Post-Op Instructions Total Knee Arthroplasty/Unicondylar Knee Arthroplasty

Please note that these instructions are general guidelines to be followed; however, any written or verbal instructions provided by your provider supersede the instructions below and should be followed.

DIET
- Begin with clear liquids and light foods (jellos, soups, etc.)
- Progress to your normal diet if you are not nauseated

WOUND CARE
- Maintain your operative dressing, loosen bandage if swelling of the foot and ankle occurs
- It is normal for the knee to bleed and swell following surgery. If blood soaks onto the ACE bandage, do not become alarmed, reinforce with additional dressing
- Change your dressing starting the 7th post op day. When changing the dressing, clean the edges of the wound with betadine swabs and allow this to dry. Do this every time you change the dressing.
- To avoid infection, keep surgical incisions clean and dry – you may shower by placing a plastic covering over the surgical site beginning the day after surgery.
- Beginning 3rd post op day you may shower as long as the incisions are dry (without drainage). Keep your dressing in place while showering
- NO immersion in bath or pool until instructed by your provider.

MEDICATIONS
- Local anesthetics are injected into the wound and knee joint at the time of surgery. This will wear off within 8-12 hours and it is not uncommon for patients to encounter more pain on the first or second day after surgery when swelling peaks.
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle.
- Common side effects of the pain medication are nausea, drowsiness, and constipation. To decrease the side effects take the medication with food. If constipation occurs, consider taking an over the counter laxative.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medications changed.
- Do not drive a car or operate machinery while taking the narcotic medication or while in sling
- If you are having pain that is not being controlled by the pain medication prescribed, you may take an over the counter anti-inflammatory medication such as ibuprofen or naproxen in between doses of pain medication. This will help to decrease pain and decrease the amount of narcotic medication required. Please take as directed on the bottle.
- If you are staying overnight antibiotics will given to you by your IV for 24 hours. If you are going home the same day oral antibiotics will be prescribed to you to be taken.
- If your provider discussed taking a blood thinner like aspirin after surgery please take it as directed. Please contact the office should severe distal arm pain occur or significant swelling of the distal arm and/or hand occur.

ACTIVITY
- Elevate the operative leg to chest level whenever possible to decrease swelling.
- Do not place pillows under knees (i.e. do not maintain knee in a flexed or bent position), but rather place pillows under the foot/ankle.
- Use crutches to assist with walking – you are able to bear as much weight as tolerated on operative leg unless otherwise instructed.
- Do not engage in activities which increase knee pain/swelling (prolonged periods of standing or walking) for the first 7-10 days following surgery.
- Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks.
- NO driving until instructed otherwise by physician
Sports Medicine Division Post-Operative Instructions  
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- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable

ICE THERAPY
- Icing is very important in the initial post-operative period and should begin immediately after surgery.  
- Use ice packs for 40 minutes every 2 hours daily until your first post-operative visit – remember to keep leg elevated to level of chest while icing. Care should be taken with icing to avoid frostbite to the skin.

EXERCISE
- Begin exercises 24 hours after surgery (straight leg raises, quad sets, heel slides, and ankle pumps) unless otherwise instructed.  
- Discomfort and knee stiffness is normal for a few days following surgery. It is safe to bend your knee in a non-weightbearing position when performing exercises unless otherwise instructed.  
- Complete exercises 3-4 times daily until your first post-operative visit – your motion goals are to have complete extension (straightening) and 90 degrees of flexion (bending) at your first post-operative appointment unless otherwise instructed.  
- Perform ankle pumps continuously throughout the day to reduce the risk of developing a blood clot in your calf.  
- If formal physical therapy (PT) is needed, it is typically arranged prior to your surgery date. It generally begins several days after your surgery date unless your provider has stated otherwise. If you are unsure of this please call the office at 740-454-3273 to receive instructions for starting therapy.

EMERGENCIES**
- Contact our office M-F 8:00AM – 5:00PM at 740-454-3273  
- Painful swelling or numbness (note that some swelling and numbness is normal)  
- Unrelenting pain  
- Fever (over 101° – it is normal to have a low-grade fever for the first day or two following surgery) or chills  
- Redness around incisions  
- Color change in distal arm and/or hand  
- Continuous drainage or bleeding from incision (a small amount of drainage is expected)  
- Difficulty breathing  
- Excessive nausea/vomiting  
- Calf pain  
- If you have an emergency after office hours or on the weekend, contact our after-hours answering service at 740-454-3273 to reach an OAZ provider on call.  
- If you have an emergency that requires immediate attention proceed to the nearest emergency room.

FOLLOW-UP CARE/QUESTIONS
- If you do not already have a post-operative appointment scheduled, please contact our office at 740-454-3273 to schedule.  
- Typically, the first post-operative appointment following surgery is 10-14 days following surgery  
- If you have any further questions please contact us during office hours