

Total Knee & Hip Replacement
Patient Education Manual

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Important Dates and Times

Medical Clearance (if needed)

Date _____

Time _____

Surgery

Date _____

Time _____

Joint Education Class

Date _____

Time _____

Follow Up Appointment with
Surgeon

Date _____

Time _____

Pre-Op Assessment at Flagler
Hospital

Date _____

Time _____

Outpatient Physical Therapy
Appointment

Date _____

Time _____

Notes

Welcome

Thank you for choosing to have your orthopedic surgery at Flagler Health + in St. Augustine, Florida. Our team of experienced and compassionate professionals is dedicated to helping you achieve an improved level of activity and higher quality of life. Most Orthopedic surgery patients recover quickly. New minimally invasive surgical techniques and improved instrumentation have allowed us to quicken the recovery process – typical hospital stays are usually 1 to 3 days.

At Flagler Hospital, your orthopedic surgery and post-operative activities have been designed to help you return to most normal activities, including driving, walking and most hobbies, within six to eight weeks. The amount of time you will need to recover is highly dependent upon your pre-operative physical conditioning.

The better your physical condition prior to surgery, the quicker and more successful your recovery will be.

Our hospital also offers a Joint Education Class for you and the individuals who will be helping you throughout your surgical experience and recovery. During this class, you will receive information and will also have the opportunity to ask any questions you may have. Classes are offered on Mondays and Wednesdays at 10:00 am. Please see page 11 for more information or call our Orthopedic Care Coordinator at Flagler Hospital at 904-460-4569 to register for the class.

About the Flagler Health+ System

Our Vision

To become a total care enterprise that advances the physical, social and economic health of the communities we serve.

Our Mission

To provide the best patient experience with the best staff

Flagler Health+ is a total care enterprise aimed at advancing the physical, social and economic health of Northeast Florida communities. From serving as the lead agency for St. Johns County's Continuum of Care with an aim to end homelessness, to bringing a new concept in health villages throughout the region, Flagler Health+ is your caring partner throughout the journey of life. Flagler Health+ is an extension of Flagler Hospital, which has a 130 year legacy of caring for the community. The 335 bed hospital has been named among America's 100 Best hospitals out of nearly 4,500 nationwide.



Flagler Health + has earned the Joint Commission's Gold Seal of Approval for its comprehensive total knee and total hip joint replacement programs, by demonstrating compliance with the Joint Commission's national standards for health care quality and safety in disease-specific care.

The certification award recognizes Flagler Hospital's dedication to continuous compliance with the Joint Commission's state-of-the-art standards.

How this Guide Can Help You

Flagler Health + offers each patient undergoing total knee or hip replacement this educational guide. Your physician has discussed information with you regarding your surgery. This guide is designed to help you further prepare for surgery by giving you information you will need to achieve the best outcome from your joint replacement.

It is our belief that well-prepared patients achieve the best surgical results. **Physical preparation, education, continuity of care and pre-planned discharges are important to creating the best results.** This guidebook exists to give you and your caregivers everything you'll need for a rapid return to a healthy, active lifestyle.

This guidebook will help you understand:

- What to expect during your hospital stay
- What you need to do before and after surgery
- How to properly care for your joint replacement

Please keep this guidebook as a handy reference for at least the first year after your surgery.

How to use this book:

- Read through the entire manual. We at Flagler Health + are here to clarify and answer any questions you may have about this material.
- Focus carefully on the pre-operative preparations, such as exercises, home preparation, and the important checklist.
- Bring this manual with you to the Joint Education Class and to the hospital on your surgery day.
- **Have questions prepared for class that you may wish to have answered before your surgery.**

Important Flagler Health + Phone Numbers

Flagler Health+

(904) 819 – 5155

Orthopedic Care Coordinator

Sarah Adams, RN
(904) 460 – 4569

Pre-Op Department (outpatient surgery)

(904) 819 – 4506

Orthopedic Floor Nurse's Station (8th Floor)

(904) 819 – 8056

Surgical Waiting Room Desk

(904) 819 – 2147

Important Information

- FMLA/Disability forms should be filled out by the surgeon's office BEFORE surgery. Please allow 7-10 business days for these forms to be completed.
- You may be required to obtain medical, cardiac, and/or other specialty clearance before surgery. The hospital requires a written clearance note from these physicians before surgery. These forms should be faxed by your doctor to the orthopedic surgeon's office. The surgeon's office will then fax everything to the hospital prior to your surgery. Please do not wait to complete your medical clearance. Failure to obtain these clearances could result in your surgery being canceled.
- A pre-op assessment appointment at Flagler Hospital will be scheduled for you several days before your surgery.
- You are required to make your outpatient physical therapy appointment once you are discharged from the hospital. If you have any questions regarding making your appointment or you need assistance, please call your surgeon's office.
- The East elevators are the best elevators to use for family and friends to access the orthopedic floor (8th floor).



IMPORTANT

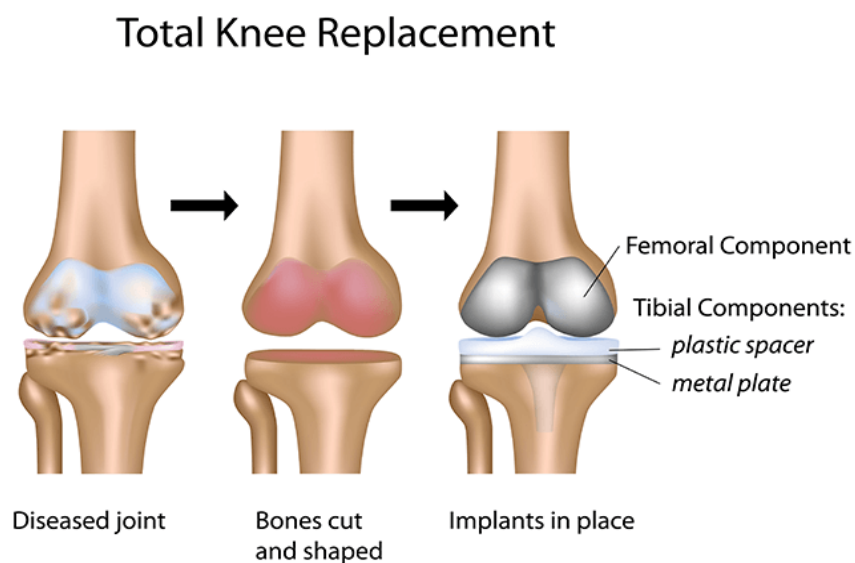
Total Knee Replacement

The most common reason for knee replacement surgery is to help relieve pain caused by arthritis. Patients who need knee replacement surgery usually have problems walking, climbing stairs, and/or getting in and out of chairs. Some patients also have moderate or severe knee pain at rest.

Knee replacement surgery, also called knee arthroplasty, can help ease pain and return function in severely diseased knee joints. During the knee replacement surgery, a surgeon will remove a small amount of damaged bone and cartilage and replace it with an artificial joint.

For most patients, knee replacement provides relief from pain and better mobility and quality of life. After you have recovered from surgery and have been cleared by your doctor, you can enjoy a range of low-impact activities, such as walking, swimming, golfing, and/or biking. Talk to your surgeon about your limitations after surgery.

This is an example of one type of knee replacement available:



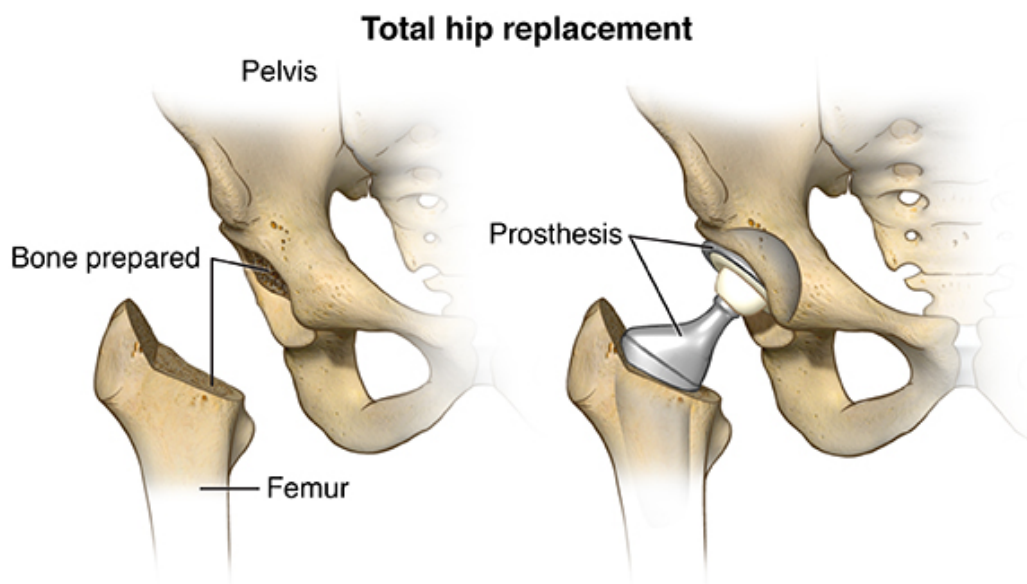
It is normal to hear and/or feel a click after surgery. This is from the contact of the artificial joints (metal/plastic) during activity.

Total Hip Replacement

Hip replacement, also called hip arthroplasty, may be a choice for you if your hip pain interferes with daily activities and more conservative treatments have not helped. Patients who need hip replacement surgery usually have problems walking, climbing stairs, and/or getting in and out of chairs/beds. Damage to your hip from arthritis is the most common reason to need hip replacement surgery.

During hip replacement surgery, your surgeon removes the damaged areas of your hip joint and replaces them with an artificial joint. The surgery may be done through the back (posterior), the front (anterior), or the side (lateral) of the hip joint. This artificial joint, also called a prosthesis, helps reduce pain and improve function in your hip.

Total hip replacement example:



After you have recovered from surgery and have been cleared by your doctor, you can enjoy a range of low-impact activities, such as walking, swimming, golfing, and/or biking. Talk to your surgeon about your limitations after surgery.

Medical Clearance

If required, you **must** make an appointment with your primary care physician to obtain medical clearance for surgery.

If you have any specialists that you see regularly, like a Cardiologist or a Pulmonologist, you **must also** get clearance from them as well.

This is an extremely important step in the process to have surgery. PLEASE complete this in a timely manner and do not wait until just before your surgery! Without medical clearance, your surgeon will not perform the surgery.

You may also require a variety of medical tests, including:

- Blood work
- Urinalysis
- Electrocardiogram (or an EKG)
- Chest X-Ray

Ideally, you would want to have all of this completed prior to your pre-op appointment at Flagler Hospital. Communicate with your primary care physician's office and/or specialist's office about when you are scheduled for your pre-op appointment and when you are having surgery.

Pre-Op and Joint Class

A **pre-op appointment** at Flagler Hospital is required for all joint replacement patients. During this appointment, a pre-op nurse will review your medical history and medications, assure that all consents are correct and signed and give you instructions about when to arrive on the day of your surgery, what medications to take on the morning of your surgery and any other preparation.

For your safety, it is extremely important that you tell the pre-op nurse all of the medications you take at home. In order for the nurse to make a complete and accurate list of all your medications, we ask that you bring a list of the names and doses of your medications (**including prescriptions, vitamins, supplements, herbals and any other over-the counter medications**).

Please follow the signs for parking lot E and outpatient surgery for your pre-op appointment. You will sign in at the outpatient surgery reception desk located on the second floor of the hospital.

Questions?

If you have any questions regarding your pre-op appointment or about your medications, please contact the **pre-op department at (904) 819 – 4506**.

The Joint Education class provided by Flagler Hospital is designed to fully prepare you for surgery. **All patients having a total joint surgery are expected to attend this class.** This class allows you to participate in your care and assists you with what you can expect during your hospital stay and recovery. You can register on the Flagler Health + website or call our **orthopedic coordinator at 904-460-4569**. We ask that all patients register for the class in advance.

Joint Education Class

Every **Monday** and
Wednesday

From

10 am – 11 am

Located in the 8th floor
classroom

Preparing for Joint Replacement Surgery

Smoking Cessation

Smoking can slow the recovery process and increase medical complications. Some medical complications caused by smoking can include blood clots and/or wound healing problems after surgery. If you smoke, it is advised that you quit before surgery. Please note that Flagler Health + is a smoke free campus. For more information, visit tobaccofreeflorida.com/quityourway or call 1-877-822-6669.

Diabetes Management

It is very important to effectively manage your blood glucose before, during, and after surgery. Managing your blood glucose effectively can reduce complications such as infection after your surgery. If you are diabetic, your blood glucose will be managed and monitored throughout your entire hospital stay. Check with your surgeon to see what level your **Hemoglobin A1C** should be.

Infection Prevention

Bacterial infections commonly enter through the skin. You will be given directions during your pre-op appointment at the hospital with instructions on what to use to properly bathe before your surgery.

Dental Visits

After joint replacement surgery, antibiotics must be taken prior to any dental work, surgery, or other invasive procedures for the **rest of your life**. Please refrain from any routine dental cleansings for 12 weeks after surgery.

Home Safety

Falls are the most preventable cause of injury!

- Remove **all** throw rugs
- All stairways in and around your home need secure hand rails

- Install night lights in stairways, bathrooms, hallways and pathways
- There should be no long cords, footstools, or clutter in or around walkways
- Furniture needs to be arranged so that you can easily move throughout your home and bedroom with a walker
- Pets may need to be moved to another area of the house when you arrive home
- If your bedroom is located upstairs, you may need to prepare a sleeping area downstairs for the first few weeks after you return home

Help at Home

You will need to arrange for a friend or family member to drive you home from the hospital and to your appointments after surgery until you are off of your pain medication and walking independently. It is also encouraged to have someone stay with you for the first week after you return home if you live by yourself.

If this is something that you need help coordinating, our hospital has a coordinator who can assist you with making these arrangements.

Vaccinations

Any vaccinations must be completed **4 weeks prior** to surgery and **6 weeks after** your surgery.

Preparation Checklist

Before Surgery

- I completed my medical clearance and lab work
- I have attended the Joint Education Class
- I have completed my Pre-Op appointment
- My diabetes is under control (Hemoglobin A1C)
- I have stopped smoking before my surgery
- I have prepared my home as suggested for safety (see page 12 for tips)
- I have arranged for someone to drive me home when I am discharged from the hospital and stay with me the first week after surgery
- I have arranged for someone to drive me to my follow-up and physical therapy appointments until I am able to drive
- Do not eat after midnight or drink certain fluids. This includes smoking, chew tobacco, or gum

Hospital Stay

- Clothing such as loose pajamas, short nightgowns, short robes, loose shorts, t-shirts, undergarments, and/or jogging suits
- Shoes with a back and non-skid soles so they will not slide off your feet
- Personal hygiene toiletries
- Eyeglasses, contact lenses, denture case, hearing aids and batteries
- CPAP machine and tubing
- Cell phone and charger
- This guidebook

Additional Information

- Leave jewelry, credit cards, check book, and cash at home
- Do not bring any medication with you to the hospital unless instructed to do so
- Plan meals ahead for when you return home. Purchase groceries in advance and make sure to have plenty of water to prevent dehydration

Day of Surgery

Before Leaving Home

- Shower using the special instructions given to you during your pre-op appointment (do not use if allergic to anything provided in the pre-bathing kit)
- Take only the medications you have been instructed to take with a small sip of water

Remember to check with your primary care physician for instructions on medication you take on a daily basis such as insulin, Coumadin, etc.

Arriving at the Hospital

- You will come to the outpatient surgery area located on the south side of the hospital and park in parking lot E. (This is the same place you came to for your pre-op appointment)
- You will come through the automatic doors and proceed to the outpatient surgery registration desk to check-in
- From here, you will be escorted to the pre-operative surgery area
- The Pre-op (outpatient surgery) telephone number is **(904) 819 – 4506**

Surgery

You will be prepared for surgery in the pre-op area of outpatient surgery. Your nurse will start an IV, confirm the planned procedure and review your medical history. Your operating room nurse, as well as a member of the anesthesiology team, will interview you and speak to you about the type of anesthesia that will be used during surgery. They will escort you to the operating room where your surgeon will confirm the correct site for surgery. Following surgery, you will be taken to the recovery room. A nurse will keep your family updated on your progress while you are in surgery and in the

recovery room. After surgery, your surgeon will speak with your family and/or friends.

Day of Surgery continued

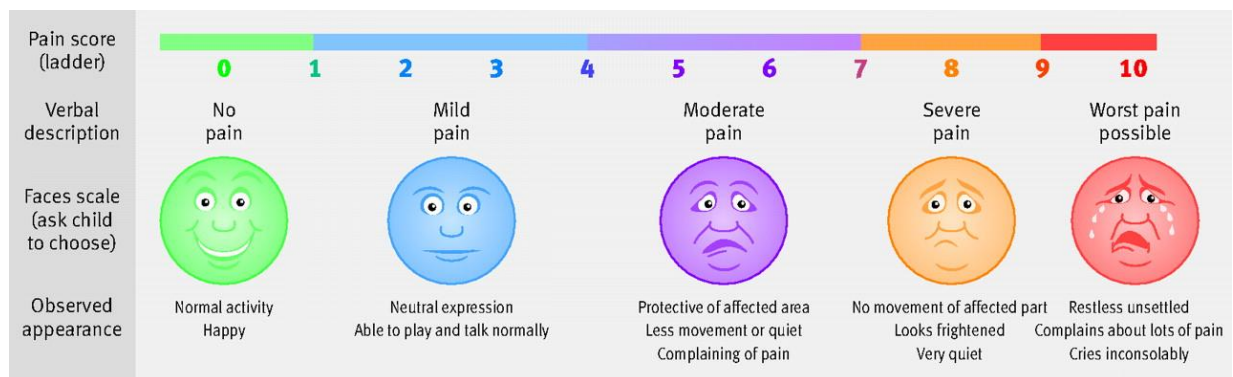
If your surgeon plans for you to go home the **same day as your surgery**, you will be brought back to the outpatient area from the recovery room where nurses and/or physical therapists prepare you for discharge home.

For patients **staying in the hospital after surgery**, you will be taken to the Orthopedic unit located on the 8th floor of the hospital. Your friends and family will be notified of the room number once it is available.

Your surgeon will discuss this with you PRIOR to your surgery

Pain Control

During your hospital stay, you will be asked to rate the intensity of your pain that you are experiencing. A numbered pain scale is used and ranges from 0 – 10, as seen below



There are several different types of pain control methods available to you that will keep you comfortable and allow you to be up and walking shortly after your surgery. Your surgeon will choose the right method for you based on your medical history and the amount of pain you are having.

It is important for you to communicate with your healthcare team if the pain medication is not sufficient, if you are not as alert as you think you should

be, or if you are nauseated. Adjustments can be made to your pain medication to make you feel more comfortable.

TED and SCD

After surgery you may have TED (Thrombo-Embolic Deterrent) hose and/or SCDs (Sequential Compression Devices) on your legs. These are both placed to help prevent blood clots from forming in your legs after surgery. TED hose are elastic and fit snugly to prevent blood from pooling and blood clots from forming in your lower legs. SCDs wrap around the lower legs plug into a device with a motor, and massage your legs to promote blood flow.

Hospital Stay

You will be admitted to the hospital for 1 – 3 days, or longer depending on your medical condition. While in your hospital room, the nurse and other staff members will:

- Frequently monitor your vital signs and assess your surgery site
- Give IV fluids, antibiotics, and medications as ordered (including home medications)
- Monitor your oxygen level
- Educate and prepare you for discharge

Remember

- Do not get out of bed without assistance from a hospital staff member.
- Do ankle pumps every hour. This is done by moving your ankles up and down slightly and wiggling your toes (see exercises on page 27).
- Turning in bed will help prevent skin breakdown, blood clots from forming, and lung congestion. The hospital staff will also help you with turning.

Your physical therapy will begin the day of surgery and **you will be out of bed and walking within 6 hours of surgery**. Getting up on the day of surgery aids in your recovery and helps prevent complications.

The physical and occupational therapists will work with you to begin a program tailored to your needs.

Hospital Stay continued

You will be instructed by the respiratory therapist or nurse on the use of an Incentive Spirometer (IS).

Incentive Spirometry is a deep breathing exercise that your surgeon will order to assist you after surgery. Deep breaths are needed to expand the air sacs in the lungs. This deep breathing exercise will help prevent lung problems, like pneumonia, and speed recovery.

The hospital will provide you with an IS meter. Continue use at home after discharge from the hospital.

How to Use Your Incentive Spirometer

1. Sit upright or as far upright as you can
2. Breathe out normally
3. Close your lips around the mouthpiece
4. Breathe in slow and steady through your mouth until your lungs are full
5. Remove the mouthpiece and hold your breath for 5 seconds
6. Breathe normally

Repeat this exercise 10 times every hour while you are awake.
Do not do all 10 in a row!



Hospital Discharge

You will be discharged from the hospital when you are medically stable. Pain prescriptions are typically given to you prior to your surgery.

If you have not purchased or obtained a front wheeled walker, the hospital can help coordinate that for you before you go home.

If you are discharged to home, you must have someone to drive you. We will assist you to your vehicle. When getting into a car, move the front passenger seat as far back as possible. **You should avoid riding home in a sports car, compact car, truck or any vehicle with raised suspension.**

You will not be able to drive until you are off of your pain medication and able to walk independently. Always check with your surgeon if you have any questions about when you can safely drive again. Please make arrangements for family or friends to drive you to all of your appointments during this time.

Discharge Options

Your physician and hospital staff will discuss your discharge plan with you based on your medical needs. Once your plan has been decided, all arrangements for your care and equipment will be made for you by a coordinator before you leave the hospital.

Possible discharge options include:

- Return home with outpatient physical therapy (most preferred option)
- Return home with home healthcare
- Go to a skilled nursing facility prior to returning home (least preferred option)

Outpatient Physical Therapy

Outpatient therapy services will include physical therapy at an outpatient center.

Home Healthcare

Home healthcare may be recommended for you for a safe transition home. This could include a nurse and/or physical therapist that will visit you at home after you are discharged from the hospital.

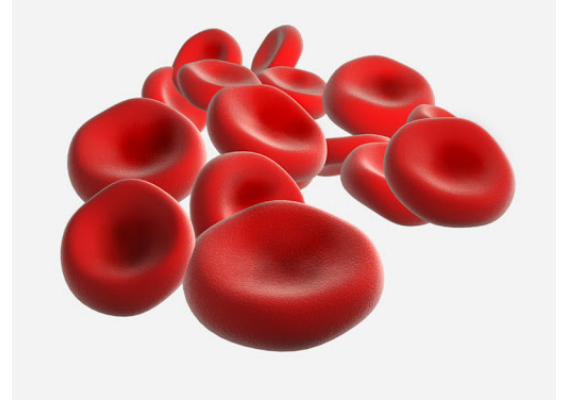
Skilled Nursing Facility

A skilled nursing facility will provide 24 hour trained care for patients who need more intensive therapy or a higher level of care. This will only be ordered by your surgeon if absolutely necessary.

Precautions after Surgery

Blood Clots

A blood clot, also called a deep vein thrombosis (DVT), is the formation of a blockage within one of the veins below the skin. It happens most often in the legs. When a DVT is not treated, the blood clot can dislodge and move to the heart or lungs resulting in a serious medical condition that could be fatal. It is important to inform your surgeon if you have a history of blood clots.



The warning signs of a blood clot are:

- Increased pain in your lower leg
- Tenderness and/or redness in your leg, ankle, or foot
- Increased swelling in the leg, ankle, or foot
- Sudden shortness of breath and/or chest pain

Blood Clot Prevention

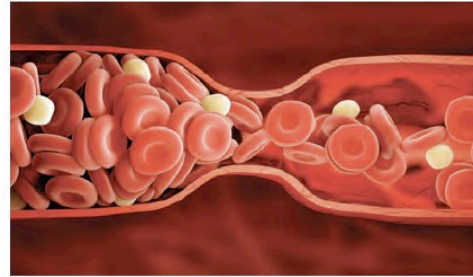
- Elevate your feet using pillows to raise your feet higher than the level of your heart while lying in bed
- TED hose are elastic support stockings that help improve blood flow (see page 17)
- Perform the exercises instructed by your surgeon and physical therapist
- Get up and walk every hour
- Avoid sitting with legs crossed
- Avoid prolonged bed rest

Blood Thinner

You will be instructed by your surgeon to take a blood thinner after surgery to help prevent a blood clot. This may be a prescribed medication or over-the-counter medication, such as Aspirin.

Call 911 if you experience:

- Chest pain and/or shortness of breath
- Coughing up blood or unexpected bleeding
- Continued and increased swelling or pain
- Dark and/or black stools



Surgical Site Infections

A surgical site infection (SSI) is an infection that occurs after surgery in the part of the body where the surgery took place. The risk of a surgical site infection is low but it can happen.

Surgical Site Infection Prevention

- Avoid touching your dressing or incision.
- If you need to touch your dressing or incision, clean your hands with soap and water for at least 20 seconds before doing so.
- Have your friends or family clean their hands with soap and water before coming into contact with you.
- The skin around your incision may begin to itch as it heals. It is important not to scratch with long fingernails. Scratching could introduce bacteria to the surgical site and cause an infection.
- Keep pets off of your lap and away from your incision.

You will need to take antibiotics for the rest of your life before any dental work, colonoscopy, surgery, or urologic procedures

Protect Against Bacteria

Washing your hands for at least 20 seconds with soap and water is one of the best ways to protect yourself from bacterial infection. Wash your hands often especially before, during, and after preparing food; being around someone who is ill; using the restroom; treating a wound; after sneezing or coughing; handling a pet; or after touching garbage.

Precautions after Surgery continued

Knee Replacement Precautions

For safety of your knee replacement, you should follow these precautions after surgery:

- Do not sit on low chairs
- Do not twist your knee for six to eight weeks
- Do not sit longer than 45 minutes at a time. This can make the muscles around your knee stiffen
- Do not place a pillow directly under your operative knee

Hip Replacement Precautions

After a hip replacement, you will need to learn new ways to move to protect your new hip. These are called hip precautions:

- Do not step far back with your surgical leg
- Do not turn your surgical leg outward

Constipation

Pain medications and lack of activity can cause constipation. Be sure to take medications for constipation as directed by your physician and drink plenty of water. Also eating foods high in fiber will help prevent constipation.

To prevent constipation:

- Increase fluids
 - Increase fiber (fruits/vegetables/bran)
 - Prunes and/or prune juice
 - Increase walking
-
- Stool softeners will make it easier to have a bowel movement without a laxative effect.
 - You may use an over-the-counter laxative, if needed (i.e. Miralax, Milk of Magnesia).

Care at Home after Hospital Discharge

When you return home, walking and daily exercises will be part of your routine. Walking will become easier and more enjoyable as your knee or hip becomes stronger.

Support Stockings

TED hose are elastic support stockings that may be ordered for you after discharge. The stockings fit your legs snugly and help improve blood flow and keep blood and fluid from swelling in your foot and ankle. It is important to wear them as instructed by your surgeon.

Pain Control

Cold Therapy:

- Apply ice packs to affected joint as needed for discomfort or swelling for 20 minutes using a barrier, such as a pillow case or other clean fabric, between the ice pack holder and your skin.

Pain Medications:

- Take pain medication when needed, as prescribed by your surgeon.
- Consider taking your pain medication before you exercise. You should feel a little better every day as you get stronger and your body heals.
- Don't wait until the discomfort is intolerable to take medication.
- It may be helpful to keep a written record of when you take your pain medication (include time, medication, and amount).
- As you have less discomfort, start to decrease how many pills you are taking and how often you are taking them. Eventually, you will no longer need pain medication.
- Do not drink alcohol or drive while taking pain medication.
- If you have new pain or swelling that is different from the pain you had in the hospital, please let your doctor and/or physical therapist know.

Body Changes

- Drink plenty of water to keep from getting dehydrated or constipated.
- Your energy level may be decreased for up to one month after surgery. Ensure that you get up to 8 hours of sleep per night to help with this.
- Get up slowly after you sit or lie down to improve your balance and coordination.

Incision Care

- You will be instructed before you leave the hospital how to care for your dressing.
- Keep your dressing clean and dry.
- You will be able to shower at home. Wrap your dressing in saran wrap before showering. Do not submerge your dressing in water, i.e. tub bath.
- Once your dressing is off:
 - Wash your hands before touching the incision if you have to touch the incision for any reason.
 - Wash the incision and the skin around it gently with soap and water.
 - Pat the incision dry with a clean towel.
 - Do not rub a towel over your incision.
 - No tub baths, swimming pools, or hot tub until your incision is completely healed.
 - Do not use any creams, lotions, ointments, or alcohol on or near your incision.
- Call your surgeon or care coordinator at the hospital if you notice an increase in drainage, redness, pain, odor, and/or heat around your incision area.

Swelling

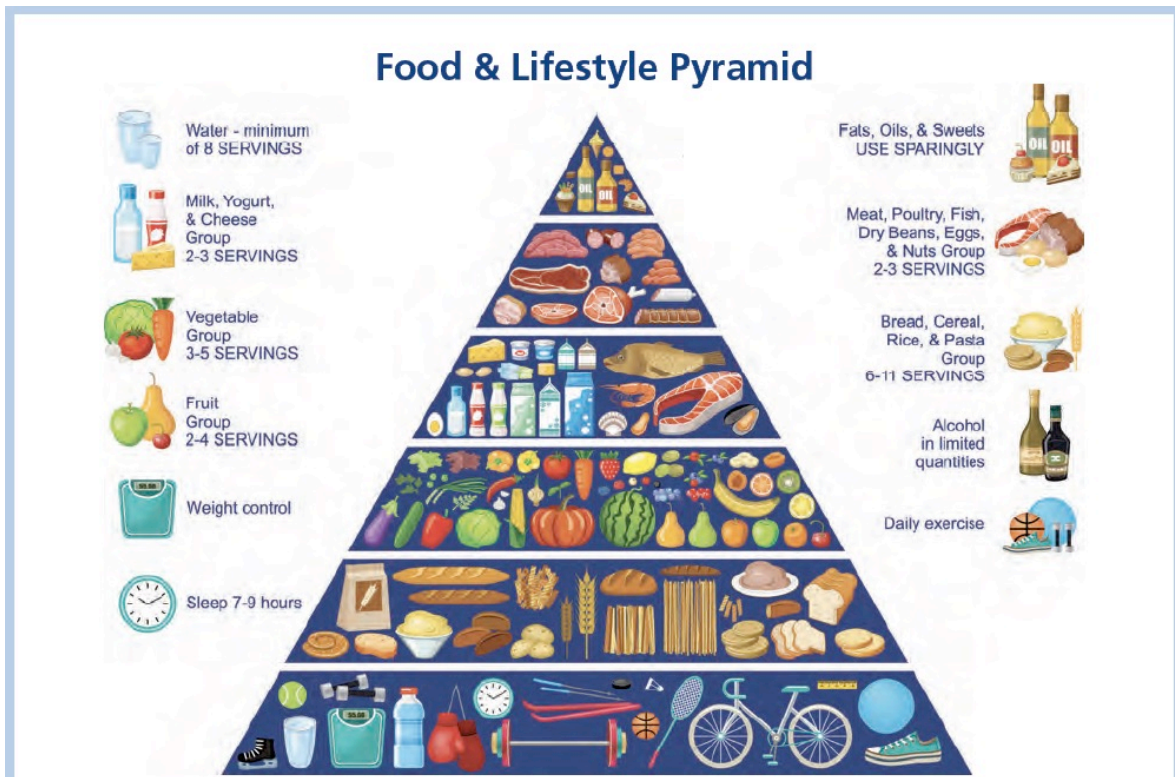
Swelling is common following joint replacement surgery. Some people have swelling while still in the hospital. Others may notice it once they are home and become more active. Areas most likely to become swollen are the foot, ankle, knee, and thigh. To prevent swelling, elevate your feet higher than

heart level and wear your compression stockings as prescribed by your physician. **If your swelling does not decrease after sleeping all night and elevating your legs during the day, please call your surgeon's office.**

Care at Home continued

Diet and Nutrition

Good nutrition and a well-balanced diet are important factors in healing and restoring strength after a total joint replacement. Use this food and lifestyle pyramid as a guide to healthy eating every day.



Foods high in fiber to help prevent constipation after surgery:



Exercise Guide

Regular exercise to restore your knee and hip mobility and a gradual return to everyday activities are important for your full recovery. Your surgeon and physical therapist may recommend that you exercise and walk approximately 20 to 30 minutes two or three times daily.

Walking

Soon after your surgery, you will begin to walk short distances and perform everyday activities. At first, you will walk with a walker. This early activity aids your recovery and helps your knee or hip regain its strength and movement.

Walking is the best way to help your knee or hip recover

Stair Climbing

The ability to go up and down stairs requires strength and flexibility. At first, you will need a handrail for support and will only be able to go one step at a time. Always lead up the stairs with your good leg and down the stairs with your operated leg. Remember, “Up with the good” and “Down with the bad”. You may want to have someone help you until you have regained most of your strength and mobility. A physical therapist will teach you how to use stairs before you leave the hospital.

Early Post-operative Exercises

The following guide can help you better understand your exercise/activity program that is supervised by your physical therapist and orthopedic surgeon. Start the exercises on the following pages as soon as you are able. You can begin these in the hospital. Exercise and activity should consistently improve your strength and mobility. If you have any questions, contact your surgeon or physical therapist.

KNEE REPLACEMENT PATIENTS:

You may experience knee pain and/or swelling after exercise or activity. You can relieve this by elevating your leg and applying ice wrapped in a towel.

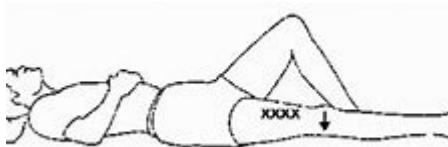
Exercises for Hip and Knee Replacement



Ankle Pumps – Dorsiflexion/Plantarflexion

1. Lie on your back with your legs out straight and relaxed.
2. Keeping your knee straight, point your foot up toward your knee. Hold this position 1-3 seconds.
3. Keeping your knee straight, point your foot straight down, away from your knee. Hold this position 1-3 seconds

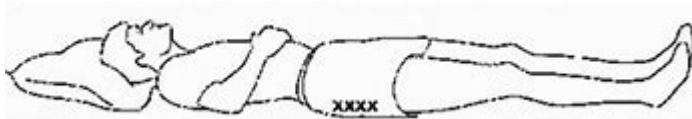
REPEAT: _____ Times



Quad Sets – Quadriceps Strengthen Exercise:

1. Lie on your back with your legs out straight and relaxed.
2. Bend your unoperated leg so that your foot is firmly placed against the bed. Keep the operated leg straight.
3. Straighten out your operated leg as much as possible, tightening the muscles on top of your thigh. Hold this position for 5 seconds, and then relax.

REPEAT: _____ Times



Gluteal Set – Gluteus Strengthening Exercise:

1. Lie on your back with your legs out straight and relaxed.
2. Squeeze your buttocks together as tightly as possible. Hold this position for 5 seconds, and then relax.

REPEAT: _____ Times

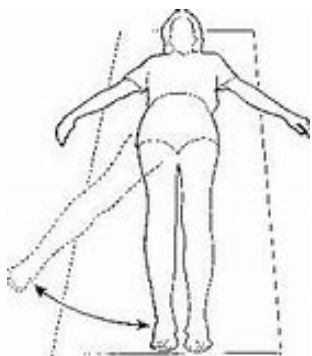


Heel Slides: Lower Extremity Strengthening Exercise:

1. Lie on your back with your legs out straight and relaxed.
2. Keep your kneecaps pointed toward the ceiling throughout the exercise.
3. Slide the foot of the operated leg towards your buttocks, bending your knee and hip.
4. Slowly return to the starting point.

REPEAT: _____ Times

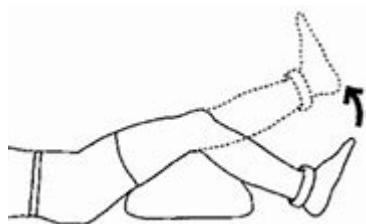
Exercises continued



Hip Abduction: Gluteus Strengthening Exercise (AVOID EXTREMES of more than 30-40 degrees)

- Lie on your back with your legs out straight and relaxed.
- Keep your toes pointed toward the ceiling throughout the exercise
- Slide your operated leg out to the side, keeping the heel in contact with the bed. AVOID EXTREMES of more than 30-40 degrees.
- Slowly return to the starting point.

REPEAT: _____ Times



Short Arc Quad – Quadriceps Strengthening Exercise

- Lie on your back with your legs out straight and relaxed.
- Place a rolled towel under the operated knee, allowing the knee to bend about 6 inches.
- Raise your foot off the bed until the knee is straight. Hold for 5 seconds, and then relax.

REPEAT: _____ Times



Long Arc Quad – Quadriceps Strengthening Exercise

- Sit on a sturdy surface, high enough that your feet don't touch the floor.
- Grip the sides of the surface for support.
- Straighten your operated knee as much as possible.
- Slowly returned to the starting position.

REPEAT: _____ Times



Straight Leg Raise – Quadriceps Strengthening Exercise (TOTAL KNEE REPLACEMENT ONLY)

1. Lie on your back with your legs out straight and relaxed.
2. Bend your unoperated leg so that your foot is firmly placed against the bed. Keep the operated leg straight. Remember to keep your toes and kneecap pointed to the ceiling throughout the exercise.
3. Tighten the thigh muscle on your operated leg and then lift the leg 6-8 inches off the bed while keeping the knee straight.
4. Slowly return to the starting position

REPEAT: _____ Times

Frequently Asked Questions

How long will I be in the hospital?

Every patient and every situation is different. You will be discharged as soon as our team determines you are ready, which may be within one day.

How soon will I be walking?

You will start walking on the day of your surgery. A nurse or physical therapist will help you begin walking within 6 hours of surgery.

How long will I need to use my walker?

You will use your walker 2 to 4 weeks after surgery, though this varies patient to patient. Your therapist will work with you to wean you from your walker.

How long do I have to follow hip precautions?

Your surgeon will tell you how long you have to follow hip precautions. Typically about three weeks.

When can I lay on my operated side?

As soon as the day after your surgery if it feels comfortable.

When can I take a shower?

Unless otherwise instructed by your surgeon, you can take a shower when you get home. You should cover your dressing in saran wrap prior to showering.

How long does it take to recover from joint replacement surgery?

This varies person to person. Short-term recovery takes about 6-12 weeks and long term recovery could take up to 6 months or longer.

When can I drive?

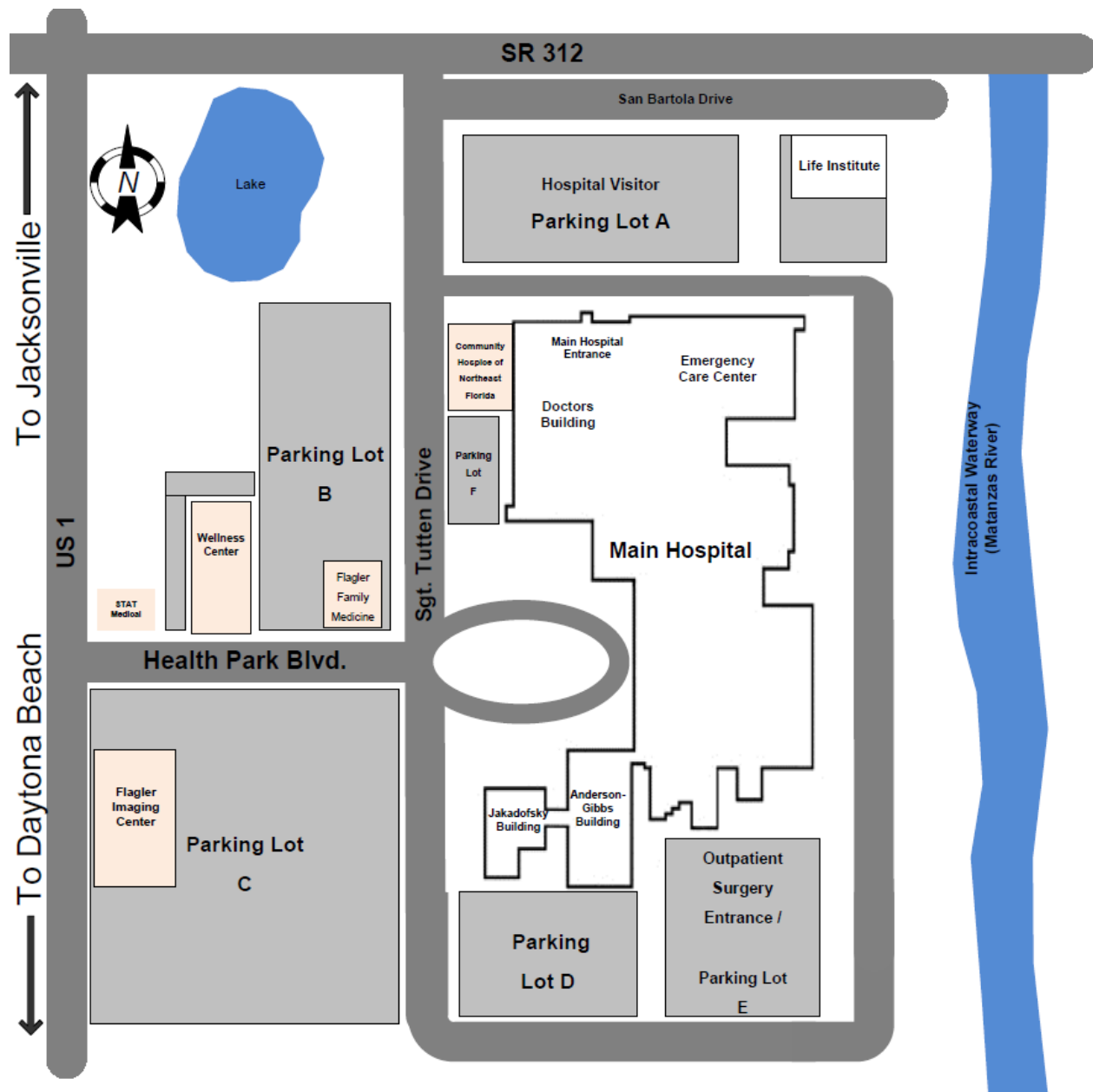
There is no medical clearance to drive. It is not safe for you to drive if you are physically impaired or on pain medication. It is recommended that you

be able to walk completely independently without an assistive device before attempting to drive.

When can I go back to work?

Depending what your job is, you can go back to work when your surgeon clears you to do so.

Flagler Health + Campus Map



Thank you!

Thank you for choosing Flagler Health + for your joint replacement needs! We hope that this book serves as a helpful reference for you as you prepare for and recover from your surgery. Please do not hesitate to ask our experienced team of surgeons, physician assistants, nurses, rehabilitation specialists and other team members if you have any additional questions.

Ask to speak to our Orthopedic Care Coordinator or any of our nurses and let us know how we are doing. We welcome your feedback!

