

# TOTAL KNEE REPLACEMENT



**DISCHARGE:**  
Plan for Discharge  
from hospital by 11 a.m.  
Date: September 2008

This booklet has been designed by the health care professionals of Marquette General Health System to provide you with information about having a Total Knee Replacement. Please bring this booklet with you to the hospital.

Recovery is a gradual process and it will take time after surgery. Plan for your return home before you enter the hospital.

- Plan to be in the hospital for three or four days.
- Plan for a temporary decrease in your activity.
- Leave your home clean and in order, remove throw rugs.
- Prepare some meals in advance and freeze them.
- Place a sturdy chair with arms in your living room, near a table for books, hobby supplies, TV remote, telephone, or other items you want to have within reach.

### **THINGS TO DO THE NIGHT BEFORE SURGERY**

- Arrange your kitchen so utensils, etc. are within easy reach.
- Take a shower the night before surgery at home.
- Do not eat or drink anything after midnight, the night before surgery. (unless your doctor wants you to take your medication with a small sip of water the morning of your surgery before you arrive at the hospital)
- Leave your valuables at home.
- Do not wear nail polish to the hospital.
- Pack some comfortable loose fitting clothes (like sweats or pajamas) so you will be ready for Physical Therapy and other activities.
- Remember, you will not be able to smoke while in the hospital.
- You can bring any equipment you may already have from home.
- Bring a list of all the medications you currently take (prescription and over-the-counter).
- Bring flat rubber soled shoes (tennis shoes) that tie or slip on.
- If you have an advance medical directives, bring a copy.



While you are in the hospital, health care providers will help you perform self-care activities. Self-care allows you to remain as responsible and as independent as possible. It also may help improve your self-esteem.

While in the hospital, you will learn how to care for yourself before you return home. Your participation is important to increase your independence.

The following is a list of questions that you need to consider before you are admitted to the hospital.

- Do you have an elevated toilet seat and a walker ready for you when you go home? (Let your nurse know if you do not have these items).
- Who will be helping you when you go home? (You will need someone to help you when you go home for about two weeks).

### **THINGS THAT HAPPEN ON THE DAY OF YOUR SURGERY**

You will be admitted to your room and a nurse will ask for your list of medications. The nurse will take your health history. You will be given a hospital gown to wear. You will be fitted with white support stockings.

When the operating room is ready for you, you will be taken to the holding room. Your family may stay with you until you arrive at the holding room. While you are in the holding room, an IV (intravenous line) will be started in your arm and you will receive a dose of antibiotics. You will then be taken into surgery.

While you are in surgery, your family may wait for you in the OR waiting room lounge.

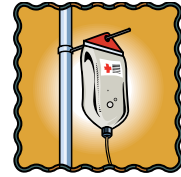
After surgery, you will stay in the recovery room for at least two hours until you are awake. You will then be taken back to your room.

Your doctor will let your family know how you did in surgery while you are in the recovery room.

Once you are back in your room, your nurses will be monitoring your condition. Your family will be allowed to see you then.



You will have an IV, you may have a drain in your knee, and you may have a catheter in your bladder to aide in urinary drainage. (This is temporary and will be removed as soon as you are able to move better). Your bed will have an overhead trapeze attached to it so it will be ready for you when you start your therapy. You may have sequential teds on your legs or feet. These assist your body to circulate your blood by a pumping action.



You may have a clear liquid meal today.

Your nurse will give you pain medication, and will monitor your levels of comfort. Your nurse will inform the doctor when and if pain medication adjustments are needed. You need to let the nurse know when your level of comfort is low. A pain scale is a tool used to describe and monitor your level of comfort. “0” on the pain scale is no pain, and “10” is the worst pain you could imagine. Although pain-free surgery isn’t a reality yet, current pain control measures can make your recovery more comfortable.



When you turn onto your side, you will have pillows placed between your legs. This will be more comfortable. Your nurse will assist you to turn often.

You will have a CPM machine on your leg today. It is an electric exercise machine used to flex and extend your new knee. The machine is programmed to flex and extend at set degrees. The degrees will be increased daily.

You may need to use an incentive spirometer. It is a hand held device that has a tube attached to it, and it will assist you in taking slow deep breaths. This is important after surgery to keep your lungs clear. You can also help your lungs by taking deep breaths and coughing. You will be expected to use your spirometer yourself every two hours while you are awake.

You may have an ice pad on your knee for comfort. It is velcroed around your knee and connected to a cooler that pumps cold water to the pad.

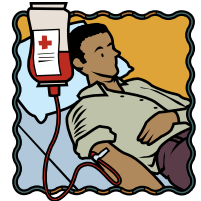
## **THINGS THAT HAPPEN ON THE DAY AFTER YOUR SURGERY**

- You will have your CPM on today.
- You will be up in a chair at least twice today with the help of a therapist or a nurse.
- You will start your Physical Therapy program today and that may include walking.
- You will wear your white support stockings and sequential teds or foot pumps. You will continue to do so throughout your hospital stay.
- Your IV line will be removed today. You will have a little cap left in your arm from the IV line and it will remain there until all of your antibiotics are given.
- You will be able to resume your normal diet.
- You may have your ice pad applied to your new knee today.
- You will have blood work done today to check your hemoglobin and your protime. Your doctor wants to know your hemoglobin level (this is the part of your blood that carries your oxygen) and your protime level (this is a measurement of the thickness or thinness of your blood).
- You may receive a blood transfusion depending on your hemoglobin level. If you did not need your own blood in the operating room, you will receive that blood first.
- You will receive a blood thinner today and everyday during your hospital stay to prevent blood clots.
- Your nurse will give you a stool softener today. You will need a stool softener because you are less active than normal, and your pain medication can be very constipating.
- If you have a foley catheter, it may be removed today.



## **THINGS THAT HAPPEN ON THE SECOND DAY AFTER SURGERY**

- You will sit in a chair at least twice today and you will sit up a little longer than yesterday. You may have your ice pad on too.
- Physical Therapy will start your walking program today (if you haven't already), and you will need to make sure that you have something for pain before this therapy begins.
- The CPM will be on your leg as ordered. Today, the degrees of flexion will be increased.
- If you have a foley catheter, it may be removed today and you will then be able to walk to the bathroom with the help of the staff.
- Your drain will be removed today and probably your IV cap too.
- Pain relief will be discussed between you and your nurse today and everyday, while you are in the hospital.
- You will have blood work done again today to check your hemoglobin and your protime levels.
- You may have your blood transfusion today. This depends on your hemoglobin levels.
- Your nurse will ask you if you had a bowel movement today (and actually everyday while you are in the hospital).
- You will continue to wear your white support stockings, and the sequential teds or foot pumps.



## **THINGS THAT HAPPEN ON THE THIRD DAY AFTER YOUR SURGERY**

- You will have your knee dressing changed today.
- Your physical therapist will continue with your walking program. You will walk longer today than you did the day before, and this pattern will continue until you are discharged.
- You will be sitting in the chair at least twice a day for as long as you are able. You should be able to tolerate sitting in the chair for longer and longer periods of time each day.
- You may have another blood test today.

- You may have your ice pad on your knee.
- When you need to go to the bathroom, ask your nurse to walk with you. Have you had a bowel movement? Tell your nurse if you have or have not had a bowel movement.
- When getting out of bed today, try not to use the overhead trapeze, and put the head of the bed down. This will be more like the way you will be getting in and out of bed when you are at home. You should do as much for yourself as possible today, but remember that your nurse or therapist must be with you for assistance if you are getting in and out of the chair or the bed.
- You will have your CPM machine on today.

### **THE DISCHARGE PROCESS**

- Your nurse will review your discharge instructions with you and give you a copy.
- Your physical therapist will also give you discharge instructions.
- You will have a follow-up appointment made for you to see your doctor.
- A Home Health nurse may visit you today and discuss home care options, if your doctor has ordered home care.
- Medication instructions will be reviewed with you and a copy will be given to you.
- You will be able to ride in a car, but you can't drive until you have permission from your doctor.
- You may have sex in any position that is comfortable, but avoid kneeling for at least six weeks.

You need to be aware of some signs and symptoms that need to be called to your doctor or his nurse if they occur. Call if you have any of the following:



- ❶ Temperature above 100.5°F orally for 24 hours.
- ❷ Increased redness, swelling, or pain at the wound site.
- ❸ Drainage from the incision or opening of the wound.
- ❹ Failure of the wound to heal.
- ❺ Calf or thigh pain, tenderness or swelling.
- ❻ Numbness or tingling of the leg.
- ❼ Changes in color and temperature of the leg.
- ❽ Foul smelling urine or painful urination.
- ❾ Any other concerns you may have.

### **THINGS TO REMEMBER:**

- Avoid heavy lifting or strenuous activity for six weeks.
- Do not shower or take a bath until your staples are removed.
- Do not place a pillow under the bend of the knee when lying in bed or when sitting in a recliner.
- You may lie on your side in bed.
- Wear your elastic stockings for two weeks after you leave the hospital. (You may have them off during the day to wash them.)
- Sit only in chairs with arms rests.
- Do not sit in a chair that is too low.
- Climb stairs as you were taught by physical therapy.
- Alert all your doctors and dentists that you have had a Total Knee Replacement. You may need to take an antibiotic before certain tests (colonoscopy, catheterization, etc,) and before dental work (even teeth cleaning).

