Hip and Knee Replacement Guide
WELCOME!

If you’re considering knee or hip replacement surgery, we want to ensure that all of your questions are answered. Knowing what to expect will help you feel more confident as you prepare for, undergo, and recover from surgery.

This comprehensive guide is intended to help you understand how the preparation and recovery processes work.

Talk to your surgeon and primary doctor. Ask questions.

If you do make the decision to have joint replacement, know that we are here to support you every step of the way.
CONSIDERING SURGERY

How do I determine if I need hip or knee replacement surgery?

- The first step is to meet with any of our orthopedic specialists. Surgery may not be the answer for everyone. Some patients can find relief from other therapies. But, an expert will evaluate you to see what treatment plan is best for you.

- Talk to your primary care physician if you are experiencing continued pain and inability to perform your normal daily activities: both physical and mental.

If I decide with my doctor, that replacement surgery is needed, what do I need to do to prepare?

- The surgeon will order lab work and tests to be completed within 3 weeks of surgery. These tests make sure you’re in good health for both the surgery and recovery. After the tests, you’ll follow up with your primary care doctor. During the visit your primary doctor will review all the test results and discuss any health concerns.

- If you haven’t had a routine teeth cleaning, you’ll want to visit the dentist to have a professional dental cleaning a few weeks before surgery. Talk with the dentist and your surgeon about any major dental work. Dental work should not be scheduled for several weeks after joint surgery.

What are the risks or complications of knee or hip replacement surgery?

- All surgeries, including knee and hip replacement surgery have a potential for complications, such as blood clots, infection, vessel or nerve injury, stiffness and pain after surgery. However, the American Association of Hip and Knee Surgeons states that complications are relatively rare (1-2% of patients). Following post-surgery procedures such as keeping the wound clean and occupational therapy reduces the chance of risks or complications.

Generally speaking, your hospital stay will be between one and three days.
Am I eliminated from having surgery if I am a smoker?

- Stop smoking now. If you need help, talk with your primary doctor.

How do I handle my medications if I am considering surgery? Do I continue my meds or do I need a different regimen? What about the herbal medications that I take? Can I continue taking them?

- Specific instructions to stop taking:
  - Aspirin – stop 5 to 7 days prior to surgery unless otherwise instructed
  - Nonsteroidal anti-inflammatory drugs (NSAIDS) such as Ibuprofen, Motrin, and Naproxen – stop 5 to 7 days prior to surgery unless otherwise instructed
  - Herbal supplements – stop at least 2 weeks prior to surgery

Some examples:
- St. John’s Wort
- Ginseng
- Ginkgo Biloba
- Feverfew
- Metabolife
- Herbalife
- Glucosamine and Chondroitin

HAVING SURGERY

What is the general length of a hospital stay for a hip or knee replacement?

- Generally speaking, your hospital stay will be from one to three days depending on your progress.

What kind of anesthesia is used for hip or knee replacement surgery?

- General Anesthesia
- Nerve block
- Epidural/Spinal

Knee replacement is one of the most common surgeries in the US today with over 720,000 performed annually.
Will I be able to return to my home after surgery or will I need to go to a skilled nursing facility?

- Most patients are able to return to their own home following surgery.

Will I need a wheelchair or other assistive device?

- You may need a walker at first.

- You may need a cane for a short period of time.

How do I need to prepare my home for my return after surgery?

- Remove loose rugs and small objects to avoid tripping.

- Move food and dishes to cabinets that are between knee and chest level.

- Increase the height of chairs by placing wooden blocks or risers under the legs.

- If you have a sofa with soft cushions, place a piece of plywood underneath the cushions to for extra support when sitting.

- Move clothing so that it is easily reached, between knee and chest level.

- If getting out of bed will be difficult, add a short bed rail.

- Increase the height of your bed by adding risers or wood blocks under the legs.

- Change sheets and wash bed linens, so they are clean and free of debris. This is important for infection prevention.

The number of Americans living in artificial hips is around 2.5 million.
Will I need someone to stay with me during my recovery?
• This depends on the individual patient and how well recovery is going upon release.

• If homebound and have a skilled need, home health services will be ordered. Home visits from a registered nurse or physical therapist are covered by Medicare, Medicaid and many private insurance companies.

• Some patients will need assistance with bathing, meal preparation and light housekeeping after discharge from a hospital. As a rule, Medicare, Medicaid, or private insurers do not cover custodial care or extended care hours.

GETTING BACK TO DAILY LIFE

Generally speaking how long is the recovery period before I can return to normal activities?
• This timeline should be used as a guideline only. Talk to the doctor about your specific activity level.
  21 days - Independent with all meal preparation
  49 days - Completing all normal daily chores
  60 days - Shopping for longer periods of time
  84 days – Driving

What is the process for handling the pain after surgery?
• Pain is unique to each patient. The doctor chooses pain medication based on age, what other health conditions exist and the patient’s current condition.

• There are several different ways to give pain medicine:
  IM - intramuscular shot
  IV - intravenous
  Pain Pills

• Other aids to control pain:
  Cold packs
  Positioning
  Listening to music or relaxation tapes
  Watching television or reading
  Prayer and positive thinking

Currently, knee implants are built to last 20-25 years before needing any kind of revision procedure
Will I need physical therapy to aid in my recovery?
• Physical therapy will start the day after surgery to help you with walking and other activities.
• Occupational therapy after surgery is to help you become safely independent in performing activities of daily living.
• Physical therapy and occupational therapy may be done at home at first. Later you may be required to go to a physical therapist outside the home.

Is there a special exercise program I will be expected to follow?
• The physical therapist and occupational therapist under doctor’s orders will teach you what exercises you need to perform in the hospital and at home.

When will I be able to drive again?
• When the doctor indicates it will be safe. Generally speaking it usually takes about 84 days for recovery to be sufficient to drive. However, each patient is different and your doctor will decide on an individual basis.

BJC Healthcare Can Get You Moving Again!

Whether result of an injury or the effects of arthritis, joint pain can cause you to miss out on life. Removing a damaged knee joint and replacing it with an artificial joint can restore pain-free range of motion.

Take the first step toward a pain-free, active life. Request a consultation with one of our orthopedic experts to see if surgery is right for you by calling 608-821-3522 or request a consultation at: www.BJC.org/Ortho/Consult.