

PARTIAL (UNI) KNEE ARTHROPLASTY (UKA) DR. ORYHON

PROCEDURE: Partial Knee Arthroplasty

GENERAL INSTRUCTIONS:

Use pain medication and/or ice packs when your knee hurts. It is advised (but not necessary) to take pain medication <u>before</u> you do your exercises and apply ice packs to your operative knee <u>after</u> exercises. Antithrombotic stockings (TED hose or compression stockings) are suggested for 2-4 weeks.

KNEE PRECAUTIONS:

Do **not** use heat or heat creams on your operative knee/leg. Do **not** lie with a pillow <u>under your operative knee for an extended time</u>. You **may** place a pillow <u>under the heel/ankle</u> to promote straightening of your knee.

Do not twist, pivot or jump on operative knee/leg.

Do **not** immerse the operative knee under water (no baths/pools x6 weeks).

Do not drive until cleared to do so by Dr. Oryhon (typically 3-6 weeks).

PHYSICAL THERAPY/REHAB:

Weight Bearing as Tolerated (WBAT) - use walker/cane as needed

Your inpatient rehab or home therapists will work on a UKA protocol, exercises include: ankle pumps, quad sets, straight leg raises, supine range of motion, seated range of motion, prone range of motion, terminal knee extension and gait training. *You should actively participate in your rehab and diligently do your prescribed exercises*.

Note: Recovery from this procedure is often very rapid and in some cases can lead to "over-doing" activity in the early weeks which can result in increased inflammation and pain several weeks post-op after a period of feeling great; be patient and know that the body usually needs at least 6 weeks to heal after surgery.

WOUND CARE:

Unless otherwise informed, your incision is closed with absorbable suture – no suture or staple removal is necessary. Skin Glue (Dermabond) covers your incision to protect it while the skin heals – this will fall off with time. Do **not** use ointments or creams on your operative knee.

Dry dressing change to incision if there is drainage (usually not needed past one week from surgery). Shower is allowed (without covering wound) once wound is completely dry (no drainage on dressing).

MEDICATIONS AND PRESCRIPTIONS:

Tylenol 1000mg every 8 hours for two weeks.

Additional pain medicine as prescribed. See "Medication and Education" section of your surgical packet. Aspirin 81mg twice per day to thin the blood and prevent blood clots in **most** cases for 30 days. An alternative oral medication (e.g. Eliquis, Xarelto) is sometimes used instead for higher blood clot risks. Colace or similar stool-softener as needed for constipation while on pain medicine. Ferrous Sulfate 325mg each day (iron supplement to combat anemia) for 14 days. **Also refer to the discharge medication reconciliation regarding your other medicines.**

CLINIC FOLLOW-UP:

Dr. Oryhon or his PA Sayra will see you for follow-up 3 and 6 weeks after surgery If you or your therapist have any concerns before the follow-up please call the office 847-381-0388. Refer to our website <u>www.ibji.com</u> for full UKA knee rehab protocol and other information. If you are considering going to the ER for a **non-life-threatening issue**, please call Dr Oryhon or his team first.