



KNEE

Total Joint Replacement

Total Joint Replacement Program

Your doctor has probably told you a great deal about your surgery and why you require the procedure. The following offers a helpful review, along with precautions and exercises to aid your recovery.

Why knee replacement?

Knee joints are a part of the body that endure stresses and strains on a daily basis. It is not surprising that after years of use, wear and tear on the bones and tissues can become a painful problem. For many of us, the answer is knee replacement surgery.

What knee joints do, and how they do it

- They support body weight.
- They move thousands of times a day.
- They allow you to walk, run, jump, crawl, and crouch down.

The knee joint is a hinge with some rotational ability. This joint glides or moves easily because of a special tissue called articular cartilage, which covers and lines the joint. In a healthy knee, movement is without pain. In a problem knee, the articular cartilage wears away and leaves the bones unprotected, causing pain and stiffness.

Any part of the entire knee may be damaged to the point that the knee does not function and must be replaced. In recent years many advances in surgical procedures have proven helpful to people with knee problems.

The procedure

Joint replacement surgery replaces the problem knee with a prosthesis or artificial knee. The basic parts of prosthesis are:

- Femoral component (thigh bone)
- Tibial component (shin bone)
- Patellar component (knee cap)

The prosthesis is extremely strong and made of special, long lasting material, which is easily placed inside your body.

Your orthopedic surgeon will choose the right size for you and will secure the prosthesis in place by a method that best suits your situation.



Pain Management

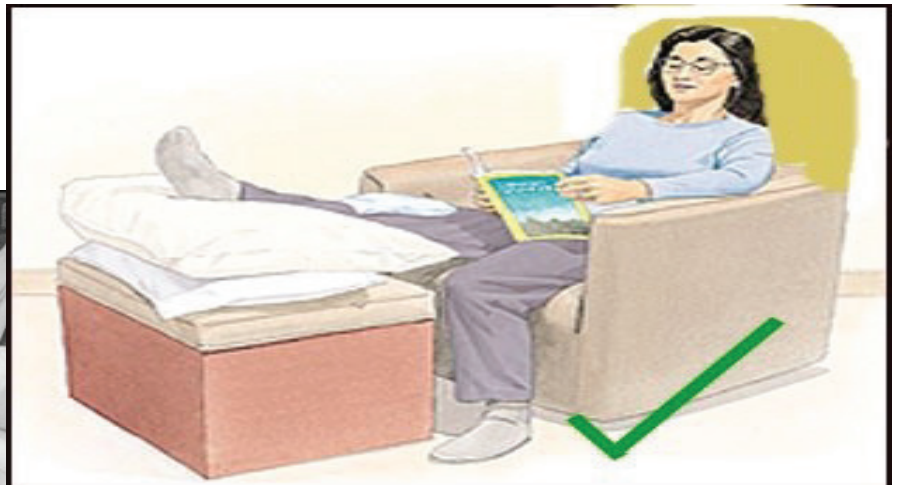
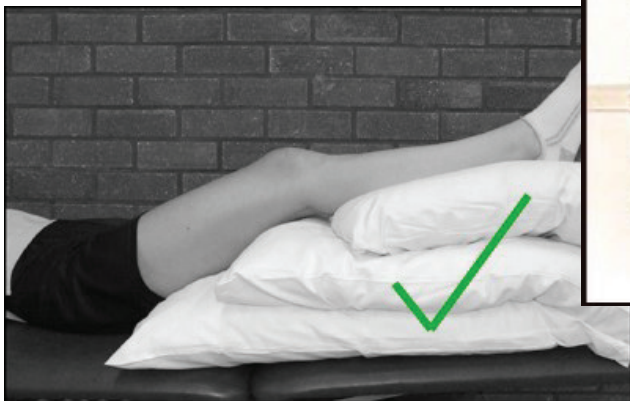
Non-Pharmaceutical Interventions

Ice/Gel Packs applied to the knee and other areas of swelling can significantly help decrease the pain and inflammation that occurs as a result of surgery. The team recommends that you continue icing at a minimum of 4-5 times a day for 20 minutes each. Be sure to place a barrier, such as a towel, between your skin and cold pack to prevent freezer burns. You may use ice in a bag or gel packs.

Elevate your surgical leg above the level of the heart several times a day, best to combine when icing and doing your ankle pumps.

Be Active: Get out of bed/off couch or chair several times a day for meals, restroom trips and just to stretch to get some circulation going in the body to promote blood flow and healing.

Don't Over Do It. Especially in first two weeks – allow soft tissues/wound to heal (decrease swelling so that new nutrient-rich blood can reach the tissues to promote healing). Swelling and bruising are a result of the surgery and part of healing process, however, the sooner the swelling subsides, the quicker the recovery.

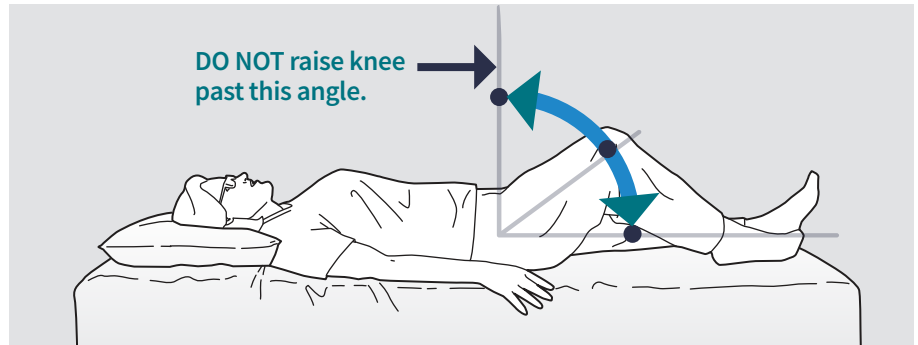


Exercise Protocols

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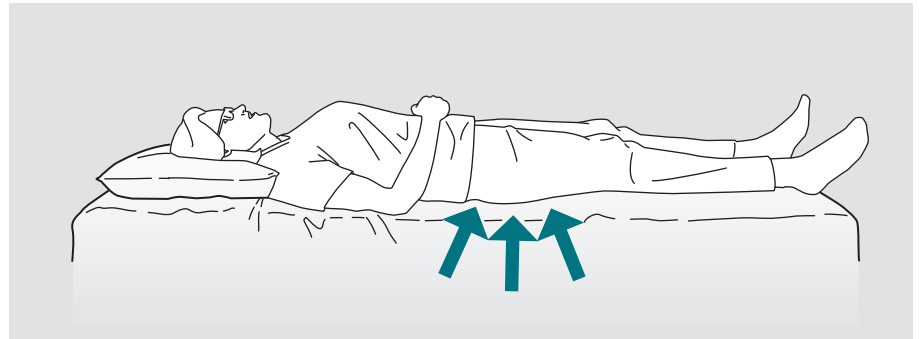
Bed-Supported Knee Bends

Slide your heel toward your buttocks, bending your knee and keeping your heel on the bed. Do not let your knee roll inward. Repeat 10 times, 3 or 4 times a day.



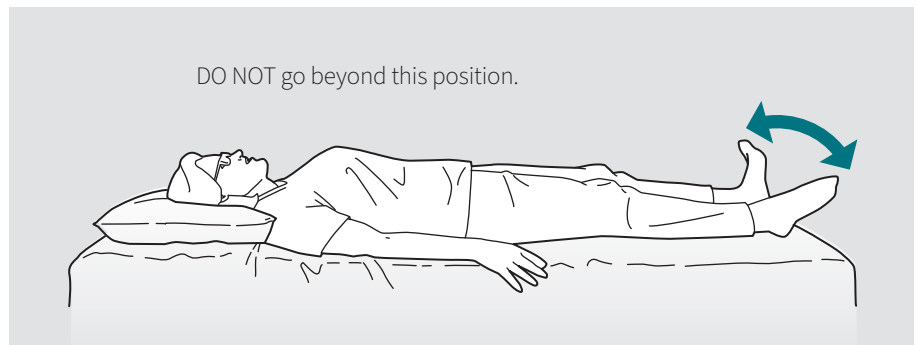
Buttock Contractions

Tighten buttock muscles and hold to a count of 5. Repeat 10 times, 3 or 4 times a day.



Ankle Pumps

Slowly push your foot up and down. Do this exercise several times every 5 or 10 minutes. This exercise can begin immediately after surgery and continue until you are fully recovered.



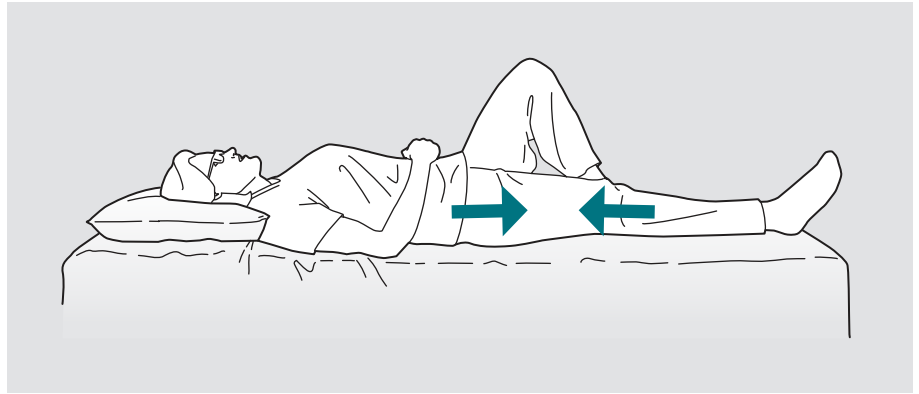
Exercise Protocols

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Quadriceps Set

Tighten your thigh muscle. Try to straighten your knee. Hold for 5 to 10 seconds.

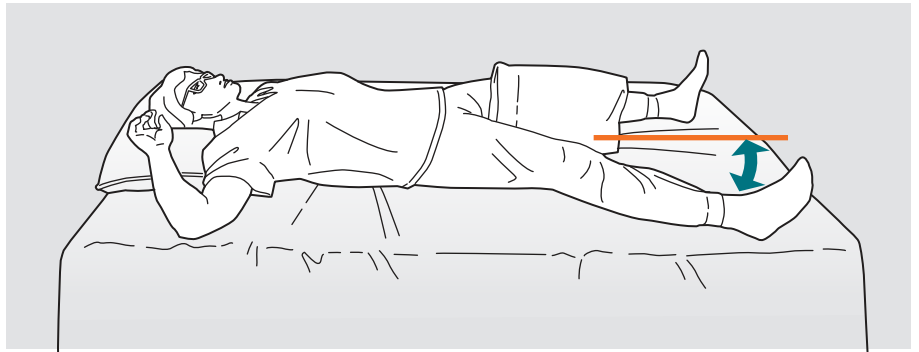
Repeat this exercise 10 times during a 10-minute period, or continue until your thigh feels fatigued.



Abduction Exercise

Slide your leg out to the side as far as you can and then back.

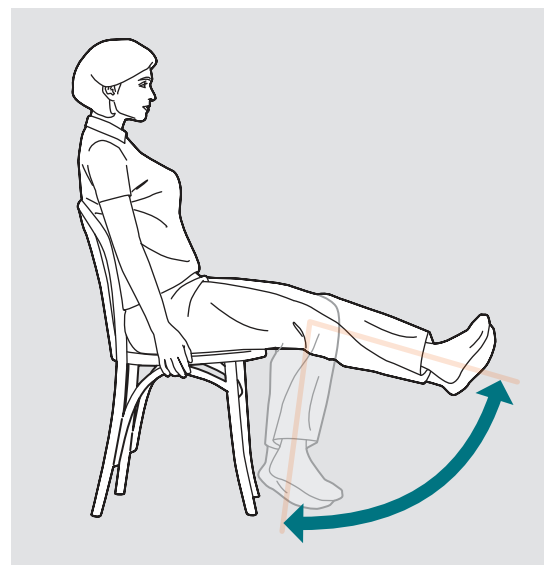
Repeat 10 times, 3 or 4 times a day.



Seated Knee Flexion

Sit in a chair that allows your feet to swing freely. Position your buttocks and lower back against the back of the chair. Slowly relax your thigh muscles to allow more bend in your operated knee. Try to pull the foot of the operated leg under the chair to increase the bend in the knee. You can assist by pushing on the front of the operated lower leg with the opposite foot.

Repeat 10 times, 3 or 4 times a day.



Recovery and Milestones

Milestones for Discharge Home

Together with the Sierra View Hip & Knee Center, you will create a plan to meet your goals for a safe discharge home. This plan will include assisting you in obtaining any equipment or other support you may need.

The majority of patients return home on the first or second day after surgery. Below are some goals to consider when preparing for your discharge:

- I understand any surgical precautions I may have after my surgery
- I know how to manage my post-operative symptoms (e.g. pain, nausea, dizziness)
- I can get into and out of bed with minimal assistance
- I am walking the minimum distance for my home setting (with walker/crutches if needed)
- I can manage stairs with assistance
- I understand the use of blood thinner medication prescribed to me
- I have arranged for support upon arrival home
- I know how to manage many of my regular daily activities such as bathing, grooming, and dressing

Surgery Rehabilitation

During your surgery, the surrounding muscles were stretched to insert the prosthesis. It will take approximately 6-12 weeks for these muscles and surrounding soft tissues to significantly improve. In general, it is best to be cautious and avoid any falls.

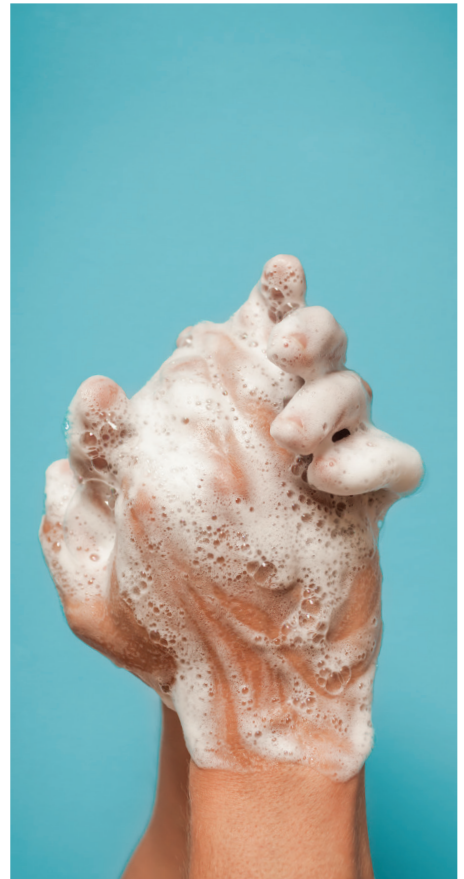
Best practice involves getting you up out of bed on the same or next day of your surgery. Our staff will assist you with being active. It is beneficial for you to get out of bed and walk several times a day to help decrease the risk of blood clots and increase your quality of life.



NOTE: If you have symptoms such as severe abdominal pain, chest pain, shortness of breath or other severe problems, call 911 or go to the emergency room.

Preventing Surgical Site Infections

- Always make sure that visitors, including family members, doctors, and nurses, wash their hands before physical contact with you. They must use soap and water or alcohol-based hand rubs.
- Clean your hands regularly. Especially before eating, after using the toilet (bathroom), and before touching and/or cleaning the surgery incision.
- A full body bath is strongly recommended before surgery.
- Do not remove wound dressings without talking to your nurse or doctor.
- Your doctor may order antibiotic(s) before surgery.
- Know the signs and symptoms of a surgical site infection. If you have any signs or symptoms, tell a healthcare worker.
- Keep the dressing clean and dry.
- Do not smoke.
- Eat a balanced diet.
- Diabetics should test/check their blood sugar 3 to 4 times a day (or as told by their doctor).
- Do not allow pet animals to sleep on your bed.
- Make sure that your nurse or doctor explains to you how to take care of the incision.



IMPORTANT

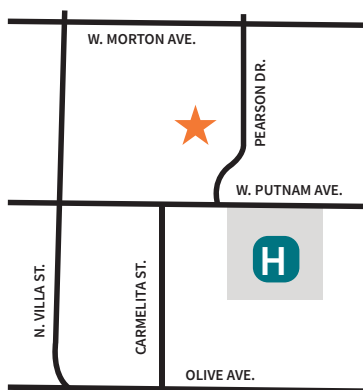
If you believe you have symptoms of a surgical site infection, or have any other concerns please contact your doctor.



SCAN TO LEARN MORE INFORMATION
or visit sierra-view.com/hipandknee



Striving for Well-being.



★ SIERRA VIEW HIP & KNEE CENTER



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(Closed 12 p.m. – 1 p.m. daily)

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