The complication rate is low after Total Knee Replacement Surgery

> Knee joint infections occur in fewer than 2% of patients
> More serious complications have an even lower occurrence rate
> Chronic illnesses may increase the possibility of complication

Infection

Preventative antibiotics taken before certain procedures may prevent bacteria from entering the bloodstream and causing an infection. Bacteria may enter the bloodstream during dental procedures, urinary tract infections (UTI) or skin infections.

Tell your doctor immediately if you experience any of the following signs of infection:

> Continuous fever (>100 degrees Fahrenheit)
> Shaking chills
> Increased redness, tenderness or swelling of the knee
> Knee wound drainage
> Increased knee pain during activity/rest
Surgery Results

While improvement of knee motion is the goal of surgery, restoration of full motion is uncommon. Most patients can fully straighten and bend the knee when moving in and out of cars and climbing stairs.

After surgery you may experience:

> Numbness of skin around the knee
> Stiffness, especially during excessive bending
> The feel or sound of clicking when bending the knee or walking

It is normal to experience these side effects after surgery.

Benefits of Surgery

> Reduction or elimination of joint pain
> Increased leg strength
> Improved quality of life
> Years of easier movement

Total Knee Replacement

If medications and walking supports no longer help your knee, you may need a total knee replacement. Knee replacement is also known as “knee resurfacing” because only the surface of the bones are replaced.

This safe and effective surgery can:

> Relieve pain
> Correct leg irregularities
> Help you resume normal activities

A recommendation for Total Knee Replacement Surgery may be made if you experience:

> Severe knee pain/stiffness that limits everyday activities including: walking, climbing stairs and moving in and out of chairs
> Moderate/severe knee pain while resting
> Chronic knee inflammation (not improved by medications/rest)
> Knee deformity
> No improvement from anti-inflammatory medications, cortisone injections, lubricating injections or physical therapy

Talk with your family, primary care physician and orthopedic surgeon to determine whether you should have Total Knee Replacement Surgery.
Are you a candidate for Surgery?

To determine if total knee replacement surgery is right for you, your physician will:

- Gather your medical history
- Complete a physical examination to assess motion, stability, strength and alignment
- Order X-rays to determine the amount of damage

Surgery Day

- You will be admitted to the hospital
- Surgery usually takes one to two hours
- The knee’s damaged cartilage and bone will be removed and a new plastic and metal implant will be positioned into place
- You will be monitored for several hours during your recovery from anesthesia
- You will be taken to your hospital room once you wake up

After Surgery

Pain Management

- Medications will be provided to help ease your pain and make you more comfortable
- Once your pain level decreases, you can begin moving around

Physical Therapy

- Most patients start exercising their knee one day after surgery
- Your physical therapist will work with you on specific knee strengthening/restorative exercises
- You may use a Continuous Passive Motion machine (CPM) to move your knee while resting, decrease swelling and improve circulation

At Home

Wound Care

- Stitches and staples will be removed several weeks after surgery
- Do not soak the wound in water until it is completely sealed and dried
- Keep the wound bandaged to prevent irritation from clothing/support hose

Activity

- Exercise is critical during the first weeks after surgery
- You may resume normal activities within three to six weeks
- Pain at night and during activity is common for several weeks
Are you a candidate for Surgery?

To determine if total knee replacement surgery is right for you, your physician will:

> Gather your medical history
> Complete a physical examination to assess motion, stability, strength and alignment
> Order X-rays to determine the amount of damage

Surgery Day

> You will be admitted to the hospital
> Surgery usually takes one to two hours
> The knee’s damaged cartilage and bone will be removed and a new plastic and metal implant will be positioned into place
> You will be monitored for several hours during your recovery from anesthesia
> You will be taken to your hospital room once you wake up

After Surgery

Pain Management

> Medications will be provided to help ease your pain and make you more comfortable
> Once your pain level decreases, you can begin moving around

Physical Therapy

> Most patients start exercising their knee one day after surgery
> Your physical therapist will work with you on specific knee strengthening/restorative exercises
> You may use a Continuous Passive Motion machine (CPM) to move your knee while resting, decrease swelling and improve circulation

At Home

Wound Care

> Stitches and staples will be removed several weeks after surgery
> Do not soak the wound in water until it is completely sealed and dried
> Keep the wound bandaged to prevent irritation from clothing/support hose

Activity

> Exercise is critical during the first weeks after surgery
> You may resume normal activities within three to six weeks
> Pain at night and during activity is common for several weeks
If medications and walking supports no longer help your knee, you may need a total knee replacement. Knee replacement is also known as “knee resurfacing” because only the surface of the bones are replaced.

This safe and effective surgery can:

- Relieve pain
- Correct leg irregularities
- Help you resume normal activities

A recommendation for Total Knee Replacement Surgery may be made if you experience:

- Severe knee pain/stiffness that limits everyday activities including: walking, climbing stairs and moving in and out of chairs
- Moderate/severe knee pain while resting
- Chronic knee inflammation (not improved by medications/rest)
- Knee deformity
- No improvement from anti-inflammatory medications, cortisone injections, lubricating injections or physical therapy

Talk with your family, primary care physician and orthopedic surgeon to determine whether you should have Total Knee Replacement Surgery.
If medications and walking supports no longer help your knee, you may need a total knee replacement. Knee replacement is also known as “knee resurfacing” because only the surface of the bones are replaced.

**This safe and effective surgery can:**

- Relieve pain
- Correct leg irregularities
- Help you resume normal activities

A recommendation for Total Knee Replacement Surgery may be made if you experience:

- Severe knee pain/stiffness that limits everyday activities including: walking, climbing stairs and moving in and out of chairs
- Moderate/severe knee pain while resting
- Chronic knee inflammation (not improved by medications/rest)
- Knee deformity
- No improvement from anti-inflammatory medications, cortisone injections, lubricating injections or physical therapy

Talk with your family, primary care physician and orthopedic surgeon to determine whether you should have Total Knee Replacement Surgery.
The complication rate is low after Total Knee Replacement Surgery

> Knee joint infections occur in fewer than 2% of patients
> More serious complications have an even lower occurrence rate
> Chronic illnesses may increase the possibility of complication

Infection

Preventative antibiotics taken before certain procedures may prevent bacteria from entering the bloodstream and causing an infection. Bacteria may enter the bloodstream during dental procedures, urinary tract infections (UTI) or skin infections.

Tell your doctor immediately if you experience any of the following signs of infection:

> Continuous fever (>100 degrees Fahrenheit)
> Shaking chills
> Increased redness, tenderness or swelling of the knee
> Knee wound drainage
> Increased knee pain during activity/rest