ERIC TANNENBAUM, MD
Southern Indiana Orthopedics

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Appointments (812) 376-9353

POST-OPERATIVE INSTRUCTIONS

Total Knee Replacement

Post-Op Instructions

Wound Care

- **Icing:** use ice packs 20 minutes per hour while awake. **Do not** put the ice pad directly against your skin (use a thin towel or clothing).
- **Dressing:** keep your post-op bandage/dressing in place until your follow-up visit. It should be waterproof and allow you to shower. If the original dressing becomes wet or is coming off, you may replace it with clean gauze covered by paper tape. Do not leave the dressing in place if water gets under the seal.

Activity

1. **Weightbearing:** as tolerated on both legs, using a walker for assistance.
2. Avoid exercising or strenuous activities until you are seen in clinic for your follow-up appointment.
3. Start physical therapy as soon as possible (before your first post-op follow-up visit).
4. **Elevate** the knee above the level of your heart to reduce swelling. To elevate properly, **do not** place anything behind the knee; instead, prop pillows under the lower leg and foot to keep the knee straight. Your knee may be swollen for up to 4 weeks after surgery. Bruising around the knee and calf is common.
5. **No driving** at least until your first post-op appointment. When returning to driving, test braking and acceleration in an empty parking lot before driving in traffic. **Absolutely no driving while taking narcotics** (e.g. Tylenol #3/codeine, Norco, Vicodin, Percocet, oxycodone).
6. Wear compression sleeves on both legs, especially at night, for 2 weeks.

Discharge Medications

1. **Stool softener** such as Colace (docusate sodium) or Senokot-S, 2 tablets once a day while taking narcotics. These do not require a prescription.
2. **Prescription pain medication:** 1 to 2 tablets every 4 to 6 hours as needed for pain. Do not exceed 12 tablets per day. Taper off as your pain decreases.
3. You may switch to **acetaminophen (Tylenol)** once you no longer need prescription-strength pain medication (e.g. Norco). Take 1000 mg three times a day (do not exceed 3000 mg in 24 hours).
4. **Aspirin 325 mg twice daily** (once in the morning and once in the afternoon) to prevent blood clots, starting the day after surgery. Continue for 6 weeks after surgery. If you were already

taking blood thinners (anticoagulation) before surgery, simply restart those medications the day after surgery and **do not** start taking aspirin.

Diet

If you have no nausea, start with clear liquids, then progress to solid foods once clear liquids are tolerated. No alcoholic beverages for at least 48 hours or while taking pain medication. Drink plenty of fluids and eat high-fiber foods to prevent constipation while taking prescription pain medication.

Follow-Up

You will follow up in **two weeks** with Megan Vanderbur, PA-C, for your first post-op check. If you have questions, please call our office at **(812) 376-9353**.

When to Call — Emergency

Call or return for any of the following:

- Fever greater than 101°F, or a sustained fever greater than 100.5°F that has not resolved within 3–4 days after surgery
- Chills
- Increasing pain, swelling or redness
- Calf pain
- Drainage, especially if yellow, green or foul-smelling
- Excessive bleeding
- Chest pain or shortness of breath

SIO phone: (812) 376-9353

These instructions are general guidelines from Dr. Tannenbaum's office. Always follow any specific instructions given to you by Dr. Tannenbaum or his team. Questions? Call Southern Indiana Orthopedics at (812) 376-9353.