



## **Postoperative Discharge Instructions – Total Knee Arthroplasty**

Please read these instructions carefully and completely, and ask for clarification if necessary. Please direct questions to your nurse while in the hospital or facility, or via phone to Dr. Zhu's office after you arrive home **(618-288-4388)**.

### Wound Care

- Keep your bandage clean and dry.
- Some swelling and bleeding is normal after surgery, and you may see some spotting on your dressing (Aquacel). Your dressing is waterproof and will protect your incision.
- **Leave the dressing on for 7 days** after surgery. At that time, replace it with another waterproof dressing. If your dressing becomes completely filled with fluid or starts leaking, please call the office.
  - **After 7 days, remove your Aquacel dressing and replace it with another waterproof dressing.** You may have been given an extra Aquacel dressing from surgery – you can use this. If you were not given an extra dressing, you can purchase a waterproof dressing at your local pharmacy.
  - Under your dressing, you will see a clear mesh on your incision. This is called DermaBond Prineo and is part of your wound closure.
- You may shower with the waterproof dressing in place, as long as it is intact. Avoid soaking or submersion (baths, swimming, hot tubs, etc.) until your wound is completely healed, typically 3-4 weeks after surgery.
- Do **not** use lotion, ointments, antiseptics, or disinfectants (including hydrogen peroxide, rubbing alcohol, iodine, etc). They can actually damage the healing tissue.

### Pain Control

- It is normal to have pain after surgery. Our goal is to reach a manageable level, like 4-5/10. The prescribed medications should help provide relief, but often does not take away all of the pain. The first few days after surgery are often the most painful, and the pain will improve with time.
- Use narcotic pain medication (hydrocodone) sparingly, and try to gradually decrease the amount and frequency taken over the next two weeks.

### **Acetaminophen (Tylenol)**

- Take two tablets every six hours on a scheduled basis, not as needed.
- **\*\*Do not** take more than 4000 mg a day (If you take hydrocodone (Norco), remember to account for the 325mg of acetaminophen in each of those pills).

### **Celecoxib (Celebrex) or Naproxen (Naprosyn):**

- These are non-steroidal anti-inflammatory (NSAID) medications. Do **not** take these if you have previously been told by a doctor to avoid NSAIDs (such as for kidney disease, gastric bypass, etc.)
- **Discontinue all other anti-inflammatories.** If you were taking other NSAIDs prior to surgery, do **not** resume those medications. (see list of NSAIDs on last page).
- Take one tablet twice a day on a scheduled basis, not as needed.
- NSAIDs may cause upset stomach or acid reflux. You may take an over-the-counter antacid to alleviate this.

### **Gabapentin (Neurontin)**

- Take one tablet twice a day (every 12 hours) on a scheduled basis. It may cause drowsiness.

### **Cyclobenzaprine (Flexeril):**

- This is a muscle relaxer used to treat muscle pain.
- Take one tablet three times (every 8 hours) a day as needed.

### **Tramadol (Ultram):**

- This is a mild opioid pain medication.
- Take 1-2 tablets every 4-6 hours as needed for **moderate to severe pain**.
- The goal is to discontinue this medication by 2-4 weeks after surgery.

### **Hydrocodone-acetaminophen (Norco):**

- This is an opioid pain medication for severe pain after surgery.
- Take 1 tablet every 4-6 hours as needed for **severe pain**.
- The goal is to discontinue this medication by 2 weeks after surgery.
- Common side effects of opioid pain medications include drowsiness, nausea, and constipation. Do not drive or operate machinery while on it.

### Constipation

- Opioid pain medications can cause constipation. **Sennosides 17.2 mg** was sent to your pharmacy. Take 1 tablet by mouth at bedtime as needed for constipation.

### Nausea

- If you have nausea or vomiting, **ondansetron (Zofran)** was prescribed. You may take 1 tablet by mouth every 8 hours as needed for nausea.

### Blood Thinner

- Although the risk of blood clots is extremely low, you have been prescribed a medication to minimize this risk.
- Take **one Aspirin 81 mg** by mouth two times per day for 30 days.

### Ice Therapy

- Begin immediately after surgery (4x per day for 15-20 minutes, or otherwise directed) for the first 2-3 days, then at your discretion thereafter. You may use ice packs, frozen vegetable packs (peas or corn work best), or an ice machine if prescribed.
- Avoid using ice packs directly on skin to prevent damage, blistering, or frostbite of skin.

### Activity

- Elevate the extremity whenever possible, when sitting, sleeping, or icing.
- Put pillows under the heel, **NOT the knee**, to keep the knee straight.
- **You must have assistance when walking or getting up (including using the bathroom)** for 24 hours after surgery.
  - You can obtain a walker from medical supply stores and pharmacies, such as Walgreens, CVS, Walmart, or specialized medical equipment retailers that rent or sell them. Walkers are also available online from sites like Amazon
- Use a cane, walker, or crutches until your balance and strength improve.
- Use non-slip bath mats, handles, an elevated toilet seat, and shower chair in your bathroom.
- **Weight bearing as tolerated.**

- Driving: when off narcotic pain medication and muscle relaxant, off crutches, and good leg control and strength. This usually takes about 6 weeks for most people.

#### Diet

- Begin with liquids and light foods (jello, soup, etc.). Progress to your normal diet as long as you don't have nausea.

#### Dental Care

- Unless it is an emergency or active infection, it is best to avoid dental work or other invasive procedures for **3 months** after a joint replacement.
- You typically do **not** need to be prescribed antibiotics for routine dental procedures in the future.

#### Follow-up

- Your first follow up appointment will be about 2 weeks after surgery.
- If you don't have a follow-up appointment scheduled, please call the office during business hours to arrange an appointment.

#### Emergencies

- Please call the office if you experience any of the following:
  - o Excessive bleeding at the surgical site (a small amount is normal)
  - o Drainage from the surgical site
  - o Fever over 101 degrees
  - o Worsening redness around the incision site
  - o Progressive numbness, tingling, or changes in the extremity
  - o Excessive nausea/vomiting
  - o Difficulty breathing
- During business hours, call the office at the above number.
- If you have a medical emergency, go to the nearest emergency room or call 911.

#### **List of common non-steroidal anti-inflammatory (NSAID) medications**

Aspirin (*may be taken at low dose (81 mg) with other NSAIDs*)

Celecoxib (*Common brand name: Celebrex*)

Ibuprofen (*Common brand names: Advil, Motrin*)

Meloxicam (*Common brand name: Mobic*)

Naproxen sodium (*Common brand names: Aleve*)

Diclofenac (*Common brand name: Voltaren*)

Indomethacin (*Common brand name: Indocin*)