

Your 1 Month Visit following a Total Knee Replacement

We will review your x-rays and examine your knee today. The following are some common things that most patients experience at this time:

1. It is not uncommon to still have pain, especially pain at night or pain/stiffness after being in one position for too long. Try to keep the knee moving – this will decrease pain and stiffness.
2. If you have not already stopped using narcotics you should be weaning off the narcotics now. You can do this by increasing the time between doses and/or decreasing the amount of narcotic that you are taking.
3. Tylenol will still help. Start to wean off the medications by decreasing the dose every few days.
4. Anti-inflammatory (ibuprofen, Naprosyn) will help with the pain. Avoid if you are on a blood thinner (Coumadin, Plavix, etc) or if your primary care doctor or cardiologist have told you to avoid NSAIDs.
5. It is common for the knee to feel warm, this will go away over time.
6. It is also common to have some numbness on the lateral (or outside) part of the knee. The incision cuts some small skin nerves that are un-avoidable at the time of surgery. Over time the area will get smaller and most if not all of the numbness will go away.
7. You can start moisturizing the scar. You can use any lotion you have at home such as aloe, vitamin E cream, cocoa butter. Massaging the scar will help de-sensitize the scar and help flatten the scar and improve the appearance of the scar.

8. At this point you should be able to straighten the knee and bend the knee to 100 degrees. Continue being diligent with your physical therapy every day.

9. Ice and elevation are helpful to control swelling.

10. Continue with your PT. A stationary bike is a great way to exercise and work on range of motion.