experience new or severe swelling, since this may be the warning sign of a blood clot.



Medication

Take all medications as directed by doctor Hernandez

Home medications may include narcotic and non-narcotic pain pills, oral or injectable blood thinners, stool softeners, and anti-nausea medications.

Be sure to talk whit doctor Hernandez about all your medications—even over-the-counter drugs, supplements and vitamins. He will tell you which over-the-counter medicines are safe to take while using prescription pain medication.

It is especially important to prevent any bacterial infections from developing in your artificial joint. Dr Hernandez may advise you to take antibiotics whenever there is the increased possibility of a bacterial infection, such as when you have dental work performed. Be sure to talk about it before you have any dental work done and notify your dentist that you have had a knee replacement.

Diet

By the time you go home from the hospital, you should be eating a normal diet. Dr Hernandez may recommend that you take iron and vitamin supplements. You may also be advised to avoid supplements that include vitamin K and foods rich in vitamin K if you taking certain blood thinner medications, such as warfarin (Coumadin). Foods rich in vitamin K include broccoli, cauliflower, brussel sprouts, liver, green beans, garbanzo beans, lentils, soybeans, soybean oil, spinach, kale, lettuce, turnip greens, cabbage, and onions.

Continue to drink plenty of fluids, but try to limit coffee intake and avoid alcohol. You should continue to watch your weight to avoid putting more stress on the joint.

Resuming Normal Activities

Once you get home, you should stay active. The key is to not do too much, too soon. While you can expect some good days and some bad days, you should notice a gradual improvement over time. Generally, the following guidelines will apply:

Driving

In most cases, it is safe to resume driving when you are no longer taking narcotic pain medication, and when your strength and reflexes have returned to a more normal state. Dr Hernandez will help you determine when it is safe to resume driving.

Sexual Activity

Please consult your doctor about how soon you can safely resume sexual activity. Depending on your condition, you may be able to resume sexual activity within several weeks after surgery.

Sleeping Positions

You can safely sleep on your back, on either side, or on your stomach.



Return to Work

Depending on the type of activities you do on the job and the speed of your recovery, it may be several weeks before you are able to return to work. Dr Hernandez will advise you when it is safe to resume your normal work activities.

Sports and Exercise

In some cases doctor may recommend riding a stationary bicycle to help maintain muscle tone and keep your knee flexible. When riding, try to achieve the maximum degree of bending and straightening possible.

As soon as Dr Hernandez gives you the go-ahead, you can return to many of the sports activities you enjoyed before your knee replacement.

- Walk as much as you would like, but remember that walking is no substitute for the exercises prescribed by doctor and physical therapist.
- Swimming is an excellent low-impact activity after a total knee replacement; you can begin as soon as the sutures have been removed and the wound is healed.
- In general, lower impact fitness activities such as golfing, bicycling, and light tennis will help increase the longevity of your knee and are preferable over high-impact activities such as jogging, racquetball and skiing

Total Knee Replacement Exercise Guide

Regular exercise to restore your knee mobility and strength and a gradual return to
everyday activities are important for your full recovery. It is recommend that you exercise
approximately 20 to 30 minutes two or three times a day and walk 30 minutes, two or three
times a day during your early recovery.

Early Postoperative Exercises

- Start the following exercises as soon as you are able. You can begin these in the recovery room shortly after surgery. You may feel uncomfortable at first, but these exercises will speed your recovery and actually diminish your postoperative pain.
- Quadriceps Sets
- Tighten your thigh muscle. Try to straighten your knee. Hold for 5 to 10 seconds.
- Repeat this exercise approximately 10 times during a two minute period, rest one minute and repeat. Continue until your thigh feels fatigued.



Straight Leg Raises

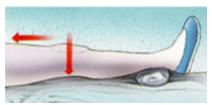


- Tighten the thigh muscle with your knee fully straightened on the bed, as with the Quad set. Lift your leg several inches. Hold for five to 10 seconds. Slowly lower.
- Repeat until your thigh feels fatigued.
- You also can do leg raises while sitting. Fully tighten your thigh muscle and hold your knee fully straightened with your leg unsupported. Repeat as above. Continue these exercises periodically until full strength returns to your thigh.

Ankle Pumps



- Move your foot up and down rhythmically by contracting the calf and shin muscles. Perform
 this exercise periodically for two to three minutes, two or three times an hour in the recovery
 room.
- Continue this exercise until you are fully recovered and all ankle and lower-leg swelling has subsided
- Knee Straightening Exercises



- Place a small rolled towel just above your heel so that it is not touching the bed. Tighten your thigh. Try to fully straighten your knee and to touch the back of your knee to the bed. Hold fully straightened for five to 10 seconds.
- Repeat until your thigh feels fatigued.



Bed-Supported Knee Bends



- Bend your knee as much as possible while sliding your foot on the bed. Hold your knee in a maximally bent position for 5 to 10 seconds and then straighten.
- Repeat several times until your leg feels fatigued or until you can completely bend your knee.
- Sitting Supported Knee Bends



- While sitting at bedside or in a chair with your thigh supported, place your foot behind the heel of your operated knee for support. Slowly bend your knee as far as you can. Hold your knee in this position for 5 to 10 seconds.
- Repeat several times until your leg feels fatigued or until you can completely bend your knee
- Sitting Unsupported Knee Bends



- While sitting at bedside or in a chair with your thigh supported, bend your knee as far as you can until your foot rests on the floor. With your foot lightly resting on the floor, slide your upper body forward in the chair to increase your knee bend. Hold for 5 to 10 seconds. Straighten your knee fully.
- Repeat several times until your leg feels fatigued or until you can completely bend your knee.



Early Activity

 Soon after your surgery, you will begin to walk short distances in your hospital room and perform everyday activities. This early activity aids your recovery and helps your knee regain its strength and movement.



Walking

- Proper walking is the best way to help your knee recover. At first, you will walk with a walker
 or crutches.
- Stand comfortably and erect with your weight evenly balanced on your walker or crutches. Advance your walker or crutches a short distance; then reach forward with your operated leg with your knee straightened so the heel of your foot touches the floor first. As you move forward, your knee and ankle will bend and your entire foot will rest evenly on the floor. As you complete the step, your toe will lift off the floor and your knee and hip will bend so that you can reach forward for your next step. Remember, touch your heel first, then flatten your foot, then lift your toes off the floor.



- Walk as rhythmically and smooth as you can. Don't hurry. Adjust the length of your step and speed as necessary to walk with an even pattern. As your muscle strength and endurance improve, you may spend more time walking. You will gradually put more weight on your leg. You may use a cane in the hand opposite your surgery and eventually walk without an aid.
- When you can walk and stand for more than 10 minutes and your knee is strong enough so that you are not carrying any weight on your walker or crutches (often about two to three weeks after your surgery), you can begin using a single crutch or cane. Hold the aid in the hand opposite the side of your surgery. You should not limp or lean away from your operated knee.



Stair Climbing and Descending





- The ability to go up and down stairs requires strength and flexibility. At first, you will need a handrail for support and will be able to go only one step at a time. Always lead up the stairs with your good knee and down the stairs with your operated knee. Remember, "up with the good" and "down with the bad." You may want to have someone help you until you have regained most of your strength and mobility.
- Stair climbing is an excellent strengthening and endurance activity. Do not try to climb steps higher than the standard height (7 inches) and always use a handrail for balance. As you become stronger and more mobile, you can begin to climb stairs foot over foot.
- Advanced Exercises and Activities
- Once you have regained independence for short distances and a few steps, you may increase your activity. The pain of your knee problems before surgery and the pain and swelling after surgery have weakened your knee. A full recovery will take many months. The following exercises and activities will help you recover fully.

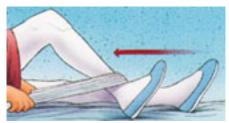
Standing Knee Bends



Standing erect with the aid of a walker or crutches, lift your thigh and bend your knee as much as you can. Hold for 5 to 10 seconds. Then straighten your knee, touching the floor with your heel first. Repeat several times until fatigued.



Assisted Knee Bends



Lying on your back, place a folded towel over your operated knee and drop the towel to your foot. Bend your knee and apply gentle pressure through the towel to increase the bend.

Hold for 5 to 10 seconds; repeat several times until fatigued.

Knee Exercises with Resistance

- You can place light weights around your ankle and repeat any of the above exercises.
 These resistance exercises usually can begin four to six weeks after your surgery. Use oneto two-pound weights at first; gradually increase the weight as your strength returns.
 (Inexpensive wrap-around ankle weights with Velcro straps can be purchased at most
 sporting goods stores.)
- Exercycling



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- Exercycling is an excellent activity to help you regain muscle strength and knee mobility. At
 first, adjust the seat height so that the bottom of your foot just touches the pedal with your
 knee almost straight. Peddle backward at first. Ride forward only after a comfortable cycling
 motion is possible backwards.
- As you become stronger (at about four to six weeks) slowly increase the tension on the exercycle. Exercycle for 10 to 15 minutes twice a day, gradually build up to 20 to 30 minutes, three or four times a week.
- Pain or Swelling after Exercise You may experience knee pain or swelling after exercise or activity. You can relieve this by elevating your leg and applying ice wrapped in a towel. Exercise and activity should consistently improve your strength and mobility