



Total Knee Arthroplasty/Uni Knee Arthroplasty  
Post Operative Care Instructions  
Dr. Tarlow – Advanced Knee Care, PC

You will go home 1-3 days after surgery with an Compression Brace on your knee, and a walker. You will be sent home with a narcotic pain reliever. If you experience nausea/vomiting for more than 24 hours after surgery it is likely due to the pain reliever. Phone our office for a new prescription. Please phone during business hours for prescription refills. ***Prescriptions will not be filled after hours or on weekends.***

**Activities:** Limited for 72 hours after surgery, be sure to rest. Do not drive, operate machinery or power tools, drink alcohol or make important decisions or sign legal documents due to surgery and general anesthesia. Elevate foot and leg (“ankle higher than heart”) for 3-7 days. Flex foot and ankle to decrease swelling. ***There will be more swelling/pain than you anticipate.***

**Showers:** 48 hours after surgery - Remove dressings (Leave steri strips or staples in place), wash knee incisions, dry incisions and apply dry dressing.

**Follow-up appointment:** Usually scheduled for 7-10 days after surgery. Call our office (480-483-0393) if you are unsure of your appointment time.

**Walker:** Use Walker Full weight bearing for 1-4 weeks after surgery. Switch to cane when able, then walk freely.

**CPM:** Will begin on the day AFTER surgery for 1-2 hours twice daily. CPM will be sent home with you. Increase degrees of motion on CPM as tolerated. Call to return machine when until able to spin pedals completely around on stationary bike or after 1-2 weeks (patient choice).

**Brace/Ice:** Apply Compression Brace ***day and night*** for first week - it will be placed in Surgery and locked for the first night to decrease knee bleeding. Hinges to be opened day one and it is recommended to use the brace for ambulation until you discontinue the walker. Compression Brace should be used with Ice Wrap when sitting or lying or in CPM. Use Ice Wrap 30 minutes 5 times daily for up to 3 weeks. Remove Ice Pad Component from Compression Wrap when ambulating.

**Chemical Prophylaxis against DVT/PE:** For Total Knee, use Lovenox injection 40 mg once per day for 10 days after discharge. For Makoplasty/PFA Knee use Aspirin 325 mg orally twice daily for 14 days starting 8am day after discharge.

**Exercises:** SLR (straight leg raises) and knee range of motion (ROM) 25 reps twice daily beginning immediately postop. ***NO pillow behind knee***, only under calf or heel. Start exercise bike 1-2 weeks postop for 15-30 minutes. Return to normal activities expected 4-12 weeks.

**Swelling and bleeding:** Swelling and light bleeding is normal. Upper thigh/Lower leg /foot/ankle/toes may **BRUISE** from blood traveling under skin and up/down leg 3-14 days after surgery. Lower leg throbbing on standing also can occur. This is normal. Your leg swelling will be more than you anticipate, will maximize 7-14 days after surgery.

**Physical therapy:** Formal physical therapy is not mandatory but may result in a more complete and speedier recovery. First appointment should be scheduled about a week after surgery. Total Knee course is 6-8 weeks, UniCompartmental course is 3-4 weeks. We can provide specific referral.

**Driving:** May drive as long as narcotic pain relievers are not being used. Usually 1-3 weeks.

**Off work:** If applicable, Return to work range is 1 week -3 months. Mako typical 1-4 weeks, TKA typical 1-3 months.

**Permanent Limitations:** New studies suggest unlimited activities are acceptable after modern Uni/Total Knee Replacement (Makoplasty no running/impact loading for first year, then okay). Okay to try kneeling. Total recovery 1 year, (arthritis pain resolved 1 week – 3 months). Usually no need to limit walking after Makoplasty/TKR unless excessive leg/ankle/foot swelling.

**Body Changes:** Your appetite may be poor due to surgery, fatigue, anemia and narcotic pain medication. We recommend Daily Multivitamin and Iron Sulfate 325 mg per day and Vitamin C 500 mg per day for a month. You may have trouble sleeping for 2-3 months. Call for prescription medication if needed. Narcotic medication promotes constipation – use stool softeners and laxatives. (Dulcolax suppositories, Metamucil, Milk of Magnesium). For more comprehensive instructions go to [tarlowknee.com/post-op-instruct/](http://tarlowknee.com/post-op-instruct/) and open file – Preparing for knee replacement surgery.

**If you experience the following symptoms call our office (480-483-0393) or present to your closest Emergency Room as soon as possible . These may be signs of infection or deep venous thrombosis.**

- Severe knee pain with fever greater than 102 F.
- Limited or diminishing knee range of motion.
- Calf or thigh pain that is constant and does not go away with elevation/rest.
- Trouble/pain with breathing/chest pain/shortness of breath.

**Phone/Answering Service: 480-483-0393**

**Direct Scheduling Line: 480-225-2343**

**Website: [www.tarlowknee.com](http://www.tarlowknee.com)**

**Blog: [www.tarlowmd.blogspot.com](http://www.tarlowmd.blogspot.com)**

**E-mail: for Dr. Tarlow - [doctlow@cox.net](mailto:doctlow@cox.net)**