I **PAIN:**

**TOTAL KNEE REPLACEMENT-POST OPERATIVE 2 WEEK INFORMATION**

Next Appt:

CONTINUE WITH PAIN MEDICINE AS NEEDED

WEAN OFF PAIN MEDICINE AS YOU ARE ABLE BY CUTTING DOWN ON AMOUNT OF DRUG OR EXTENDING THE TIME BETWEEN DOSES, OR BOTH. DO NOT STOP PAIN MEDICINES ABRUPTLY.

MAXIMUM TYLENOL IN A 24 HOUR PERIOD IS 3000MG (6 EXTRA STRENGTH TYLENOL)

# BLOOD THINNER:

CONTINUE TAKING BABY ASPIRIN 81MG TWICE-A-DAY FOR ONE MORE WEEK THEN DECREASE TO ONCE-A-DAY FOR AN ADDITIONAL THREE WEEKS

IF YOU ARE TAKING ELIQUIS FINISH PRESCRIPTION THEN TAKE ONE BABY ASPIRIN (81MG) A DAY FOR THREE WEEKS

# WOUND CARE:

DO NOT SUBMERGE WOUND, NO LOTIONS OR CREAMS ON THE INCISION UNTIL IT IS FULLY HEALED SHOWER NORMALLY DO NOT SCRUB THE INCISION

REPORT ANY UNUSUAL REDNESS OR DRAINAGE

# OTHER INFORMATION:

TAKE YOUR PAIN MEDICINE 45 MINUTES PRIOR TO PHYSICAL THERAPY YOU MAY TRANSITION TO A CANE

YOU CAN GET RID OF YOUR STOCKINGS

YOU CAN DRIVE ONCE YOU ARE OFF PAIN MEDICATIONS AND YOU FEEL LIKE YOU HAVE CONTROL OF YOUR LEG FINISH ANTI-INFLAMMATORY, NO NEED TO REFILL

YOU CAN START ALL VITAMINS AND SUPPLEMENTS

WEEK TWO GOAL: < 3 DEGRESS OF EXTENSION AND >100 DEGRESS OF FLEXION WEEK SIX GOAL: 0 DEGREES OF EXTENSION AND 120 DEGREES OF FLEXION

WEAR KNEE IMMOBILIZER AT NIGHT FOR 4 WEEKS. YOU MAY STOP WEARING IF YOU ARE ABLE TO KEEP YOUR EXTENSION UNDER 3 DEGREES ON YOUR OWN

CONTINUE TO ICE AND ELEVATE AT HOME AS NEEDED

**QUESTIONS? CONTACT OUR OFFICE AT 203-337-2600 NEED REFILLS?**

**48 HOURS BEFORE RUNNING OUT OF MEDICATIONS LEAVE YOUR PHARMACY NUMBER,**

**ALLERGIES, DATE OF SURGERY, DATE OF BIRTH, MEDICATION NAME AND DOSAGE ON VOICEMAIL**