



Information for
patients and
carers

Physiotherapy advice and exercises following Total Knee Replacement

When will I be discharged?

There are several targets you must achieve before the therapy team will consider you safe for discharge:

- You must be independently mobile using elbow crutches or other walking aid, such as a wheeled Zimmer frame
- You must be able to complete transfers independently, such as getting on and off the bed and in and out of a chair
- If required, you must be safe ascending and descending stairs
- You must be able to bend your knee adequately enough for functional day to day tasks (Physiotherapists will review this)
- Your pain should be well controlled so that you are able to complete day to day functional tasks safely
- You must have had a post-operative wound check and x-ray completed and reviewed by the medical team
- You must be medically fit for discharge
- If required, you must have all relevant occupational therapy equipment in place or on delivery ready for you returning home safely

Initially Post Surgery

You will have a bulky dressing around your knee that will be removed in the first 24 hours after surgery. Under this is a waterproof dressing that will remain on until you come for your follow up at approximately 2 weeks.

You may have some significant swelling and bruising after surgery. Staff on the ward can provide you with small bags of ice for the knee. If using ice, please do not use for more than 20 minutes at a time and ensure you move it round the affected knee to reduce risk of skin irritation and burns. You can continue to ice your knee in this way at home.

You may have pain in the operated leg after your surgery. You will have regular pain relief prescribed. If you feel your pain relief is inadequate, then you must make the ward nurses aware. This is important to not only make you more comfortable, but it will also help with your ward Physiotherapy sessions that may include mobility, transfers, exercises and stairs practice.

Knee Precautions

Please **DO NOT** place anything (e.g. cushions/pillows) under the back of your operated knee unless completing specific exercises, as this will limit how straight it will go and prolong your rehabilitation.

Please **AVOID** twisting and pivoting on your operated leg.

Please **AVOID** kneeling on your operated leg until your wound has fully healed, this may be uncomfortable for many months after surgery.

We **DO NOT** recommend you get into the bath until you have been reviewed at your 4 week clinic appointment.

Deep Vein Thrombosis (DVT)

If you are experiencing chest pain or increased breathlessness alongside excessive throbbing or cramping in the affected leg, extreme swelling, redness, warmth and it is painful to touch, then please contact emergency services or present to A&E or Urgent Care department in your local area.

Follow Up

Upon discharge from the ward, please make sure you have your follow up appointment. This should be scheduled for approximately 2 weeks after your surgery date. It is a face-to-face appointment where you will be reviewed by an Enhanced Recovery Nurse and a Specialist Physiotherapist. If clinically indicated, further therapy appointments can be allocated to guide your recovery and rehabilitation.

Walking

Once home, we expect you to continue walking daily and complete the daily exercises provided to you on the ward and in this booklet. Your goal should be to increase your walking distance each day as tolerated.

You may discard your crutches when you are walking without a limp and you feel safe and confident to do so. If you are not ready, then this can be reviewed with your Physiotherapist at your 2 week follow up appointment. It is acceptable to walk outside immediately following discharge using your elbow crutches.

Driving/Sitting In The Car

Following your discharge from hospital you may travel as a passenger in a car. Most return to driving at approximately 6 weeks after surgery, but this timescale varies between patients and is dependent on you being able to function the car and perform an emergency stop safely. It is your responsibility to check your insurance company will cover you before driving.

Exercises

The Physiotherapists recommend carrying out your exercises regularly throughout the day. Each exercise should be repeated little and often initially and increased as your muscles strengthen up to 10 times. We recommend you complete these daily exercises until your 2 week follow up appointment.

As previously mentioned, it is imperative that you keep up with your regular prescribed pain relief medication, so you can carry out your exercises effectively. If you are experiencing severe pain whilst doing the exercises, we advise that you speak to your GP regarding a review of your medications. Also, it would be advised that you express your exercise concerns to your Physiotherapist, either at your follow up appointment or over the phone using our contact details found at the end of this booklet.

Static Thigh.

In lying with your legs straight out in front of you, tighten the muscles at the front of your thigh, pushing the back of your knee down.

Hold the contraction for up to 5 seconds. Aim to repeat this exercise up to 10 times, every hour.



Inner Range Thigh.

Similar to the “Static Thigh” exercise, in lying with your legs straight out in front of you, tighten the muscles at the front of your thigh, pushing the back of your knee down with a pillow under your knee and heel (separately). **Remove pillow after exercises.**

Hold the contraction for up to 5 seconds and aim to repeat this exercise up to 10 times, every hour.



Heel Slides.

Slide your heel towards your bottom, therefore bending your knee.

Hold on the maximum bend possible within the limits of your pain tolerance for 5 seconds, then release and slide your heel away from your bottom, therefore straightening your leg. Aim to repeat this exercise up to 10 times, every hour.



Straight Leg Raise.

Place your un-operated knee either bent or straight out in front of you. Then with your operated leg, pull your toes towards you, tighten the muscles at the front of your thigh and lift your leg approximately 15cm off the bed. **do not be concerned if you cannot raise your leg off the bed straight away - keep persisting with this exercise**

Hold for up to 5 seconds, then slowly lower your leg down and aim to repeat up to 10 times, every hour.



Seated Knee Bend/Straightening.

In sitting in a chair with back support, with your feet on the ground, slide the foot of your operated leg back towards you as pain allows and hold for up to 5 seconds.

Then release the foot slowly and begin to straighten that knee by contracting the muscles at the front of your thigh and straightening the knee as much as possible. Again, hold for up to 5 seconds, and then slowly lower the leg back down.

Aim to complete this exercise up to 10 times, every hour.



Stairs With Crutches

Walking Up



1. Stand close to the stairs.
 2. Hold onto the handrail with one hand and the crutches with the other hand.
 3. First take a step up with your un-operated leg.
 4. Then take a step up with your operated leg.
 5. Then bring up the crutch
- Always go one step at a time.**

Walking Down



1. Stand close to the stairs.
 2. Hold onto the handrail with one hand and the crutch with the other hand.
 3. First put your crutch one step down.
 4. Then take a step with your operated leg.
 5. Then step your un-operated leg next to your operated leg.
- Always go one step at a time.**

Contact details

Should you require further advice or information please contact: Orthopaedic Physiotherapy Dept. (Chorley Hospital): 01257 245754 Leyland Ward (Chorley Hospital): 01257 245746

Sources of further information

www.lancsteachinghospitals.nhs.uk

www.nhs.uk

www.accessable.co.uk

www.patient.co.uk

All our patient information leaflets are available on our website for patients to access and download:

www.lancsteachinghospitals.nhs.uk/patient-information-leaflets

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Please ask if you would like help in understanding this information. This information can be made available in large print and in other languages.

Gujarati:

આ માહિતીને સમજવામાં સહાયતા જોઈતી હોય તો કૃપા કરીને પૂછો. આ માહિતી મોટા છપાણામાં અને અન્ય ભાષામાં ઉપલબ્ધ કરી શકાય છે.

Romanian:

Vă rugăm să întrebați dacă aveți nevoie de ajutor pentru înțelegerea acestor informații. Aceste informații pot fi puse la dispoziție în format mare și în alte limbi.”

Polish:

Poinformuj nas, jeśli potrzebna jest ci pomoc w zrozumieniu tych informacji. Informacje te można również udostępnić dużym drukiem oraz w innych językach

Punjabi:

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਸਮਝਣ ਵੱਲੋਂ ਮਦਦ ਲੈਣੀ ਚਾਹੋਗੇ ਤਾਂ ਕਰਿਪਾ ਕਰਕੇ ਇਸ ਬਾਰੇ ਪੁੱਛੋ। ਇਹ ਜਾਣਕਾਰੀ ਵੱਡੇ ਪ੍ਰਿੰਟ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵੱਲੋਂ ਮੁਹੱਈਆ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ।

Urdu:

دو سر ی زبانوں او ر بڑی اگر آپ کو ہی معلومات سمجھنے کے پیرل مدد کی ضرورت ہے تو ییچھیا یں یبھ ابی دست بو یسکت ہے برا ے مہر یبان یو ے یچھہی. معلومات

Arabic:

مطبوعه بأحرف كبيرة و بلغات إذا كنت تريد مساعدة في فهم هذه المعلومات يرجى أن تطلب أخرى يمكن توفير هذه المعلومات

Department: Core Therapies

Division: Diagnostics & Clinical Services (DCS)

Production date: November 2022

Review date: November 2025

JR 907 v1