Total Knee Replacement and Rehabilitation

Baylor Medical Center at Carrollton
What you need to know about your total knee replacement and rehabilitation

There’s no need to lower your standards when it comes to quality of life.

Our joints are hard at work every time we sit, stand, pick up a piece of paper or lift a child. The average joint is put under tremendous stress day in and day out. Unfortunately, joints such as knees, hips, and shoulders can wear out due to illness, injury or the normal aging process. When this occurs, simple, everyday movements can become difficult or even painful.

But it doesn’t have to be that way. You can maintain your quality of life. Whatever your symptoms, whatever your age, if your lifestyle is becoming limited due to joint problems, you can get help from the professionals at Baylor Medical Center at Carrollton. And this brochure is designed to tell you everything you need to know about total knee replacement and rehabilitation.
Is joint replacement surgery right for you?

You may be a candidate for joint replacement surgery if you have already attempted a more conservative approach of anti-inflammatory medications and exercise, and you continue to experience pain and loss of movement in your joints. In this operation, your orthopaedic surgeon replaces the worn-out joint with an artificial device made of plastic and metal. This device, known as a prosthesis, acts as your normal joint, while allowing you to retain the muscles, ligaments, and tendons surrounding the joints.

After the operation, a rehabilitation process will help you regain the use of your joint. With successful rehabilitation, patients often are able to resume many of their normal activities within three months—with little or no pain.

I live alone. How is that going to work?

You can be mostly independent within days after the surgery, although you will want to arrange for help during the first few days back home. Your therapists and a care coordinator will advise you about preparing your home prior to discharge from Baylor Carrollton.

Am I too old to have surgery?

Your frame of mind, not your age, is the major factor in considering joint replacement surgery. If you are committed to following the rehabilitation schedule and being an active participant in your recovery, you are a strong candidate for a successful surgery.
Before your surgery …

Getting prepared with a joint orientation visit

During this visit to Baylor Carrollton, you will meet some of the people who will care for you during your stay. The staff will discuss medications and will explain pain management and wound care. A physical therapist will demonstrate some simple exercises that will help you prepare for surgery, and get you started toward a successful rehabilitation. You’ll also converse about how to make your home safe for your return after surgery, and they’ll explain what equipment will help make your daily living easier during recovery. A social worker will also be available to discuss equipment and post-discharge needs.

Home modifications

It is important that you make your home safe for your return after surgery. Here are a few things you can do:

**Bathing:** Your therapist may recommend a shower bench or chair to assist with safe transfers. It may be difficult to reach your feet while bathing. A long-handled sponge and a hand-held shower hose can make showering a little easier. You will practice getting in and out of the tub. Use a bath mat or non-slip surface inside your tub or shower, and have assistance/supervision. Place a rug with a rubber backing outside the tub/shower for drying feet, unless you have carpet.

**Bathroom modifications:** You will probably need a raised toilet seat. For other equipment, look in the yellow pages under “Home Equipment Supply.” In addition, the staff at Baylor Carrollton will help find solutions to your specific needs.
Your surgery checklist – Prior to your surgery

❑ Get medical and anesthesia clearance
You will receive a medical clearance letter from your surgeon before you are scheduled for surgery. This letter will let you know if you need to see your primary care physician and/or a specialist. Please follow the instructions in the letter. Medical clearance should be acquired within 30 days of your scheduled surgery date.

❑ Complete pre-operative testing
Your doctor may order pre-operative testing to assist in screening and preparing you for your surgery. These may include specific blood tests, an EKG, and a chest x-ray. Pre-testing should be completed no later than two to three days prior to surgery. Surgery may be delayed without these required test results.

❑ Register for pre-operative class
Baylor Carrollton wants you to have a quality hospital experience. To make your stay more comfortable, we hold pre-operative classes in which you will meet the staff that will be providing your care. They will tell you what to expect while you are in the hospital, and will answer any questions you may have. We ask that you bring a “coach” with you to the class. This person can be a friend or family member. We have found that the surgery experience may seem a little overwhelming. It always helps to have another set of ears to minimize any confusion. During this class, we will also discuss the role of your coach after surgery.

❑ Start pre-operative exercises
It is very important that you are as fit as possible when you come in for surgery. Many patients with arthritis favor the leg that is painful and it can become weak. We will specify some exercises to start doing now, and continue three times a day until your surgery. If you start your exercise program before surgery, it will make your recovery easier. Of course, do not continue any exercise that makes your pain significantly worse.

❑ Determine your advance directives
The law requires that everyone being admitted to the hospital has the opportunity to make advance directives concerning possible future decisions regarding his or her health care. Although it is not required, you may specify the directives you would like to have observed. If you already have an advance directive, please bring it with you on the morning of your surgery.
Inform us of your medications
Please inform the staff member of any daily medications, including the dosage you are currently taking, especially for heart, diabetes or blood pressure problems. Be sure to mention any over-the-counter medications such as aspirin, Bufferin, Nuprin, Advil or Motrin. Include all inhalers, vitamins and supplements in this list. You will be given instructions by your surgeon and/or anesthesiologist for medications you may take the morning of surgery.

Two-four weeks before surgery
Your surgeon may instruct you to begin taking multivitamins as well as iron.

Ten days before
If you are taking medications that may increase bleeding, such as anti-inflammatory medications like aspirin, you will need to stop them ten days before surgery. These medications may cause increased bleeding during surgery. Seven days before surgery, you will need to stop taking any supplements including green tea, ginseng, chondroitin and others. If you are currently taking Celebrex, ask your physician for instructions for stopping the medication. If you are currently taking Coumadin, you will need special instructions from your physician for stopping the medication.

Two days before
You will need to shower with an anti-bacterial soap, once a day for two days before surgery. If possible, shower with anti-bacterial soap the morning of your surgery as well. Your surgeon recommends this soap to reduce the germs present on your skin prior to surgery.

The day before
Refrain from smoking for 12 hours prior to surgery, and from alcohol for 24 hours prior to surgery.

Your surgeon’s office will assign you a time to arrive at the hospital the day of your surgery. We typically ask that you arrive two hours before the scheduled surgery time. If you are late, we may not be able to start your surgery on time, and it may even require that we reschedule your surgery for another day.

The night before
Do not eat or drink anything after midnight, including water, unless otherwise instructed. This includes chewing gum, hard candy, chewing tobacco, ice chips, or prescription medications (unless ordered by your doctor). Your surgeon may instruct you to use a Fleets enema to cleanse your bowels. Administer this at 9:00 or 10:00 pm. You may brush your teeth the morning of your surgery, but do not swallow water.
Your surgery checklist – The day of surgery

Your surgery will involve general anesthetic. Please arrange for a responsible person to remain at the hospital during surgery. You may want to have a spouse or friend stay with you the first night following surgery.

- Bring these items to the hospital
  - Personal hygiene items such as deodorant, toothbrush and paste, razor, etc.
  - Watch or wind-up clock
  - Hand-held mirror that can be used at the bedside
  - Loose-fitting clothing that includes elastic waistband shorts
  - Flat shoes or tennis shoes
  - If you have sleep apnea, please bring your C-Pap machine with you

- Medications
  On the day of surgery, please bring a complete list of your medications, including any vitamins or herbal supplements you are taking. If you are not able to bring the list, bring all of your current medications in their original containers with you to the hospital. While in the hospital, your medications will be monitored through your physician and nursing staff. Prior to going home, the nurse will review all of your physician’s instructions, including any current and new medications. This is your opportunity to ask questions before you leave the hospital, so you understand all instructions and information regarding your discharge.

- Anesthesia
  Anesthesia services are provided by qualified anesthesiologists. Your anesthesiologist will evaluate you before surgery and answer any questions you may have. You may be contacted the night before surgery by your anesthesiologist about any medications you are currently taking, including all over-the-counter drugs and herbal medications. The appropriate type of anesthesia for you will be determined by your surgeon, in consultation with the anesthesiologist.

- Additional reminders
  - Bring a copy of your Advance Directive, if you have one, the morning of surgery.
  - Bring your insurance card, driver’s license or photo I.D., and any co-payment required by your insurance company.
  - Please leave all jewelry, valuables and money at home.
  - Makeup and contact lenses must be removed prior to surgery.
  - Nail polish and acrylic nails may be left on.

When you arrive

Upon arrival at Baylor Carrollton, please park near the front entrance and enter the facility through the front door. The surgery registration desk will be to your right.
While you’re here …

**Nutrition services**

Good nutrition is necessary for healing. Baylor Carrollton provides room service to patients during their stay. Call the number below to order what you want, when you want, from an “all day dining” menu—just like room service at a hotel. Eat a variety of foods to get all the calories, proteins, vitamins, and minerals you need. The food pyramid ([mypyramid.gov](http://mypyramid.gov)) provides an example of the number of servings you should eat from each food group every day. Remember to select from all food groups daily.

**Room Service**

Dial Ext. 5000. Hours: 7 a.m. – 7 p.m. Order your meals when you are ready.

**Guest Meal Services**

Dial Ext. 5000. Hours: 7 a.m. – 7 p.m. Guests may also order meals through room service for $10. Payment can be made by credit card or cash.

**Baylor Carrollton Café**

The Café is located on the first level to the right of the main entrance. Hours: M – F, 7:00 a.m. – 6:00 p.m.; Sat. & Sun., 7:00 a.m. – 1:30 p.m.

**Outpatient Nutrition Counseling**

Phone: 972.229.3299. You may wish to make an appointment with a registered dietitian for personalized nutrition education to help you improve your health.

**Inspirations Gift Shop**

Phone: 972.394.2235. Hours: M – F, 9 a.m. – 7:30 p.m.; Sat. & Sun., 10:00 a.m. – 5:00 p.m. First floor lobby.
Activities during your stay

Following surgery, you will begin isometric exercises and active exercises. You will be shown how to get in and out of bed yourself, and will take your first steps using a walker. We recommend that you be out of bed and in a chair during meals. Before leaving Baylor Carrollton, we will conduct a final review of your home program, and the nursing staff will provide you with information on wound care.

Physical Therapy

During your post-operative stay, a physical therapist will see you twice a day to instruct you on exercise and how to walk safely with a walker or crutches. Once you have had your surgery and are on the way to recovery, you will need to perform certain exercises, precautions, and walking skills for a few months, and our staff will tell you all about them. You will also be instructed on how much weight you can put on your operated leg. The therapist will continue working with you on exercises and walking, until you have a good understanding of your home program.

When you return home …

In order to achieve the highest level of functionality and independence in your daily life, it is important to continue your regimen of daily exercises and walking. Other important things to remember once you get home are:

• You will be on your feet, so your leg may have a tendency to swell.
• Use ice to treat pain and swelling.
• If your leg is swollen, it should be elevated above heart level while you are lying flat.
• Do exercises three times a day with 10 repetitions of each exercise.
• Walk each hour during the day. Take a longer walk, two or three times a day, to build your endurance.
• Change positions frequently, alternating between bending and straightening your knee.
• Use your walker, crutches or cane until your doctor discontinues them—usually after about six weeks.
• Do not keep a pillow under your knee at any time.
• At various times during the day, rest your heel on a chair or coffee table for about 15 minutes. This will help straighten your leg.

Helpful hints for handling daily activities

By deciding to have a knee replacement, you have taken the first step toward returning to your normal daily routine, without the pain and stiffness you experienced before surgery. If needed, your therapist will show you how to manage your daily routine as independently and safely as possible, through the use of adaptive equipment and home modifications.

Meals

Try to have quick, easy items to prepare for your meals. Store items at waist level or within easy reach. Your reacher can help you, if you need objects that are too high or too low. An apron or walker basket can come in handy for transporting items.

Working around the house

• If you are using a walker, use a walker bag or basket to carry items. Be careful not to overload the basket, as this may cause your walker to tip over.
• Carry liquids in containers with covers.
• Do not carry items in your hands while using a walker or crutches.
• Sit while working, until you feel comfortable standing.

Getting into the car

• It may be easier to enter the car using your non-operated-on leg from the street level, not the curb.
• If sitting in the front seat, have someone slide the seat all the way back.
• Back up until you feel the car touch the back of your leg. Keeping one hand on the walker, put your other hand on the back of the car seat, and slowly lower yourself to the seat.
• You may need to place a firm cushion on the seat to avoid sitting too low.
Getting in and out of bed

There is a specific technique for accomplishing this task safely, which you will learn while at the hospital.

Dressing

- Use a dressing stick or reacher to put on or take off lower extremity garments.
- Use a long-handled shoehorn or dressing stick to put your shoes on and remove them.
- Bathe using a long-handled sponge.
- A sock aid is recommended for putting on your socks.

If you do not use equipment to bathe and dress, you will need someone to assist you.

Total knee home exercises

1. Perform ankle rotations on the operated leg.

2. Push heel down into bed.

3. Place towel under heel, tighten knee by pushing the back of the knee down into the bed.

4. Tighten the buttocks.

5. Move operated leg outward toward side of bed and back.

6. While lying on your back with a pillow under your knee, straighten your knee as far as possible, then slowly lower your heel down. Remove pillow after you have completed your exercise.

7. Bend your non-operated knee, keeping operated knee straight. Lift straight leg about six inches off the bed.

8. While lying on your back, bring your knee to your chest one leg at a time.

9. While seated, straighten your knee and hold for a count of five. Then bend your knee so your foot goes under the chair. Hold for a count of five.
Frequently-asked questions

Is swelling normal? How long will it last?

Once at home, your activity level will increase. Swelling, therefore, is normal and can be expected after surgery. To help decrease swelling, you should change positions frequently, elevate your leg and use ice packs as part of your daily program. If there are marked changes, such as persistent calf pain or redness around the surgery site, contact your physician’s office immediately.

When can I drive my car?

If you are taking prescription pain medication, you should not be driving. If the operated leg is the one you routinely use to apply the brake, please refrain from driving for at least six weeks. If you use your other leg, you may be able to drive in about three weeks. Since each individual recovery is different, you should check with your physician before driving.

Can I go on long car rides?

Yes, but we suggest you stop approximately every hour to get out and walk for a few minutes.

When can I bathe or use the hot tub or swimming pool?

To help reduce the risk of infection, we recommend that you check with your surgeon before immersing your wound in water. Soaking for a prolonged period of time in a hot tub or bath is generally not recommended for at least four to six weeks after surgery. Since this may cause increased swelling, use an ice pack after soaking in the tub.

When can I ride my exercise bike?

Generally, it will be two to three weeks after surgery before you will feel ready to ride your exercise bike. When you do, we suggest that you raise the seat slightly. Then, pedal in a forward and backward motion. Go as far as you can in each direction, then hold for a few seconds before going in the opposite direction.

Will I need to have therapy after I leave the hospital?

It is important to continue working on your home program. Should you need outpatient therapy, your physician will recommend it during a follow-up visit, and will write a prescription for additional therapy.

What about my pre-surgery sporting activities?

Please check with your physician prior to returning to past sports activities.

Before you arrive

- Do not eat or drink anything after midnight on the night before surgery.
- Do not bring money or valuables.
- Do not bring electrical appliances that need to be plugged in.

Day of surgery

- Report to surgery registration on the first floor of the hospital 2 hours prior to surgery.
- Family and friends may wait in the surgery waiting room or in the front lobby of the hospital.
- Your doctor will speak with your family after surgery.
Additional resources for total knee replacement patients

• Patient and family guidance, as well as support and advocacy
• Coping skills for managing illness, disabilities, and lifestyle transitions
• Referrals to community agencies, clinics, and counselors for assistance
• Assistance with additional specialized care after leaving Baylor Carrollton
• Assistance with transportation arrangements to another health care facility, or back home
• Assistance with addressing home care needs by arranging for special equipment and supplies, home health agencies or in-home services
• Resource information regarding financial assistance and insurance coverage, including Medicare and supplemental insurance, Medicaid, adult and family services, senior services and disability services

Baylor Carrollton Social Work/Care Coordination Department
972.394.2369
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