450 Sutter st, Ste 400, SF, CA 94108 phone: 415-900-3000; fax: 415-900-3001 www.patrickmcgahanmd.com

Surgery Instructions After Surgery

*** All instructions & protocols can be found on my website ***

http://www.patrickmcgahanmd.com/physical-therapy-pdfs.html

- Post-operative Appointment
 - o If you have not already made one, call my office to schedule your first appointment 1-2 weeks after surgery
- Pain Control
 - o Pain medication will be given at your pre-operative appointment or given upon hospital discharge
 - Narcotics are used as needed
 - For medication refills or changes,
 - For refills of medications, call your pharmacy or my office during office hours
 - For changes to medications, call my office during office hours
 - On-call physicians can NOT prescribe for patients they have not seen
 - o Ice the knee 20 minutes per hour for the first 72 hours while awake
 - Be very careful when applying cold directly to the skin in limiting how much time it is used to avoid cold burns
 - If a cold therapy unit has been supplied, it is for home use and hospital use.
 - After the first 72 hours, ice the knee at least 3 times a day and especially after physical therapy sessions
 - It will work through the dressings

Swelling & Tingling

o It is normal to have some mild swelling, tingling, or numbness after surgery. If it becomes progressively worse or painful, please contact the office or go to the emergency department.

Dressings

- Dressings can be left in place until your follow-up appointment as long as they are clean and dry
- The staples will be removed 10-14 days post-op
- o There may be drainage for the first 48 72 hours from the incisions. This is normal
- You may take a shower immediately but do NOT get the dressings wet
 - Do NOT take a bath or swim as the incisions should not be soaked in water for 4 weeks post-op
 - Keep the incisions clean and dry as much as possible for the first 14 days

Patrick J McGahan, MD
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Sports Medicine, Fractures, Reconstruction

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Physical Therapy

- Physical therapy usually begins immediately after surgery
- o If you have not already been given an appointment for physical therapy after surgery, please contact my office for a referral
 - My office will supply you with a prescription for your therapist
 - My physical therapy protocol can be downloaded from my website or we can defer to your physical therapist
- You can flex and extend the leg as tolerated. Sit at the edge of the bed for 5 minutes, 3 times/day and allow the knee to gently bend with the aid of gravity to 90 degrees. You can also extend the knee from this position.

Anticoagulation: Blood Clot and Pulmonary Embolism Prevention

- In the hospital, you will have SCD's on your leg to aid in blood flow.
- In the hospital and at home, you should walk as much as possible to prevent blood clots from forming.
- Based on your medical condition and the procedure performed, you may receive either aspirin
 or lovenox, or another blood thinner for 10 to 35 days to prevent blood clots. Please take these
 as instructed to lower your risk of blood clots. This may involve blood draws to monitor
 blood levels.

What to Expect

- Standard Total Knee Arthroplasty (TKA) or Unicompartmental Arthroplasty (UKA)
 - Goal of 90 degrees of ROM by 2 weeks, and 120 degrees of ROM by 6 weeks
 - Physical Therapy starts immdediately after surgery. You can walk and put full weight on the leg as tolerated. In addition to your physical therapy, sit at the edge of the bed for 5 minutes, 3 times/day and allow the knee to gently bend with the aid of gravity to 90 degrees. You can also extend the knee from this position.
 - You will likely use a walker or crutches for first 2-4 weeks
 - Use of a cane for 6 to 12 weeks postoperatively
 - Start light exercises 6-12 weeks postoperatively: swimming, cycling, etc
 - Activities as tolerated at 3months
 - Good recovery at 6 months.
 - Full recovery may take 1 year

Lifetime Infection Prevention

O Prior to any dental procedure, surgery, or other invasive procedure such as endoscopy/colonoscopy, the American Academy of Orthopaedic Surgery recomends that you take 2 grams of Keflex or 600 mg of Clindamycin 1 hour prior to the procedure. I will provide you with a prescription.