

TOTAL JOINT QUESTIONS

What is the chance for success?

Success is typically measured by the ability to answer "yes" to the following three questions:

- Are you glad you had the operation?
- Did it fulfill your expectations?
- Would you do it again?

The majority of patients at 1 year will answer yes to these three questions.

What is the recovery time?

Everyone heals at a different pace. For most individuals they will use a walker for 3-4 weeks for 1 month after your operation. You will then progress to a cane for outdoors and use of the furniture for support around the house. By 2-3 months, most will return to normal function without any assistance. By 6 months, most people have returned to their normal activities. By one full year, most people have reached their maximum benefit and will perform most activities and not think about their joint.

Will I have to go to a rehabilitation facility or home?

Many people are able to go home after their operation. However, you may go to a rehabilitation facility in order to gain the skills you need to safely return home. Many factors will be considered in this decision. These factors include proximity of family or friends to assist, home environment, and safety considerations such as functional status.

When can I drive?

For surgery on the right knee, driving will probably not be performed for 4-6 weeks. You should have good strength and full motion. If you have surgery on the left leg you may return to driving as soon as you are comfortable if you have an automatic transmission. Do not drive if you are taking narcotics. You should also check with your insurance to see if there are any coverage limitations regarding your postoperative period.

When can I travel?

It is recommended to stay close to home for the first month. Short trips can be made when you are comfortable. If you have a long trip in the postoperative period you should wear your TED stockings, and also perform your ankle pumps every hour in the car/plane. You should also get out and walk every hour to hour-and-a-half to assist in preventing blood clots.

What activities are permitted following surgery?

You may return to most activities as tolerated including walking, gardening, and golf. Some of the best activities to help with motion and strengthening are swimming and using a stationary bicycle. You should avoid high-impact activities such as running and jumping, vigorous sports such as singles tennis or squash.

How long will my replacement last?

This varies from patient to patient. Laboratory studies show us that today the average joint replacement may last approximately 15-20 years.

HOSPITAL QUESTIONS

When can I shower or get the incision wet?

The average patient may shower and let water cascade over the incision at about one week after their surgery. Do not submerge the knee. You may generally immerse the knee at about 3-4 weeks after the surgery. If you are having any drainage or redness to the incision site, you should not get the knee wet.

When should I wear the knee immobilizer? When can I discontinue it?

You should wear the knee immobilizer when you are walking until you are able to independently perform a straight leg raise, this will be measured and assisted by your physical therapist. Many patients are able to discontinue the use of the immobilizer 1-2 weeks after their surgery.

How often should I use the CPM (continuous passive motion) machine?

You will start the machine the day after your surgery. You should use the machine a total of 6-8 hours a day. Start with 1-2 hours in the morning, and 4-6 hours in the afternoon/evening. Gradually increase the bend of the machine approximately every hour or two.

How long will I need a bandage on my knee?

A bandage is used for approximately one week and changed daily to new, dry, sterile gauze. As you return home, if you are in a particularly dusty environment or if you have any drainage at the incision site, you should continue to keep the incision covered.

GOING HOME FROM THE HOSPITAL

How long will I be on pain medication?

It is not unusual to require some form of pain medication for about 3 months. Initially, the medication will be strong (such as a narcotic). Most people are able to discontinue their strong pain medication after about a month and switch to an over-the-counter medication such as acetaminophen or ibuprofen.

How long will I be on blood thinner?

Typically you will be on an injectable blood thinner for 7-10 days. This will require you to administer these to yourself upon discharge from the hospital. Once the blood thinner is discontinued you should take one aspirin a day (unless you have a medical condition or an allergy to aspirin) for one month. For those with higher risk factors, this may require a prolonged course of oral blood thinner. This will be discussed with you for your particular needs.

Can I drink alcohol during my recovery?

If you are taking a blood thinner you should avoid alcohol intake because alcohol can modify the effect of this medication. You should also avoid alcohol if you are taking narcotics. Beyond this, you can use alcohol in moderation at your own discretion.

How long should I take iron supplements?

Four weeks of iron after surgery is usually sufficient. These supplements help your body replenish its iron supply and build up your blood count.

Should I apply ice or heat?

Initially, ice is most helpful to keep down swelling. After several weeks, you may also try using heat and choose what works best for you.

How long should I wear compression stockings?

You should wear the stockings until you are up and around more than you are down at rest. If you have discontinued the stockings and notice additional swelling the stocking can be reapplied to assist in reducing that swelling. You should wear the stockings for several months when you travel in a car or plane.

Will I need physical therapy?

Yes. The physical therapist plays a very important role in your recovery. You will be seen by a physical therapist in the hospital. Once you are home, you will go to therapy 2-3 times a week to assist with your exercise program. You will also be taught a series of exercises that you can perform on your own without supervision.

Should I stay alone?

It is generally good practice to have somebody with you for the first few weeks after the surgery. Your independence is decreased and although you are mobile it is good practice not to put yourself in a position where you may injure yourself.

When can I resume sexual intercourse?

As soon as you are comfortable. For hip replacement patients you should maintain your hip precautions.

POST-OPERATIVE CONCERNS

I feel depressed. Is this normal?

It is not uncommon to have feelings of depression after knee replacement surgery. This may be due to a variety of factors, such as limited mobility, discomfort, increased dependency on others, and medication side effects. Feelings of depression will typically fade as you begin to return to regular activities. If your feelings of depression persist, consult your internist.

I'm having trouble sleeping, is that normal?

Insomnia is a very common complaint following knee replacement surgery. Over-the-counter remedies such as Benadryl or melatonin may be effective. If this continues to be a problem, prescription medication may be necessary.

I am constipated, what should I do?

It is very common to have constipation after surgery. This is due to a number of factors and is aggravated by the need to take narcotic pain medications. It is best to increase your fiber intake after your surgery. Also, a simple over-

the-counter medication stool softener (Colace) is also good prevention for this problem. In rare cases you may require a suppository or enema.

How much range of motion do I need?

Most people require 70 degrees of flexion to walk normally on level ground, 90 degrees to ascend stairs, 100 degrees to descend stairs, and 105 degrees to get out of a low chair. To walk or stand efficiently, your knee should come to within 10 degrees of being fully straight. The biggest factor of postoperative range of motion is your preoperative range of motion or sometimes lack of. The average patient achieves approximately 115 degrees of flexion by 1 year after surgery. Some patients achieve less and others much more.

Will the surgery make my leg longer?

For total knee replacements, in the majority of cases, your leg length will essentially be unchanged. In some cases, however, the sensation is usually the result of straightening out a knee that preoperatively had a significant bow. At first, the increased length may feel awkward. Most people become accustomed to the difference, but occasionally a shoe lift may be necessary in the opposite extremity. In total hip replacements there are times where, in order to ensure stability of the joint to prevent dislocation, the leg length is either longer or shorter. In these cases a shoe lift can be prescribed.

Can I use weights when I exercise?

Generally weights are not used for the first 2 months after surgery. As you progress with your physical therapy program, your physical therapist may recommend the use of weights. These should be limited to light weights progressing from one pound to a maximum of five pounds.

Will I set off the security monitors at the airport?

You probably will set off the alarm as you progress through the security checkpoint. Be proactive and inform the security personnel that you have had a knee replacement and will most likely set off the alarm. Wear clothing that will allow you to show them your knee incision without difficulty. A wallet card is no longer of any help when passing through security checkpoints.

Do I need antibiotics before having dental work or an invasive medical procedure?

Yes. Avoid any dental cleaning and other nonurgent procedures for 6 weeks following knee replacement surgery. You should inform your dentist or other physicians of your knee replacement.

Can I kneel?

After several months, you may try to kneel. It may be painful at first but will not harm or damage your knee replacement. Much of the discomfort comes from kneeling on your recent incision and the healing local tissues. Kneeling generally becomes more comfortable as time passes. You should always wear a pad under your knee for comfort.

When do I need to follow up with my surgeon?

Follow up appointments are usually made postoperatively 4-5 weeks after surgery. 4-6 months after surgery and annually for the first few years, then every other year for the life of your prosthesis. These follow up visits are necessary to monitor the fixation of the prostheses and the potential wearing out of the plastic.

When should I see my primary care physician?

It is generally a good idea to follow up with your PCP within 2-4 weeks following your surgery. This ensures that he/she is aware of any medical needs or changes following your total joint surgery.

How long will I need to be off of work?

This will ultimately depend on the type of surgery you have had and the job duties at your workplace. For most outpatient cases you can return to a desk job in 5-7 days, a standing job can be returned to in 7-14 days and a laborious job can be returned to in approximately 3 weeks. For total joints, one can typically return to a desk job in 3-6 weeks, a standing job in 4-10 weeks, and a laborious job it may take up to 3 months. Individual restrictions will determine the exact time of return to work.