

# Total Knee Replacement / Arthroplasty

With advances in surgery, preparing yourself for surgery and actively participating in your recovery more time is focused on your recovery in the community or your own home.

## How long will I be in hospital for?

**Up to 3 days**



*The best results are obtained when people are provided the right information to become informed, motivated, and confident.*

## Information about my stay in hospital Book 2

This brochure has been designed to provide you with information about your hip replacement. The information is general, and your specific hip problem may require different recommendations. We trust that you will find the following information helpful. At the same time we realise that there is a lot of information, should you find any of the information confusing or hard to understand, your surgeon or other members of the health care team will be glad to answer your concerns either via phone or on your next visit.

## Summary of My Stay in Hospital

Day	Activities	Goals
<b>Day 0</b>	May sit out of bed	1. Manage pain
<b>Day 1</b>	Sit out of bed for breakfast Physiotherapist – walking Sit out for dinner Shower Manage my pain Reposition self to relieve pressure on back / heels and buttocks	1. Perform your exercise program independently 2. Mobilise with therapist 3. Practise getting in and out of bed
<b>Day 2</b>	Mobilise with small frame / crutches Sit out of bed for most of the day Shower self Dress in day clothes Arrange transport for discharge tomorrow	1. Aim for 3 walks with therapist/ nursing staff 2. Independently get in and out of bed 3. Independently showering 4. Dressing independently
<b>Day 3</b>	Stair assessment Mobility and personal care equipment to be organised	Discharge with outpatient follow up as required

## What Do I Need To Bring Into Hospital With Me?

- **Personal toiletries** – tooth brush / paste, shampoo, razors, deodorant etc.
- **Pyjamas / nighties**
- **Day Clothes** - as you begin to walk after your operation you may prefer to wear your usual day clothes – for example tracksuit or trousers.
- It is important that you have a **comfortable pair of shoes** to wear after your operation that offers support around the heel. Low heeled, non slip, slip on shoes are best to wear. **NO SCUFFS OR THONGS.** Your leg/ foot will swell after your operation so shoes should not be tight.
- There is limited storage space for suitcases / carry bags. It may be necessary for a family member to take large bags home for you.

**PLEASE DO NOT BRING large sums of money, jewellery or other valuables.**

# Day of Surgery

- You will be admitted to the hospital the day of your surgery.
- The surgery itself takes approximately 1-2 hours. When you arrive in theatres there is a lot of preparation that takes time. There is also time spent in recovery, therefore it may be 4 or 5 hours until you are sent to the ward.

## **What to expect after Surgery**

On return from the recovery room we will continue to monitor you closely. Things such as your blood pressure, pulse rate, temperature, pain levels, fluids going in and coming out, dressings etc will all be monitored closely.

## ***Walking***

You may sit out of bed on the same day as your operation

To start healing and prevent complications it is important that you start walking early and promote your independence immediately

The morning after your surgery you will be assisted to sit out of bed for breakfast. When sitting out of bed

- Do your exercises
- Take deep breaths hourly

## ***Intravenous Fluids (Drip)***

When you wake up after your operation you will have a drip (cannula) in your arm. The drip is used to give you fluids (to keep you hydrated) and also antibiotics.

- You may also have pain medication going through your drip. The intravenous fluids are usually stopped the day after your operation, when you are able to tolerate food and water.

## ***Oxygen Mask***

You will have an oxygen mask that covers your mouth and nose or nasal prongs which sit under your nose.

- This gives your lungs some extra oxygen while you are drowsy and will continue for a day or two. Your oxygen levels will be monitored to assess your requirements.

## ***Drains***

You may have a drain that goes to your wound.

- This drain is there to help remove any excess drainage from your hip area and is usually removed the following day.

## ***Urine Catheter***

You may have a tube that goes to your bladder (called a catheter).

- If you do, this tube will drain urine from your bladder and you will not have to use a bed pan or bottle to pass urine. This catheter is usually removed the morning after surgery

## ***Calf or Foot Pumps and Stockings to prevent blood clots in your legs***

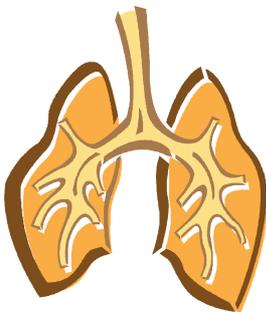
You will have cuffs around your calves or your feet which inflate and deflate at regular intervals to help pump the blood around your legs.

- You will also have on a pair of white, knee high stockings. These stockings help stop blood pooling in the veins in your legs. The calf pumps and stockings are used to help prevent blood clots forming in your legs.

**The best way to prevent blood clots is sitting out of bed and walking.**

## **Walking and Exercises**

### **Breathing Exercises**



Take 5 long and slow breaths. Each breath should be deeper than the previous breath. Think about getting air to the bottom of your lungs.

The physiotherapist will visit you on the first day after your operation. They will give you exercises to commence while you are in bed. If you feel up to it and the doctor has agreed that you can sit out of bed then the physiotherapist will help you to sit out of bed in the afternoon.

It is important to actively participate in the physiotherapy program to assist in your recovery and improve your mobility for going home.

Each hour it is important to do your exercises. Begin to sit out of bed for all meals.

It is important that you begin to increase your independence.

## Orthopaedic Team

- Will visit you regularly in hospital to monitor your progress
- Happy to answer any questions that you may have

## Discharge Planning

- Your discharge date and destination would have been discussed with you in the Preadmission Clinic.
- After your operation – the orthopaedic team begin discussions with you to start planning your discharge home.
- It is important that you actively participate in your recovery by walking and sitting out of bed.

## Pain Management After Knee Replacement Surgery

Pain control is important, not only for keeping you comfortable but also it may reduce the risk of developing other complications such as chest infections or blood clots. If your pain is well controlled tasks such as getting out of bed and doing your exercises will be a lot easier.

After surgery the operation site will be significantly painful.

**It is important to inform your nurse or doctor if your pain is not adequately controlled or that the pain medication is making you feel unwell, eg. Feeling sick, dizzy or confused.**

On discharge you'll be given a prescription for pain tablets. It is important that you continue taking your pain medication (as required) at home so you are able to continue with your exercises.

## Wound Care

- Your wound will be kept covered at all times.
- The dressing will only be changed when required as this prevents unnecessary exposure to possible infections.
- **A waterproof dressing will be applied to your wound so that you can shower and start to increase your independence**
- When you go home it is important for you to visit your local doctor at 1 week to look at your wound.
- Most patients will have dissolvable stitches. If you have non dissolvable stitches or staples, these need to be removed about 10-12 days after your surgery. A health professional will let you know before you leave the ward.

## Hygiene

The nurse will assist you to the shower for the first day

It is important that you try and be as safe and as independent as possible in the shower in order to prepare yourself to manage at home.

## **Pressure Sores and Pressure Area Care**

While you are in bed you are at risk of developing pressure ulcers (commonly known as bed sores).

- To help prevent these from occurring you will need to change your position at least every 2-4 hours when in bed or when sitting in the chair. Please report any areas of discomfort or burning, especially on the heels or buttocks.

## **Nutrition**

After your surgery you may resume your normal diet when you are awake enough. If you feel sick or vomit you will be given medication to help ease the symptoms. Please inform nursing staff if you start to feel sick.

## **How long will I be in hospital for?**

- **Up to 3 days**
- Full recovery from the surgery takes about 3-6 months, depending on the type of surgery, your overall health, and the success of your rehabilitation.

You will be discharged from hospital once your doctor has given you the OK, the physiotherapist has assessed your mobility and feels you can manage at home safely, and the occupational therapist has assessed you and organised any equipment or home modifications as required.

# Post-Surgery Exercises

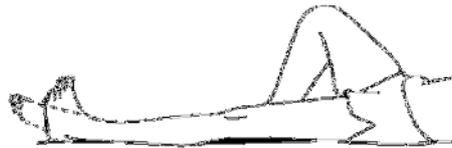
It is crucial to the success of your surgery that we get you moving as soon as possible after your operation. While resting in bed it is important that you keep your muscles working efficiently. We encourage you to complete the following exercises numerous times during the day. As well as these exercises it is encouraged that you regularly move your feet and ankles up/down and in circles to help keep the blood flowing. This helps to prevent clots.

## 1. Deep Breathing Exercises

Take a slow deep breath in, trying to expand your chest, hold for 3-4 seconds then slowly let the air out. Repeat 10 times every hour.

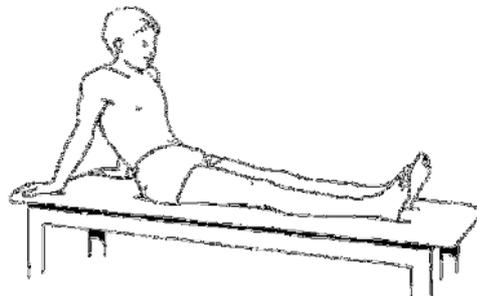
## 2. Ankle Pump Exercises

When resting in bed move your ankles and feet up and down as well as in circles. Continue these exercises frequently whenever you think of it.



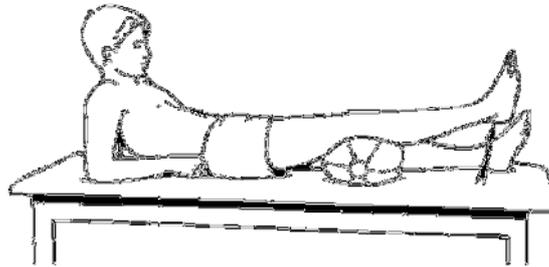
## 3. Isometric Quadriceps Exercises

Hold the thigh muscle tight by pushing your knee into the bed. Hold for 5 seconds. Repeat 10 times every hour



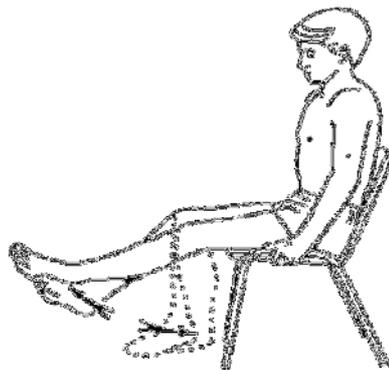
#### **4. Inner Range Quadriceps Exercises**

Lift the foot off the bed while allowing the knee to rest on the pillow//ball. Keep the foot raised off the bed for 5 seconds. Repeat 10 times. Do this 3 times a day.



#### **5. Range of Motion Exercises**

Using your good leg to help, bend and straighten the operated leg. Repeat 10 times every hour



You will be encouraged to regularly move your feet and ankles up/down and in circles to help keep the blood flowing. This helps to prevent the formation of blood clots.

To keep your muscles working while resting in the bed for the first day, it is also important that you regularly tighten the thigh muscles on top of your knee.



# Stairs

## Going Up Stairs

Place the unoperated leg first, then operated leg, then finally crutches or sticks

## Going Down Stairs

Place the crutches (or sticks) first, then operated leg, and finally the unoperated leg.

**Note:** Shaded leg is the operated leg

