



Dr Jonathan Herald

Shoulder, Elbow, Knee Surgeon
MBBS, FRACS (Orth), FAOrthA



Orthoclinic
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Post-Op Care Instructions and Exercises for Total Knee Replacement

POST OPERATIVE CARE

- Mobility:** You may put full weight on your leg, however you may be limited by pain. Crutches they are available from the hospital.
- Dressings:** Keep the outer bandage on for 1 to 2 days if it stays dry and clean. After this you can remove it. To keep the outer bandage dry please shower with a plastic bag. Once removed the underneath dressings are waterproof but if soiled see me or your GP to get them changed as soon as possible.
- Sutures:** You will have buried, dissolving skin sutures that do not need to be removed.
- Analgesia:** A prescription has been provided by either myself, my assistant or my anaesthetist for analgesics. Please be aware that codeine containing products such as Panadeine Forte may cause constipation and drowsiness and should be used sparingly and with a high fibre diet e.g. Metamucil.
- Rehabilitation:** Post-operative physiotherapy and home exercises are very important after surgery. Please follow the instructions shown later. You will be referred to formal physiotherapy immediately after surgery. Please take your surgical booklet with you.
- Follow-up:** You will also need to contact Orthopaedic Clinic Sydney on 02 9233 3946 to arrange a follow-up appointment to see me at around 10 to 14 days. If it is not possible to see me, please see your GP at this time.
- Driving a car:** You are not allowed to drive a car home after today's procedure. It will take around 6 weeks for you to regain knee control to be safe to drive a car.

When to Worry:

- If you think you have an infection,
- Abnormal bleeding, a wound problem,
- A bandage that is too tight and cutting off your circulation,
- New numbness and tingling or any other emergency please contact the rooms immediately or failing that go back to hospital or see your GP.



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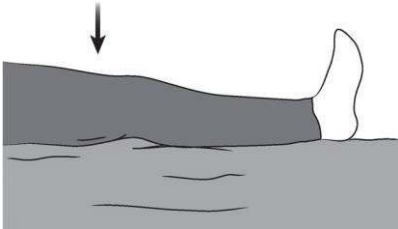
Early Post Operative Exercises

The following exercises will help increase circulation to your legs and feet, which is important for preventing blood clots. They will also help strengthen your muscles and improve knee movement.

Start the exercises as soon as you are able. You can begin them in the recovery room shortly after surgery. You may feel uncomfortable at first, but these exercises will help speed your recovery and actually diminish your postoperative pain.

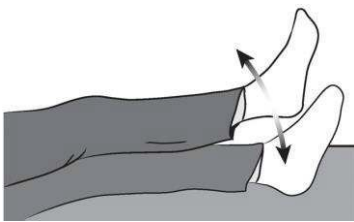
Quadriceps Sets

- Tighten your thigh muscle. Try to straighten your knee. Hold for 5 to 10 seconds.
- Repeat this exercise approximately 10 times during a two-minute period, rest one minute, and then repeat. Continue until your thigh feels fatigued.



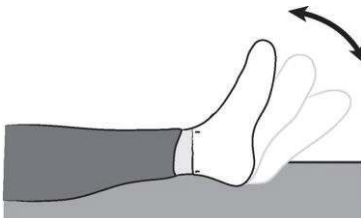
Straight Leg Raises

- Tighten your thigh muscle with your knee fully straightened on the bed, as with the quadriceps set above. Lift your leg several inches. Hold for 5 to 10 seconds. Slowly lower.
- Repeat until your thigh feels fatigued.
- You also can-do leg raises while sitting. Tighten your thigh muscle and hold your knee fully straightened with your leg unsupported. Repeat as above.
- Continue these exercises periodically until full strength returns to your thigh.



Ankle Pumps

- Move your foot up and down rhythmically by contracting your calf and shin muscles. Perform this exercise for 2 to 3 minutes, 2 or 3 times an hour in the recovery room.
- Continue this exercise until you are fully recovered, and all ankle and lower-leg swelling has subsided.





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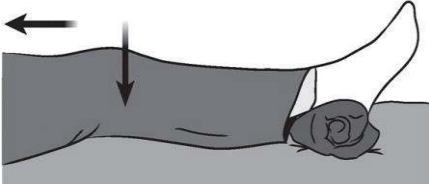
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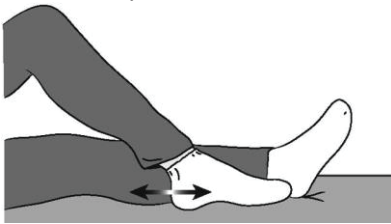
Knee Straightening Exercises

- Place a small rolled towel just above your heel so that your heel is not touching the bed. Tighten your thigh. Try to fully straighten your knee and to touch the back of your knee to the bed. Hold fully straightened for 5 to 10 seconds.
- Repeat until your thigh feels fatigued.



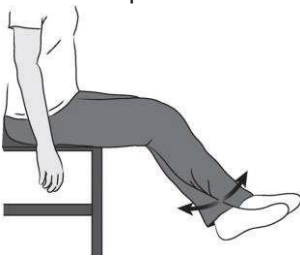
Bed-Supported Knee Bends

- Slide your foot toward your buttocks, bending your knee and keeping your heel on the bed. Hold your knee in a maximally bent position for 5 to 10 seconds and then straighten.
- Repeat several times until your leg feels fatigued or until you can completely bend your knee.



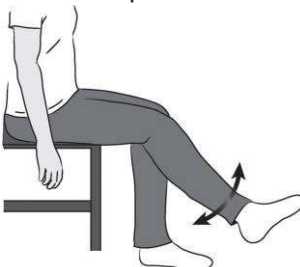
Sitting Supported Knee Bends

- While sitting at your bedside or in a chair with your thigh supported, place your foot behind the heel of your operated knee for support. Slowly bend your knee as far as you can. Hold your knee in this position for 5 to 10 seconds.
- Repeat several times until your leg feels fatigued or until you can completely bend your knee.



Sitting Unsupported Knee Bends

- While sitting at bedside or in a chair with your thigh supported, bend your knee as far as you can until your foot rests on the floor. With your foot lightly resting on the floor, slide your upper body forward in the chair to increase your knee bend. Hold for 5 to 10 seconds. Straighten your knee fully.
- Repeat several times until your leg feels fatigued or until you can completely bend your knee.





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Post Operative Programme

1-14 Days

Manual Physiotherapy

- Intermittent cryotherapy to minimise joint swelling over first 4-5 days.
- Cryotherapy after exercises.
- Heat packs may be used on the knee and thigh prior to exercises.
- Circumferential compression dressing (Tubigrip) from ankle to thigh.
- Elevate the affected limb to minimise swelling.
- Ankle exercises for DVT prophylaxis.
- Deep breathing exercises for basal atelectasis.

Range of Motion / Strengthening Exercises

- Quadriceps sets, Gluteal sets.
- Straight leg raises, supine.
- Knee extensions supine over a roll.
- Knee extensions from seated
- Passive knee straightening with a heel roll supine.
- Heel slides seated and supine.

Functional Exercises

- Transfer lying to standing and seated to standing.
- Gait training with crutches, including stairs.
- Into and out of a car.
- Weight bear as tolerated.

3-6 weeks

Manual Physiotherapy

- Cryotherapy after exercises, heat packs may be used on the knee and thigh prior to exercises.
- Circumferential compression dressing (Tubigrip) from ankle to thigh.
- Ankle exercises for DVT prophylaxis.
- Patellar mobilisation exercises.
- Quads and hamstrings deep tissue massage.

Range of Motion / Strengthening Exercises

- Isometric quads, hamstrings, gluteal, adductors.
- Core stabilising exercises.
- Active and assisted range of motion exercises.
- Supported standing heel raises, calf stretches, mini squats, hamstring curls.
- Hydrotherapy after week 3.

Functional Activities

- Gait – normalise gait between crutches, progressing to a single point stick.
- Weight bearing as tolerated.
- Increase endurance with longer walks and stairs. You should be walking without aids and achieving flexion >90° by 6 weeks post-operation



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Post Operative Programme

7-12 weeks

Manual Physiotherapy

- Patellar mobilisation exercises.
- Quads and hamstrings deep tissue massage.
- Wound massage.

Range of Motion / Strengthening Exercises

- Core stabilisation exercises.
- Squats and single leg stance mini-squats.
- Resistance exercises for quadriceps, hamstrings, gluteal and adductors.
- Active and assisted ROM exercises.

Functional Exercises

- Start driving using the affected leg.
- Gait supervision without walking aids.
- Lateral stepping.
- Heel-toe walking.
- Exercise bike (can start earlier if good balance).

13+ weeks

Training for Life

- Once you have achieved full extension and flexion $>110^\circ$, normalised and unaided gait, and good muscle balance
- institute an ongoing programme of regular exercise tailored to the patient.

This may include:

Regular walking

Exercise bike

Hydrotherapy

Gentle gym workouts

Return to sport (golf, doubles tennis, lawn bowls, etc)

- Encourage the patient to continue their exercise program indefinitely, to optimise the outcome from their surgery