



Davis Spine & Orthopaedics

Spine and Orthopaedic Surgeon
Board Certified and Fellowship Trained

www.DavisSpine.com
2800 Windguard Circle Suite 101
Wesley Chapel, FL 33544

Phone: 813-994-BACK (2225) Fax: 813-438-4494

Discharge Instructions for Knee Replacement

When to call 911:

- If you are experiencing shortness of breath or chest pain, **CALL 911.**
- If you are having swallowing problems that interfere with your ability to breathe, call 911 and go to the ER. You **MUST** also contact the office to make us aware of your trip to the ER as we have no other way to know you are there.

When to call the office: (even if it is after hours – call before going to the ER)

- If your temperature exceeds 101.5° F.
- If your incision begins to separate.
- If your incision begins to drain more than it did at your time of discharge and/or you have drainage that is soaking through your dressing after one hour.
- If you have an increase in pain, swelling, or redness around the incision.
- If you have difficulty with controlling your bowel or bladder (not constipation).

Discomfort:

- Pain -After surgery, pain is managed with narcotic medication. Try to take the narcotic medications as sparingly as possible: before going to bed and before physical therapy are two common times when patients feel they have more pain and should take the narcotics. Other pain relievers, such as ibuprofen and acetaminophen, are almost as effective without the severe side effects. If your pain is not being well managed and you are a patient in pain management you need to follow up with them.

Restrictions:

- Bending the knee is very important. Some patients go to a rehabilitation hospital after the operation, where they participate in daily physical therapy. Some patients go home after surgery. Either way, ***a physical therapist should see you at least two to three times per week to move the knee and keep it limber.*** If for some reason the physical therapy is not being done, call us so that we can help you schedule it.
- In general, you should not drive for 6-8 weeks after joint replacement and you should never drive while on narcotic medications.
- Do not sleep or rest with a pillow under your knee. Doing so would cause the knee to get stuck in a bent position. Instead, **place the pillow under your ankle** so that it stretches out the back of the knee and forces the knee to straighten.

Activity:

- You may need help with daily activities (e.g., dressing, bathing), however most patients are able to care for themselves right away.

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Bathing/Incision Care:

- You may shower starting 5 days after surgery. The incision can get wet but should be patted dry at the end of the shower. **Do not** soak the knee in a bathtub, hot tub, lake, or pool until you are cleared by us to do so. Showers only until that time.

- Place a dry dressing on the knee incision once or twice a day. The drainage from the knee should be decreasing. If it is not decreasing, let us know. **Do not put any creams or ointments on the incision for 8 weeks after surgery.**
- Steri-Strips are in place over the knee incision and should be removed only by our providers at the 2-week follow-up appointment.

Recovery and prevention:

We will see you for a follow up 2 weeks after your surgery. We will discuss the type of work you do at your follow up visits and we will decide together when to release you back to work.

Most patients will wear compression stockings to prevent blood clots.