TOTAL KNEE REPLACEMENT - Discharge Care

Total Knee Replacement

WHAT YOU SHOULD KNOW:

Total knee replacement is surgery to replace a knee joint damaged by wear, injury, or disease. It is also called a total knee arthroplasty. The knee joint is where your femur (thigh bone) and tibia (large lower leg bone or shin bone) meet. A small bone called the patella (kneecap) protects your knee joint.



AFTER YOU LEAVE:

Medicines:

- Pain medicine: You may be given a prescription medicine to decrease pain. Do not wait until the pain is severe before you take this medicine.
- **NSAIDs:** These medicines decrease swelling, pain, and fever. NSAIDs are available without a doctor's order. Ask your primary healthcare provider which medicine is right for you. Ask how much to take and when to take it. Take as directed. NSAIDs can cause stomach bleeding and kidney problems if not taken correctly.
- Antibiotics: This medicine will help fight or prevent an infection. Take your antibiotics until they are gone, even if you feel better.

Anticoagulants

are a type of blood thinner medicine that helps prevent clots. Clots can cause strokes, heart attacks, and death. These medicines may cause you to bleed or bruise more easily.

- Watch for bleeding from your gums or nose. Watch for blood in your urine and bowel movements.
 Use a soft washcloth and a soft toothbrush. If you shave, use an electric razor. Avoid activities that can cause bruising or bleeding.
- Tell your caregiver about all medicines you take because many medicines cannot be used with anticoagulants. Do not start or stop any medicines unless your caregiver tells you to. Tell your dentist and other caregivers that you take anticoagulants. Wear a bracelet or necklace that says you take this medicine.
- You will need regular blood tests so your caregiver can decide how much medicine you need. Take
 anticoagulants exactly as directed. Tell your caregiver right away if you forget to take the medicine,
 or if you take too much.
- o If you take warfarin, some foods can change how your blood clots. Do not make major changes to your diet while you take warfarin. Warfarin works best when you eat about the same amount of vitamin K every day. Vitamin K is found in green leafy vegetables, broccoli, grapes, and other foods. Ask for more information about what to eat when you take warfarin.
- Take your medicine as directed. Call your primary healthcare provider if you think your medicine is not helping or if you have side effects. Tell him if you are allergic to any medicine. Keep a list of the medicines, vitamins, and herbs you take. Include the amounts, and when and why you take them. Bring the list or the pill bottles to follow-up visits. Carry your medicine list with you in case of an emergency.

Follow up with your primary healthcare provider or orthopedist as directed: You may need to return to have your wound checked and stitches, staples, or drain removed. Write down your questions so you remember to ask them during your visits.

Physical therapy: You may need to see a physical therapist to teach you special exercises. These exercises help improve movement and decrease pain. Physical therapy can also help improve strength and decrease your risk for loss of function.

Self-care:

- Care for your wound as directed: Ask how and when to change your bandage and clean your wound.
- Use ice: Ice helps decrease swelling and pain. Ice may also help prevent tissue damage. Use an ice pack or put crushed ice in a plastic bag. Cover it with a towel, and place it on your knee for 15 to 20 minutes every hour as directed.
- **Wear pressure stockings:** These are long, tight stockings that put pressure on your legs to promote blood flow and prevent clots.





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- Use a knee brace, cane, walker, or crutches as directed: These devices will help decrease your risk of falling.
- **Prevent dislocation of your knee implant:** Do not cross your legs so that your ankle is resting on the knee where you had surgery.

Contact your primary healthcare provider or orthopedist if:

- You have a fever.
- You have trouble moving or bending your knee.
- You have back pain or lower leg pain when you bend your foot upwards.
- You have questions or concerns about your condition or care.

Seek care immediately or call 911 if:

- You feel like you are going to faint.
- Blood soaks through your bandage.
- Your incision comes apart.
- Your incision is red, swollen, or draining pus.
- You cannot walk or move your knee.
- Your leg feels warm, tender, and painful. It may look swollen and red.

- You suddenly feel lightheaded and short of breath.
- You have chest pain when you take a deep breath or cough. You may cough up blood.

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