

HOME CARE INSTRUCTIONS - AFTER DISCHARGE

NAUSEA & VOMITING MANAGEMENT

- Medication: Zofran 4 mg (by mouth or sublingual/under the tongue), every 6 hours as needed for postoperative nausea and vomiting, can cause constipation.
- Other Recommendations:
 - limit amount of narcotics used after surgery (focus on multimodal pain management)
 - Frequent small meals helpful (nausea is worse on empty stomach)
 - Use stool softeners/laxatives, as constipation can cause worsening of the nausea and vomiting (see options under Constipation Prevention below)

CONSTIPATION PREVENTION

Stool softeners/laxatives are recommended. You may wish to start taking an over-the-counter laxative 2 days prior to surgery:

- Colace OTC - Take as directed
- Miralax OTC - 17 grams (large teaspoon) once daily diluted in 8 oz. of water, juice or coffee
- Senna OTC - (8.6 mg) 2 tablets daily not to exceed 4 tablets twice daily Over-the-counter stool softener of your choice. Take as directed.

PRECAUTION: Stool softeners/laxatives should be continued while taking narcotic medications. Stop stool softeners/laxatives if you have rectal bleeding, diarrhea or your nausea, bloating, cramping or abdominal pain gets worse. These may be signs of a serious condition and you should call your doctor.

Other Recommendations:

Limit amount of narcotics use after surgery (focus on multimodal pain management). Drink plenty of water.

Prunes and other fruits and vegetables high in fiber

Frequent mobility for short periods of time early after surgery

ACTIVITY AFTER DISCHARGE:

- Ankle pumps: 10 ankle pumps every hour while awake.
- Frequent mobility: Get out of bed as pain allows, approximately every hour while awake.
- Elevate your feet above the level of your heart while in bed.
- Knee patients (TKA): pillow under heel (not knee)
- Hip precautions (6 weeks post op)
 - Posterior : avoid flexion past 90 degrees, bring leg across midline and internal rotation
 - Anterior: avoid bringing your leg behind you, external rotation or laying on your stomach

- Continue to do home exercises that are prescribed to you by your therapist from your pre op PT visit
 - Some patients will have in-home PT for the first 2 weeks after surgery
- Work on motion!
 - After TOTAL KNEE our goal is to achieve 0 degrees of extension (i.e. “fully straight”) and 100 degrees of flexion (i.e. “bending”) by 3 weeks after surgery.
- Ask your physical therapist at every visit what your range of motion is – we will ask you at your appointments!
- Don’t worry about “strengthening” or building muscle. You will have plenty of time to regain this. The most important thing is motion. As your swelling subsides and pain decreases, you will begin to work on strengthening (usually after the first 6 weeks).
- With regards to your knee range of motion, remember – you never get a second chance at this first 6 weeks after surgery!

WOUND CARE:

- The ACE wrap can be removed 1-2 days after surgery.
- You will also have compression socks (knee high) to be worn during the day and off at night for 4 weeks
- Leave your dressing in place until follow up. Do not remove the dressing unless it is soaked through.
- You may shower starting 72 hours after surgery if there is no drainage. Your dressing is waterproof unless indicated otherwise, but try to avoid direct water on the dressing.
- Some drainage/oozing of blood is NORMAL on your dressing. If your dressing becomes completely saturated, please remove it and apply a dry dressing directly on to the skin (simple gauze and tape). You can put this in between the compression hose and skin if you prefer not to use tape. Gauze and tape is NOT waterproof, so should be removed for showering. Please call or message us if there is any confusion regarding this
- If your dressing should come off or be removed for any reason, please place a clean dry dressing over it. Don’t stress out! You have a reinforced skin closure underneath. However, please do let the office know if you are draining any fluid or blood beyond 5-7 days after surgery
- At two weeks after surgery, you can leave the incision open to air and you can shower. No bathing, pools, hot-tubs, or standing water 6 weeks after surgery and you are cleared by Dr Vaux
- DO NOT clean the wound with alcohol, Neosporin, betadine, hydrogen peroxide, or any materials unless instructed to do so by Dr. Vaux or his staff