



POST-OPERATIVE PATIENT INFORMATION: TOTAL KNEE REPLACEMENT

A total knee replacement is a relatively common procedure that is done to treat an arthritic, or 'worn out' knee. This can be due to osteoarthritis, but occasionally rheumatoid arthritis, gout, bone dysplasia, avascular necrosis or trauma.

This information sheet will give you general information about your post-operative plan and what to expect following surgery.

If you have concerns during business hours, please contact South East Orthopaedic Surgery on 0484 739 550 or via email admin@southeastortho.com.au Please note voice mail messages and emails will be replied to by the next business day. If you have concerns outside of business hours, please contact the switchboard at Frankston Private Hospital on (03) 8796 1300. If you have having a limb or life threatening emergency, please dial 000 or present to the Frankston Public Hospital Emergency department.

WHAT TO EXPECT FOLLOWING SURGERY

You are generally in hospital for two to four days, but recovery time is highly variable. Some people feel ready to go home the following day and some people require a few weeks in rehabilitation as they may not have the supports at home to cope.

Most people using walking aids for at least a few weeks following surgery.

Full recovery can take up to two years as scar tissue heals and muscles are restored by exercise, however most people are walking free of gait aids by six weeks. Approximately 15-20% of people will have ongoing pain after two years to varying degrees.

Physiotherapy will commence on the first day following surgery. You are usually asked to get out of bed and start mobilizing. This is really important to prevent deep vein thrombosis, pneumonia, pressure sores and other conditions that can occur with immobilization. Bending your knee is also important. You will be given appropriate pain medication following your surgery and you will need to start bending your knee immediately. If you do not bend your knee

as per your physiotherapist's instructions there is a risk your knee could become permanently stiff and require a repeat manipulation under anaesthesia.

WOUND MANAGEMENT

If you have any concerns with the wound, please contact South East Orthopaedic Surgery on 0484 739 550 or via email admin@southeastortho.com.au Please note voice mail messages and emails will be replied to by the next business day. If you have concerns outside of business hours, please contact the switchboard at Frankston Private Hospital on (03) 8796 1300.

SWELLING

It is very common for the knee to be swollen following a total knee replacement. It can be swollen for up to two years in some instances, although this is rare. Ice packs can help with the swelling and should be applied regularly in the early post-operative period.

WEIGHT BEARING

You are normally able to weight bear immediately after your knee replacement. Your physiotherapist will give you some exercises to do whilst in hospital and you are encouraged to mobilise to the toilet and around the ward as soon as possible. You will need someone to assist you when mobilizing initially until you are confident to move by yourself.

DRIVING

Returning to driving is an individual assessment. If your range of motion allows you to drive, your pain is controlled and you are not on medication that makes you drowsy, you can return to driving. Most people start driving approximately six weeks following a knee replacement.

POST-OPERATIVE APPOINTMENT

Please contact the rooms via 0484 739 550 or admin@southeastortho.com.au to make a post-operative wound review appointment approximately two weeks following your surgery. If you have travelled a significant distance and would prefer to see your GP for

removal of sutures, this can be arranged. You will likely need to pay a consultation fee to your GP.

PHYSIOTHERAPY

Your physiotherapist will see you every day whilst you are an inpatient at the hospital. When you go home, you generally see a physiotherapist once a week to check your range of motion and help you with your post-operative exercise regime.

SMOKING CESSATION

It is important you smoke as little as possible (ideally not at all) to minimize wound problems and reduce risk of infection following your surgery.

NUMBNESS

It is normal to have some numbness around the scar following surgery, usually on the inside of the lower part of the leg.

PAIN

Some post-operative pain is normal following surgery. Your surgeon and anaesthetist work together to make you as comfortable as possible on the ward and then when you are discharged home. If you have severe, unrelenting or escalating pain that is not relieved by pain-killers please contact your surgeon, GP or emergency department.

EMERGENCIES

It is important to contact your surgeon, GP or emergency department if you have any of the following symptoms:

- Severe unrelenting pain not relieved by analgesia, rest, ice, compression or elevation.
- Severe swelling of the foot or calf that does not resolve with elevation
- Redness around the wound
- Discharge from the wound or pin sites
- Fevers, night sweats or unexplained shaking or feeling cold
- Shortness of breath or chest pain