

Post-Operative Instructions

Total Joint Replacement - Milan Moore, MD, MPH

Swelling, Elevation & Ice

Elevation

- Swelling and bruising of the operative leg are very common after total joint replacement and can last for up to several weeks after surgery.
- For effective elevation, lie on a bed, couch, or recliner and position the operative leg so the ankle is **above** the level of your heart for 20-30 minutes at a time, several times daily during the first few days. Continue as needed based on swelling.
- For knee replacement patients, support the calf and heel rather than placing a pillow directly behind the knee if possible. This helps the knee regain full extension.

Ice

- Apply an ice pack or ice machine for 20-30 minutes at a time, followed by at least a 20-minute break. Do this several times daily, especially in the first few days after surgery.
- Do not place ice directly on the skin. Use a towel, cloth, or Ace wrap as a barrier.
- Ice may be used over the incisional area and other swollen or painful areas of the leg, including the thigh, knee, ankle, or foot.

Compression, Dressing & Incision Care

Ace wrap - total knee replacement

- The Ace wrap provides gentle compression and should usually remain in place for about 2 days.
- After 2 days it may be removed, or continued if the compression is comfortable. If it feels too tight, it may be loosened and rewrapped.

Bandage

- The adhesive postoperative bandage is intended to remain in place for approximately 2 weeks and is usually removed at your postoperative visit.
- The bandage is waterproof. You may shower as soon as the day after surgery and allow water to run over it. Do not soak or submerge the incision.
- A few small spots of blood on the dressing are common. If drainage spreads substantially across the dressing, reaches the edges, leaks out, or the dressing becomes loose, do not remove it unless instructed. Reinforce it with clean gauze if needed and call our office for guidance.

Wound closure

- Most incisions are closed with absorbable sutures under the skin. There are generally no staples or external sutures to remove unless your surgeon tells you otherwise.
- Skin glue may remain after the dressing is removed and will flake off naturally.
- For the first 6 weeks, do not scrub the incision, soak/submerge it, or apply lotions, ointments, antibiotic gels, scar creams, essential oils, hydrogen peroxide, alcohol, iodine, Neosporin, or other topical products unless specifically instructed.

Fall Prevention & Safe Mobility

- Use your walker until physical therapy or your surgical team confirms that it is safe to transition to a cane or no device.
- Avoid pivoting or twisting on the operative leg. Turn by taking several small steps.
- Use extra caution on stairs and steps. Follow techniques taught by physical therapy and use handrails.
- Remove loose rugs, cords, clutter, and other trip hazards. Keep pets and children out of your immediate walking path.
- Use good lighting, especially at night. Do not carry objects that prevent you from safely using your walker.
- You may be more unsteady during the first several weeks because of healing, weakness, fatigue, and postoperative medications.

When to Call Us / When to Seek Emergency Care

CALL OUR OFFICE PROMPTLY After Hours Phone Number: 360-709-6226	CALL 911 / SEEK EMERGENCY CARE
• Temperature 100.4°F (38.0°C) or higher, especially if persistent • Increasing redness or warmth spreading around the incision • New or increasing drainage or wound separation • Dressing becoming substantially saturated or leaking • Pain that is worsening or not controlled with the prescribed regimen • A fall or injury involving the operative leg • Increasing calf pain or swelling	• Sudden shortness of breath • Chest pain • Coughing up blood • Fainting or severe lightheadedness • Sudden inability to move the operative leg or obvious deformity/dislocation • Uncontrolled bleeding

Frequently Asked Questions

When can I drive?

Do not drive for at least 2 weeks after total joint replacement and until you are cleared to drive. You must be off opioid pain medication, able to get into and out of the vehicle safely, and able to operate the pedals and perform an emergency stop without hesitation. Recovery may take longer after right-sided surgery.

Will I be able to kneel on my total knee replacement?

About half of patients eventually feel comfortable kneeling after total knee replacement. Kneeling is generally not harmful to the implant once the incision has healed, but it may remain uncomfortable or feel different than before surgery.

What will my knee look like after it heals?

A total knee replacement will not have exactly the same shape as your native knee. The contour of the implant can sometimes be mistaken for persistent swelling. If wound healing is uncomplicated, the incision generally matures gradually over the first year and typically becomes thinner and lighter in color.

How fast will I recover?

Recovery varies substantially. Most patients notice meaningful improvement in pain and function during the first several weeks, but the need for a walker, cane, or no assistive device differs from person to person. Soft-tissue healing and remodeling continue for many months, and improvement can continue throughout the first year after surgery.