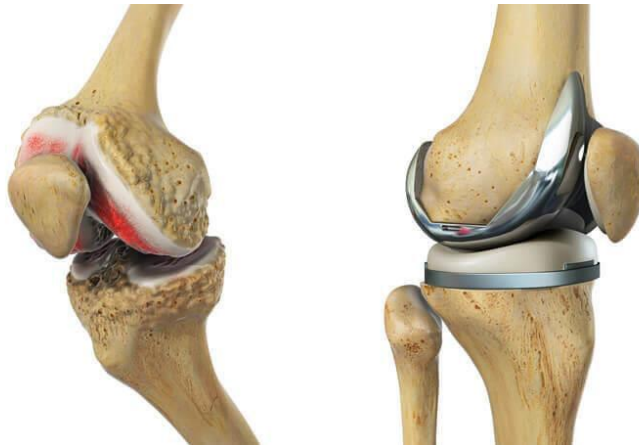


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POSTOPERATIVE INSTRUCTIONS
TOTAL/UNICOMPARTMENTAL KNEE ARTHROPLASTY

PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION IF NECESSARY -
DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE HOSPITAL OR VIA PHONE/EMAIL TO
DR. HUDSON'S STAFF AFTER ARRIVING HOME

1) PAIN MANAGEMENT

- a. Prior to surgery you will likely be given a prescription for Tramadol, Oxycodone and Celebrex. After the surgery, take Tylenol 1000mg (2 extra strength pills) three times a day and Celebrex 200mg twice a day (starting the day after surgery), independent of pain level. If there is still mild to moderate pain, take tramadol on an as needed basis. If there is still severe pain, take oxycodone (instead of tramadol) on an as needed basis. Try to wean off of narcotics as soon as you can after the operation (2-4 weeks).
- b. Often, the worst pain will be 2-3 days after surgery, when all numbing medicine wears off
- c. Cold and elevation are very helpful for pain control. For cold treatment, you may use the cold therapy unit, ice, frozen peas, gel pads or a cryocuff

2) BLOOD CLOT PREVENTION

- a. Unless specified, you will take enteric coated aspirin 325mg once a day for six weeks. If it bothers your stomach, try over the counter omeprazole and notify your doctor.
- b. Some patients will be prescribed other blood thinners such as coumadin, Plavix or Eliquis.
- c. Perform ankle pump exercises as much as possible. This is very important for decreasing your risk of developing blood clots. Do them at least 20 times every hour.
- d. Wear your TED stockings
- e. Please notify your doctor of significant swelling in the calf or calf tenderness. Mild to moderate swelling is common.

3) SWELLING

- a. Wear your TED stockings, elevate the extremity (place pillows under the calf and not under the knee to prevent prolonged flexion of the knee).
- b. Perform ankle pumps and wrap ACE bandage (Leftover from the original hospital dressing) around the knee. Wrap it on top of TED stocking.

1) Postoperative dressings and showering

- a. Leave your dressing in place for one week then remove it. During the first four days after the surgery, sponge bathe are recommended. Your dressing is waterproof so showering is allowed after the surgery unless the edges of the dressing become wet begin peeling off and begin to allow water to enter. In this case, do not shower until one week after surgery, when the dressing is finally removed. At this point, showering with the dressing off is allowed, as long as there is no drainage from the incision. Do not apply any creams, lotions, ointments, medications or oils to your incision
- b. Do not submerge your incision (pools, lakes, oceans, hot tubs) until it is completely healed (typically one month)
- c. If the dressing is saturated with blood, please notify your doctor as the dressing will have to be changed
- d. If there is persistent drainage from the wound beyond 7 days after surgery or if there is redness around the incision, please notify your doctor

2) FEVER

Some patient run low-grade fevers (between 99°F and 101.5° F) after surgery due to compression of the air sacs (alveoli) in your lungs. This process is called atelectasis. This is normal and typically resolves within a few days. Take deep breaths and cough to clear your lungs. Please notify your doctor if you have a fever above 101.5° F that occurs beyond 5 days after surgery.

1) CONSTIPATION

- a. Constipation after a major surgery is very common due to immobility and narcotic pain medications. Drink fluids, increase fiber intake (Metamucil) and

take over the counter Colace 100mg twice daily. Make sure that you have stopped iron supplements. You may continue taking Colace for as long as you are taking narcotics.

- b. If you have not had a bowel movement within 4 days after surgery, take laxatives such as Dulcolax (oral or suppository) or Senna
- c. Fleet enema is your last resort before going to the emergency room

2) NUTRITION

- a. If you are a diabetic, please keep your blood glucose under tight control. If you have difficulty with this, please lower your carbohydrate intake and contact your primary care physician.
- b. High protein diets are very important for successful wound healing (consider protein shakes)
- c. Continue to take Vitamin C 500mg twice a day for at least one month after surgery

1) PHYSICAL THERAPY AND HOME EXERCISE

- a. Your physical therapy appointment should already be scheduled for 5-10 days after surgery. Please contact our office if your appointment is not yet scheduled

2) FOLLOW-UP APPOINTMENT

- a. 2 weeks after surgery with one of our physician's assistants