



## Knee replacement leg positions

**Position 1:** This knee position encourages a straight knee but may be too painful at times. If so, refer to the 2<sup>nd</sup> position below.

**Position 2:** This knee position uses pillows for elevation and keeps the knee straight.

## Resources

The Journey Guide booklet is an excellent resource for information related to the complete hip or knee replacement process. A downloadable PDF version of the Journey Guide is available online at this link under **patient education materials**: [ortho.wustl.edu/joints](http://ortho.wustl.edu/joints).



ORTHOPEDICS

## Joint Coach Discharge Class

Washington University Orthopedics  
at Barnes-Jewish Hospital  
One Barnes-Jewish Hospital Plaza  
St. Louis, MO 63110

[ortho.wustl.edu/joints](http://ortho.wustl.edu/joints)

## Orthopedics



NATIONAL LEADERS IN MEDICINE

BARNES-JEWISH HOSPITAL

WASHINGTON UNIVERSITY PHYSICIANS

# Preparing for Your Discharge Home

As a joint coach you are an important participant in the recovery of your loved one.

## Topics we will discuss:

- Pain
- Ambulation/exercise
- Blood clot prevention
- Infection prevention
- Your questions

## PAIN CONTROL

- Pain medication should be taken according to prescription, and making a regular schedule is very important.
- Common side effects of pain medication are nausea, dry mouth, and constipation.
- Ice and elevation are also important to pain control by decreasing swelling and inflammation.
- Do not rest surgical leg on the floor longer than 30 minutes and change positions often throughout the day.
- Knee replacement patients should elevate their leg while keeping a straight knee. Creating a ramp with pillows may be helpful. (See photos on inside panel for examples of leg positions.)

Patients should use a walker or crutches as ordered.



## EXERCISE AND MOBILITY

- Patients are encouraged to take 6-8 short walks a day around their room or home.
- Physical therapy exercises should be done **two times** per day.

**Exercise instruction videos are available online at:**

[ortho.wustl.edu/KneeExercises](http://ortho.wustl.edu/KneeExercises)  
[ortho.wustl.edu/HipExercises](http://ortho.wustl.edu/HipExercises)

It is important to return to as many normal activities of daily life as possible, while staying within any precautions ordered by the doctor.

## BLOOD CLOT PREVENTION

- Be sure to take the blood thinner medication your doctor prescribed. This may be aspirin twice a day or Warfarin/Coumadin once a day.
- If ordered, wearing Active Care Pumps 23 hours a day is very important for preventing blood clots.
- Getting out of bed and walking can also help prevent blood clots.

## INFECTION PREVENTION

- Hand washing is key to staying healthy and preventing the risk for infection.
- Always handle or touch dressing with freshly washed hands.
- Change your dressings according to your discharge instructions.
- Keep a close eye on the incision for redness, hotness, odor, increased drainage, or any opening of the incision. Call the surgeon's office if any of these changes are seen.
- Use of the incentive spirometer frequently each day will help prevent respiratory infection.



Incentive Spirometer