

KNEE REPLACEMENT SURGERY



**Knox
Orthopaedic
Group**

262 Mountain Highway
Wantirna Victoria 3152

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Knee replacement surgery is generally very successful. Knee replacement surgery replaces the weight bearing surface of the knee joint with an artificial prosthesis to relieve pain and disability, usually caused by osteoarthritis. Sometimes osteoarthritis only involves the medial or inner part of the knee joint. In this circumstance a partial, or unicompartmental knee replacement will be performed. This is a less invasive procedure and has a quicker recovery time, however only a small percentage of patients are suitable for this procedure.

Results of knee replacement surgery are generally very good. 80% of patients make an excellent recovery from surgery. These patients have no pain or very minimal pain following surgery and are able to walk as far as they like.

Mr Donohue will have assessed your suitability for knee joint replacement during your consultation and will have discussed the prosthetic componentry he will be using to replace the worn out parts of your knee.

The following information may be of use in helping you prepare for your forthcoming knee joint replacement surgery.

Preoperative Instructions

Some patients prior to having a knee replacement will need to see a specialist physician. The physician will assess your health and determine whether you are fit to undergo surgery.

All knee joint replacement patients will be seen in the Pre-Admission Clinic at Knox Private Hospital. This is run by Knox Private Hospital and informs patients of what can be expected once they are admitted to hospital. For example: physio, other tests required, what you will need to bring into hospital, etc. When we book you in for surgery, Mr Donohue's staff request that the pre-admission clinic make an appointment with the patient to be seen. This is a very informative and valuable session and our patients find it extremely beneficial. We encourage all joint replacement patients to attend this appointment.

Hospital Stay/Rehabilitation

You will be in hospital around 5 days and will either be discharged directly home or be transferred to a rehabilitation facility. Not all patients need to go on to rehabilitation, most are able to be discharged directly home. However if you elect to go to postoperative rehabilitation this does not have to be decided upon at the time of booking your surgery. Once the operation has been performed then your need for rehabilitation will be discussed with you by Mr Donohue. Once you are ready to be transferred to a rehabilitation hospital, the

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hospital of your choice will be contacted and you will be transferred there once a bed becomes available for you. Generally a 1 to 2 weeks stay in rehabilitation is all that is required. At rehabilitation you will be involved in an intense physiotherapy and hydrotherapy program (once the knee wound has healed).

TED Stockings

TED, or compression stockings (a below knee heavy weight stocking), will be prescribed for you to wear for 4 weeks postoperatively. You will be shown how to put these on and off by the nursing staff in hospital and they will be put in place on both legs immediately postoperatively. These are designed to help prevent clots (DVT's) forming in your calf. These need to be kept on 24 hours a day, however can be removed for showering and washing.

Car Travel and Driving

Short trips for the first 6 weeks postoperatively (until your aftercare appointment with Mr Donohue) is a good idea. If you have had a left knee replacement then you can start driving an automatic car once you can sit comfortably in your car. However, if you have had a right knee replacement OR drive a manual car you will only be able to drive again once you are able to walk well without aids and can bend the knee to a right angle (around the six week mark).

Crutches and Weight Bearing

You are able to fully weight bear through the operated leg as soon as you are able. Generally, crutches are required for quite a few weeks after you have had your surgery. However, if you feel comfortable and stable, one crutch or walking stick can be used.

Exercising

You will be seen by a physiotherapist after your surgery in hospital and then at rehabilitation (if you go on to a rehabilitation facility). The physio will give you some gentle exercises to perform (straight leg raises and knee bends) whilst in hospital and these need to be continued at home until you see Mr Donohue at your 6 week checkup. Once the wound has healed you are able to go swimming or attend hydrotherapy. Once you are able to walk without crutches, and can bend the knee to a right angle, you are able to commence exercising on an exercise bike.

Showering

Patients sometimes find that a stool or plastic chair in the shower is beneficial when they first go home. Soap on a rope or soap in the toe of a stocking tied to the shower tap is also helpful.

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Sleeping

You may sleep in any position you like as long as you do not put a pillow under the knee. Sexual intercourse should be avoided for the first 6 weeks.

Gardening

Gardening should be avoided for the first 6 weeks. Kneeling is often difficult following knee replacement surgery and this can have an effect on gardening. 50% of patients will have ongoing problems with kneeling permanently.

Dental Work

Ensure that your dentist is aware that you have had joint replacement surgery. Major dental work, for example, root canal, will require antibiotic cover to prevent the prosthesis becoming infected.

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