

Knee Replacement

Post-op Medications

*Non-Steroidal Anti-inflammatories

Celebrex 200 mg Daily

These medications are to be taken with food. They will NOT be prescribed to patient taking blood thinners, patients with compromised renal functions, or GI contraindications.

Please do not take any other over the counter NSAIDS (Advil/Motrin/Aleve) while taking Celebrex.

*SEVERE PAIN

Oxycodone 5mg every 4-6 hours as needed.

*MODERATE to MILD PAIN

Tylenol (Acetaminophen) 1000mg every 8 hours as needed.

The recommended maximum daily dose of Tylenol is 3000mg/day with normal liver function.

***Narcotics may cause nausea and/or constipation.**

Colace 100mg 2x day – stool softener.

Senna 2 tabs at bedtime.

Should you still experience constipation, please call the office

*DVT Prophylaxis Treatment Varies

If you normally take blood thinners such as coumadin, Eliquis, Plavix, Pradaxa, Xarelto, etc., these medications will be resumed post-surgery. You will NOT be prescribed NSAIDs.

Patients who cannot tolerate Aspirin or who have gastro-intestinal issues will NOT be prescribed Aspirin.

All other patients will receive: Aspirin 81mg for 4 weeks.

POST OP:

Swelling is normal – expect swelling above the knee, and even down the leg to the foot and ankle. The easiest way to manage swelling is to elevate. Reduction of swelling is most effective when the limb is above the level of your nose.



Lying in bed or on the couch with the leg elevated is the best position to reduce swelling. Please keep your leg elevated a minimum of 4x a day for at least 20-30 minutes. ** As swelling decreases, your ability to bend and straighten the knee will increase.*

Avoid prolonged sitting or sleeping in a recliner. **Do not** place any pillows under the knee.

Ice the knee. You can use the cooling device provided to you at the hospital – this can be left for long periods of time as it does not get as cold as an icepack. If you are using an icepack, apply in 20-minute intervals.

Bruising is normal and will occur. You may see bruising all the way down your leg to your toes.

You will go home with a PICO dressing; this is a water-resistant dressing applied to your surgical incision in the operating room. This dressing will remain in place for 2 weeks. The dressing will be removed at your first post-op visit. It is okay to shower with the dressing in place but **DO NOT** submerge the dressing. **Please note: The battery pack will lose charge after 1 week. You may replace the batteries or simply disconnect the cord.*

Eat healthy and limit sugary snacks – protein promotes wound healing.

Please call the office should you experience any redness or drainage from the incision site.

Dental prophylaxis

Avoid any non-emergent dental visits. We recommend waiting 3 months after surgery before having a dental cleaning and 6 months for any dental procedure.

After this 6-month period, we will have you take antibiotics prior to any dental work, for life.

Knee Replacement**Activity:**

Early ambulation (walking) is encouraged. Progression of assistive devices is encouraged. – please remember safety first!

Walker ➡ Cane ➡ No Assistive Device

Exercises will help strengthen the muscles around your new knee and improve your range of motion. Range of motion includes both bending (flexion) and straightening (extension) of the knee.

The Goal is to improve your function, strength, flexion, and extension.

- Your physical therapist will guide you in getting your optimal strength and range of motion post-surgery.
- It is imperative that you work on strengthening and range of motion at home.
- Building range of motion takes consistent, daily effort – be **persistent!**



