

Total Knee Replacement

Getting Ready to Learn About Total Knee Replacement

Learning something new can be hard. It is even harder if you are not feeling well. The purpose of this education plan is for you and the staff to review this information together. Here are some good things to tell the staff:

- Who you want to learn with you. We would like to have someone who will be helping you at home learn with you.
- The best way for you to learn. Do you learn best by reading a book or pamphlet, or by doing things yourself?
- If you are not feeling well, if you are in pain or you cannot focus on learning right now.

This information is important to my health. We may explain something more than once. We will be giving you information in small bits over several days.

What I Need to Learn About Total Knee Replacement

By the time I leave the hospital I will be able to tell the staff:

1. How to be active and be careful following surgery.
2. How to care for my wound following surgery.
3. How to eat in order to heal from surgery.
4. How to manage pain after surgery.
5. Other issues patients with surgery may have.
6. When to contact the doctor's office or therapy for questions.

The staff will use three questions to teach me about Total Knee Replacement:

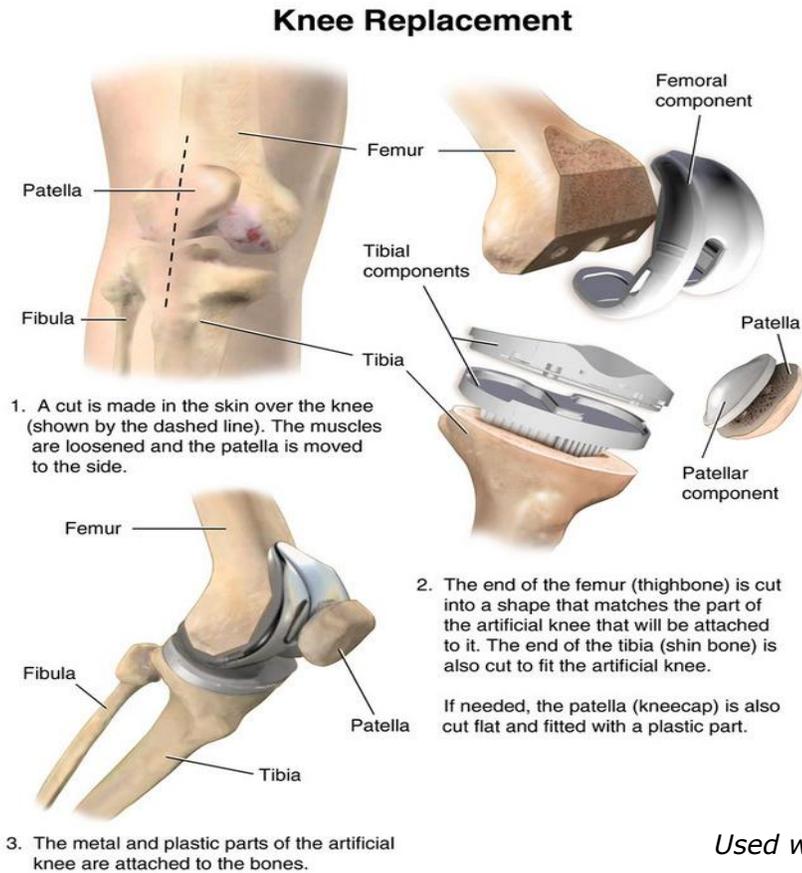
1. What is my main problem?
2. What do I need to do?
3. Why is this important to me?

The staff will ask me to repeat back important points in my own words, or ask me to show what I have learned. They want to make sure that I know about my disease and how to take care of myself.

What is my main problem?

I have just had or am about to have a total knee replacement. In order for me to have the best possible outcome I need to know what to do to heal myself. I also need to know a little bit about the surgery and what it does. A total knee replacement is a surgery to remove an arthritic knee joint and replace it with an artificial knee joint. This may be done when my knee joint is painful or is not working well and other treatments have not helped. The knee replacement should relieve the problems of a painful knee. It will be easier for me to walk and do other activities that require me to use my knee.

This picture shows what the surgery does.



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What do I need to do?

I will be able to tell the staff how I will be active and be careful following knee surgery.

- Do not put a pillow under my operative knee for comfort. This will result in tightening the muscle behind my knee and make it harder to straighten out my knee.
- Do not pivot, twist, jump or kneel on my operative knee until cleared by my doctor. This will be discussed at my 6-week post-operative appointment.
- Do not scoop up my operative leg with either my good leg or a sheet when getting in and out of bed.
- Only put as much weight on my leg as I am allowed to. My doctor, therapist, or nurse will tell me how much is allowed.

Be Active/Exercise

- Exercise for short periods often through out the day
- Walk several times throughout the day using my walker or crutches.
- Do the exercises ordered by the doctor or therapists. These were discussed in the pre operative visit if I attended. The nurse may give me another copy of the exercises ordered by my doctor.

Use of Assistive Devices

- Place a pillow between my legs when turning onto my side in bed.
- Use a walker or crutches. They will help me get around safely.
- Use an elevated toilet seat if it is more comfortable.
- Use my reacher, sock-aide or long-handled sponge to help myself get dressed or bathed if needed.
- Use my bath seat or grab bars in the bathroom for safety if told to by my physical or occupational therapist.

I will be able to tell the staff I will care for my wound following knee surgery.

- Keep incision clean and dry. Do not put my leg under water until cleared by my doctor.

- Do not apply heat (heating pad, hot water bottle) to operative knee until cleared by my doctor.
- Do not use ointments, lotions or creams on my operative leg until cleared by my doctor.
- Wash my hands before touching my incision or bandage.
- Don't sleep with my pets. Keep them away from my incision and my bandage.
- Watch for signs of infection.
 1. Increased tenderness
 2. Swelling
 3. Drainage
 4. Fever
 5. Redness

I will be able to tell the staff how I will eat in order to heal from my knee surgery.

- Eat at least 2 servings of food rich in protein each day. Foods rich in protein include meats, chicken, turkey, fish, eggs, beans, peas, and peanut butter.
- Eat 3 servings of dairy foods rich in protein. Dairy foods that are rich in protein include yogurt, cheese and milk.
- Eat 5 servings per day of fruits or vegetables. These foods are rich in vitamins that will help my incision heal.

To help keep my bowels working normally while I recover from surgery, I can:

- Eat whole grain breads and cereals. Eat brown or wild rice instead of white rice.
- Add beans, peas, or lentils to soups and casseroles.
- Eat fresh fruits and vegetables.
- Drink plenty of fluids. Set a goal of 6 to 8 cups per day.

I will be able to tell the staff how I will manage pain for knee surgery.

- Take pills for pain as ordered by my doctor
- Do not wait until the pain is too bad before taking my pills. The medicine may not work as well if I wait too long to take it.

- Call my doctor if I think my pills are not helping or if I feel I am having side effects.
- Check with my doctor or pharmacist if I have questions about my medicine.

Precautions with pain medications

- Do not drive when taking pain pills that make me drowsy
- Let my doctor know if I am taking aspirin or another blood thinner medicine

I will be able to tell the staff I will manage other issues patients with knee surgery may have.

Use of TED hose

- I will wear elastic stockings (TEDS) as instructed by my doctor.
- Change and wash TEDS daily
- Use baby powder on my legs before I put on the TEDS
- Get help to apply TEDS. I will avoid wrinkles in the TEDS.
- I will wear sweat socks over the TEDS for more comfort.
- I will ask my doctor when I can stop wearing TEDS

Future visits to doctors and dentists

- Tell my other doctors about my knee surgery.
- I may need medicine to prevent infection before I have work on my teeth or other procedures. I will ask my doctor.

Use precaution in metal detectors

- Metal used in knee surgery may set off metal detectors at airports.

Driving Precautions

- I will not drive until my doctor gives the OK.
- I can talk to my doctor about getting a short term handicap-parking pass to use if I need it.

I will be able to tell the staff when I will contact the doctor's office or therapy for questions.

Call my provider right away if:

- I have a fever.

- I am in uncontrollable pain.
- I become short of breath cough up blood or have chest congestion.
- I have calf pain.
- Call my doctor if I have shortening or swelling of my leg, a sharp increase in pain, or if I fall.
- I have excessive drainage from the wound.
- My knee has unusual swelling, warmth, or redness.
- I have chest pain.
- Call my doctor if I have bruising or a lot of bleeding.

Call during office hours if:

- I have questions about the procedure or its result.
- I need to make another appointment so my progress can be checked.

Why is this important to me?

Following these directions will help me heal and keep me safe after surgery.

As part of my care I have received this education plan. I may also receive:

- Physical and Occupational Therapy Instructions for Total Knee Replacements (Doctor specific and Generic)

Total Knee Replacement Education Plan

Resources for Staff

- [Total Knee Replacement](#)- LexiComp
- [Total Knee Arthroplasty](#)- Nursing Reference Center Plus
- [Knee Replacement](#)- Nursing Reference Center Plus

Teaching Tools (Items given to the patient)

- Total Knee Replacement Education Plan

References:

- [Total Knee Replacement](#)- LexiComp
- [Knee Replacement](#)- Nursing Reference Center Plus
- [Total Knee Arthroplasty](#)- Nursing Reference Center Plus
- Cioppa_Mosca, J., Cahill, J., Cavanaugh, J.T., Corradi-Scalise, D., Rudnick, H., & Wolff, A.L. (2006) Postsurgical Rehabilitation Guidelines for the Orthopedic Clinician, Mosby, Inc.

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Always close each teaching session with the question, “What questions do you have for me?”

***This page is intended for staff use only. Do not give to the patient. This document is not a part of the permanent medical record.**