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Patient Sticker Here

Date

## Post Operative Care: Knee Replacements

You have had a total knee replacement. Joint replacement surgery requires that you take an active role in your care and rehabilitation. This sheet provides important information about your care in the early postoperative period.

### ***Physical Therapy***

The physical therapist will review some exercises such as quad sets, dangles, leg extension and straight leg raises. The continuous passive motion (CPM) machine is an important piece of equipment for your rehabilitation. Use the CPM 4 hours every day. This may be split into two 2 hour sessions. Increase the degrees of flexion by 10° until you can easily reach 90°. Once you have reached 90°, you no longer need to use the CPM. However, it is important to continue with the other exercises the physical therapist has shown you. For knee flexion, perform leg dangles over the edge of your bed twice a day. Use a pillow or rolled towel under the ankle of the operative leg to achieve full extension. When you can perform a straight leg raise on your own, you may discontinue use of the knee immobilizer. You may bear your full weight on the operative leg, as tolerated. The use of a walker or cane is helpful while you regain strength in the leg. A bag can be attached to your walker or crutches to assist you in carrying items. Remember, walking is the best exercise for your rehabilitation.

### ***Pain***

Pain is common and to be expected after this type of surgery. Medication has been prescribed for you. Take 1 or 2 tablets every four hours as needed. The oral pain medication may cause nausea, constipation and a light-headed sensation. If symptoms occur, call the office, and the medication can be changed. You should not drink alcohol while on this medication.

## ***Incision***

You should keep your wound dry until after the staples are removed. The staples will be removed approximately 14 days after the surgery either at your first post-op visit or in the rehabilitation facility. You may experience numbness towards the outer edge of the incision. This is normal. If you note any new redness, swelling or drainage from your incision, please call the office.

## ***Temperature/Fever***

Your temperature may be slightly elevated for several days after surgery. However, if fever persists above 101°F and is accompanied by chills, sweats, increased pain or drainage at the incision, you should call the office. These may be signs of infection.

## ***Swelling***

Swelling in the operative leg is a normal part of the postoperative course after surgery. Normal swelling is reduced in the morning, and gradually accumulates throughout the day. This can be reduced by elevating your legs or lying down for 30 minutes or an hour during the day. Any activity that leaves your feet on the floor, such as sitting in a chair or walking can lead to swelling. If the swelling is severe in the morning when first arising or if accompanied by leg pain, you should contact your surgeon. In total knee replacement, it is normal for some degree of swelling to persist for several months.

We do several things to reduce the risk of blood clots forming in the veins of your legs. We may place you on either Aspirin or Coumadin to thin your blood again, to reduce the risk of clot formation. In addition, you should continue the exercises and walk as tolerated to maintain blood flow. Pump your feet up and down 20 times each hour while awake and perform physical therapy exercises.

## ***Activities During Rehabilitation:***

**Car:** You should not drive for at least 6 weeks after surgery.

**Stairs:** When ascending or descending stairs, use the handrail or banister for stability. Lead off with your good knee to go up stairs, and lead with your operative leg to go down stairs. Go up or down stairs one at a time.

**Bathroom:** You will not be able to take a bath for 6 weeks. Plan to use a shower or sponge bath at home. A shower seat may also be useful if applicable to your bathroom. You may sponge bathe at a sink.

## ***Antibiotics***

Prior to any dental, urological, gastrointestinal or surgical procedure you must notify your doctor that you have a joint replacement. You may need to take antibiotics to protect the joint replacement from infection.

This information should serve as a general guide for you in the care of your knee replacement after surgery. As this is general information, your own care may be modified by your surgeon based upon the specific nature of your surgery and general condition. We hope you will ask questions about this information. If there is something concerning or that you do not understand, please call your physician.