

# PATIENT DISCHARGE INSTRUCTIONS

**I know:**

- ☐ how to safely get in and out of bed or a chair
- ☐ how often and when to do exercises
- ☐ how to safely walk up and down stairs
- ☐ how to apply ice properly to my incision
- ☐ which medications I should and should not take after discharge

**Weight Bearing Precautions: Weight bearing as tolerated****PLEASE REVIEW THE FOLLOWING:****WOUND CARE DISCHARGE INSTRUCTIONS  
KNEE ARTHROPLASTY****CARING FOR YOUR KNEE INCISION:**

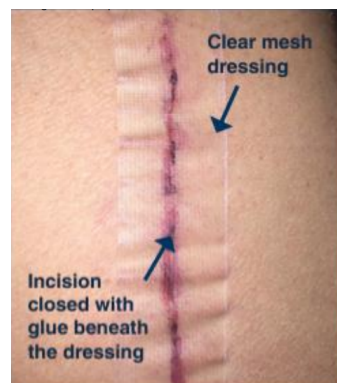
- \* Check your wound (or the area around the dressing if covered) daily for signs of infection. If needed, contact your doctor as noted below.

**DRESSING AND WOUND CARE:**

- \* Remove your ace wrap and webril (white fluffy material). Leave glue and clear dressing on. You may shower after 24 hours.
- \* It is normal to see some (slight) drainage at the top of the dressing the first few days after surgery.
- \* If the dressing appears completely wet from drainage or if there is an increasing amount of drainage from the wound over time, contact your surgeon's office for instructions.
- \* If your incision gets wet, be sure to PAT DRY, or use a blow dryer on COOL setting to air dry. DO NOT RUB YOUR INCISION!
- \* If you have any concerns about the dressing not covering the wound, then try sponge or towel bathing instead.
- \* No submersion or swimming until 4 weeks after surgery.
- \* Follow **one of the three** below instructions based on your wound closure (varies between surgeon/type of procedure) - the hospital staff will mark one of the following:

**\_\_\_\_ 1. IF YOU HAVE DISSOLVABLE SUTURES WITH GLUE:**

- \* Remove the outer dressing (white fluffy material) until you get to mesh layer as seen in the picture, 24 hours after your surgery. This is a waterproof layer sealed with glue and internal stitches. You may shower with this on. On Day 14 after your surgery, remove the clear mesh dressing and keep open to air.





## **2. IF YOU HAVE SUTURES OR STAPLES (ONLY):**

- \* At 5 days you can change your dressing but you should keep your wound covered with gauze and tape to keep it protected or apply the extra Tegaderm (waterproof) dressing you were given at discharge (this can also be purchased at most pharmacies) until the sutures or staples are removed (approximately 2-3 weeks).
- \* While sutures or staples are in the incision they **should NOT get wet**, so keep covered with Tegaderm while showering.

## **3. IF YOU HAVE STERI-STRIPS OVER SUTURES (Usually revision cases):**

- \* Follow instructions for #2

### **IF YOU NEED TO CHANGE THE DRESSING**

- \* Wash your hands well with soap and water before touching the dressing.
- \* Remove the dressing carefully. If you need to, soak the dressing with sterile water or saline to help loosen it.
- \* Dry the incision with clean dry gauze. Gently wipe or pat dry.
- \* Apply a new dressing the way your doctor or nurse showed you (Tegaderm is preferred but ok to use gauze and paper tape).

### **PETS**

- \* Do not allow pets to sleep with you until your wound is completely healed and the stitches/staples are removed.
- \* Do not allow pets to lick you or your wounds.
- \* Cover sofas or chairs with a clean sheet before sitting or lying on them.
- \* Wash your hands with soap immediately after touching/petting your pet.

### **SCAR PREVENTION**

- \* Once staples or sutures or steri-strips are removed and the skin on the wound is completely closed, you may consider the following tips to minimize incisional scarring:
  - Apply Vitamin E oil or aloe vera to lessen scarring.
  - Over the counter creams may also lessen scarring (i.e. Mederma, Bio-oil).
  - Massage out the scar tissue - your physical therapist may be able to guide you.
  - Avoid exposure to the sun for one year as the sun will make the scar prominent.

### **DRIVING**

- \* You may start driving as soon as 2 weeks postoperatively if you feel safe and able to avoid an accident, react quickly to slam on breaks, and exit the vehicle. **DO NOT** drive if you are taking narcotic pain medication such as oxycodone (Percocet), hydrocodone (Norco), hydromorphone (Dilaudid), or Morphine/MSContin to name a few.

### **Contact your doctor/surgeon immediately for any of the following:**

- \* **increased redness, swelling, pain, discharge, or warmth around the incision**
- \* **incision opens**
- \* **fluid drains from pin sites or incision**
- \* **foul-smelling discharge from the incision**
- \* **temperature higher than 101F (38.3C)**
- \* **shaking chills**
- \* **severe or increasing pain that does not improve with rest**
- \* **burning or pain with urinating**
- \* **persistent dizziness, not relieved by rest/lying down**
- \* **sudden acute swelling or pain in the calf (Call provider immediately)**
- \* **new shortness of breath/chest pain (GO TO THE EMERGENCY ROOM OR CALL 911)**



## PAIN

- \* It is normal to have some pain/discomfort at the surgical site during activity and at night for a few weeks.
- \* Using an ice pack for 10-15 minutes may relieve pain at the surgical site.
- \* Take medications as directed by your physician.
- \* Rest your knee in a comfortable position as directed by your surgeon.
- \* You may be asked to use a pillow for support while sleeping/resting.
- \* Wean off your narcotic pain medication as soon as pain is tolerable.
- \* Check with your caregiver or surgeon if your pain gets worse or does not go away as expected.

### **ADDITIONAL IMPORTANT PAIN MEDICATION INFORMATION**

Usually, your surgical pain will start to improve within 1-2 weeks after your joint replacement surgery. **As soon as your pain starts to get better, you should begin tapering down on your opiate or narcotic pain medicine (e.g., morphine, oxycodone, hydrocodone, etc.) by either cutting down the number of tablets taken or by stretching out the time between doses. Remaining on narcotic medications longer than 4 weeks following your surgery can potentially lead to chemical dependence and make it difficult transitioning off these medications.**

For example, you may need to take 2 tablets of a pain medicine every 4-5 hours as needed for the first week after your surgery, but by the second week you may find that you can take only 1 tablet every 4-5 hours and still get adequate pain relief. By the third week, you may find that you can wait 6-8 hours before you need to take another tablet for managing your pain. It is strongly recommended that you take the **lowest effective dose that treats your pain symptoms**. If at any time the medicine is making you too sleepy, groggy, or causing problems with thinking/concentration, it is time to reduce your dose.

To prevent excess sedation from your pain medications, it is also recommended that you take them at different times than other drugs that make you drowsy, such as muscle relaxants. It is best to separate the medicines by at least 1-2 hours, if possible.

Store your medications in a secure, cool, dry place out of the reach of children or pets. Dispose of them properly when you no longer need them; avoid flushing or placing whole tablets in the trash. Contact your local pharmacy or refer to <https://archive.epa.gov/region02/capp/web/pdf/ppcpflyer.pdf> for additional information about drug disposal.

**If you experience any issues after your discharge, please contact us by phone immediately. We can provide prompt assistance.**

### **If you have Medical Questions:**

During business hours (Monday - Friday from 8:00 a.m. to 5:00 p.m.): 559-788-6081

Hours: Monday - Friday, 8 a.m. - 5 p.m.

Post-Op Appointments: Please call the office to schedule an appointment, if you do not already have one.

### **Medication Refills:**

- \* Narcotic refills can now be sent electronically to the pharmacy, but please call at least 72 hours in advance for prescription refills.
- \* Please call early in the week during business hours if you think you will run out of medication over the weekend.

# Total Knee Replacement Exercise Guide

## Early Postoperative Exercises

The following exercises will help increase circulation to your legs and feet, which is important for preventing blood clots. They will also help strengthen your muscles and improve knee movement.

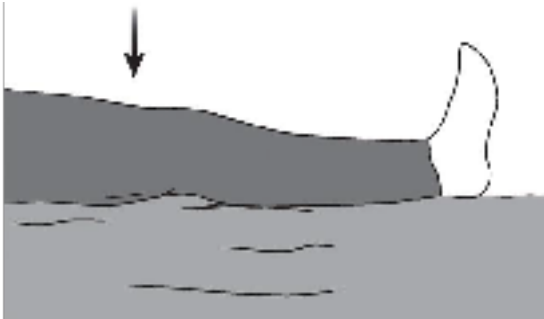
Start the exercises as soon as you are able. You can begin them in the recovery room shortly after surgery. You may feel uncomfortable at first, but these exercises will help speed your recovery and actually diminish your postoperative pain.

### 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 2-minute period, rest one minute, and then repeat. Continue until your thigh feels fatigued.



### Straight Leg Raises

Tighten your thigh muscle with your knee fully straightened on the bed, as with the quadriceps set above.

Lift your leg several inches. Hold for 5 to 10 seconds.

Slowly lower.

Repeat until your thigh feels fatigued.

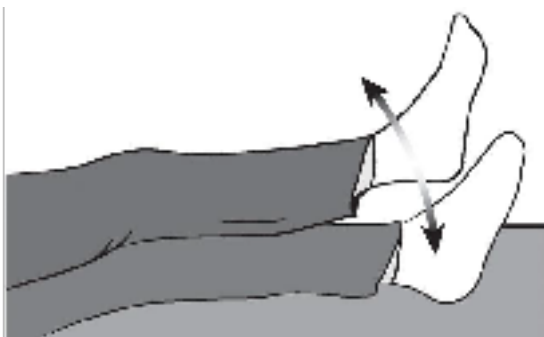
This exercise should take 3 minutes.

You also can do leg raises while sitting.

Tighten your thigh muscle and hold your knee fully straightened with your leg unsupported.

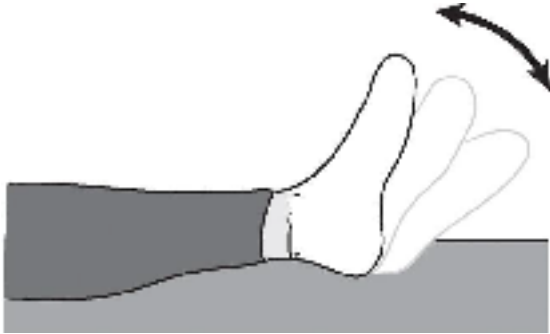
Repeat as above.

Continue these exercises periodically until full strength returns to your thigh.



**Ankle Pumps**

Move your foot up and down rhythmically by contracting your calf and shin muscles. Perform this exercise for 2 to 3 minutes, 2 to 3 times an hour in the recovery room. If you are watching TV, do this exercise during every commercial break. Continue this exercise until you are fully recovered and all ankle and lower-leg swelling has subsided.


**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. This exercise should take 2 minutes.


**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. This exercise should take 3 minutes.

