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Total Joint Replacement Discharge Instructions

Hip: Right Left

Knee: Right Left

Your Daily Medications After Surgery

- Acetaminophen (Tylenol)** – 1000mg every 8 hours for 4 weeks, for pain
- Meloxicam (Mobic)** – 15mg once per day for 4 weeks, for pain
- Oxycodone** – 5 - 10mg every 4-6 hours, for pain not controlled by Tylenol/Meloxicam
- Miralax** – 1 packet (17g) in 8 ounces of liquid, 1-2 times per day for constipation
- Pantoprazole (Protonix)** – 40mg once per day for 4 weeks, to prevent stomach ulcers
- Aspirin** – 81mg twice per day for 4 weeks, to prevent blood clots
- Other:

Your Incision & Dressing Care

- Your incision was closed with absorbable sutures that do not need to be removed
- Keep waterproof clear adhesive dressing in place until your first follow up visit
- **Showering** is allowed on **Day 2** after surgery
 - Knee patients - may remove ace wrap (leave clear dressing in place)
 - Do not scrub, pat lightly with towel to dry
- NO baths, pools, or hot tubs until 6 weeks after surgery
- If you have *new* drainage after 3 days or if the dressing begins to peel off, call our clinic

Your Activity & Exercise Plan

- No weight bearing restrictions or hip precautions
- Begin daily exercises using the **MyMobility App** or **Joint Replacement Handbook**
- Begin **Home Physical Therapy** - your therapist will call you within 72 hours to schedule
- **Walk** for 5 minutes at least 5 times per day. Use your **walker** at all times to prevent falls.
- Swelling and bruising in your thigh, knee, calf, and foot are normal after surgery.
 - **Elevate** - keep your “toes above your nose” at all times when not walking/exercising.
 - **Ice** - apply for 30 min, 5x per day (every 2 hours). Do not apply ice directly to skin. You may purchase multiple ice packs, use ice cubes placed in a sealed bag, or use frozen peas.

Your Follow Up Visit

- **2 weeks** after surgery - call our clinic at 831-757-3041 to confirm your appointment

Your Pain Management Plan

- Pain is a normal part of your recovery and is experienced differently by each patient.
 - It is common to feel aching and burning around your incision or joint
 - Pain will increase after 24 hours when the local anesthesia wears off
 - Pain may also increase after physical therapy or doing more activity
 - After 2 weeks, pain and swelling should start to subside
- The goal is to stay ahead of the pain and minimize it (but not eliminate it completely).
- We care about your comfort and our team will work with you to develop an individualized plan to manage your pain after surgery. Common strategies include:
 - Medications
 - Cold therapy, ice, and elevation
 - Relaxation techniques, deep breathing, meditation
 - Listening to music or watching TV/movies
- Your pain medications include:
 1. **Acetaminophen (Tylenol)** – 1000mg every 8 hours
 - Do not exceed 3000mg in a 24 hour period. Take daily for 4 weeks.
 2. **Meloxicam** – 15mg once a day
 - Anti-inflammatory medication. Take daily for 4 weeks.
 3. **Oxycodone** – 5-10mg every 4-6 hours.
 - Take only as needed for severe pain, before physical therapy, or at night
 - Begin to taper off as pain improves (typically by 2-6 weeks)
 - Start by taking half of your usual dose (break in half) or increasing the amount of time between doses
 - Weaning too fast can cause withdrawal symptoms and worse pain
 - While taking oxycodone:
 - Do not drive or perform any activities requiring concentration
 - Do not drink alcoholic beverages
 - Take **Miralax** and over-the-counter stool softeners for constipation
 - Side effects include nausea, vomiting, constipation, and drowsiness. Higher doses may cause respiratory depression, so do not increase the dose without talking to your doctor.
 - Disposal – drop off any unused pills at an authorized disposal location found on the [Drug Enforcement Administration website](#)
- **Refills**
 - Call the clinic during WEEKDAY business hours to request a refill
 - Plan ahead! No refills will be given on weekends or holidays, so please call in advance if you anticipate running out of your medication.
- If your pain is not adequately controlled, please call our clinic! We will review your current pain regimen and may make adjustments if needed.

Preventing Constipation, Blood Clots, and Infection

Is constipation normal after surgery?

- Narcotic pain medication (oxycodone) can cause constipation.
- It can take 5-7 days after surgery to have a bowel movement while taking oxycodone
- It is best treated by tapering off oxycodone, walking, drinking fluids, and taking laxatives.
- Take the following medication daily for constipation:
 - **Miralax** – 17g dissolved in 8 ounces of liquid, 1-2 times per day
 - Add over-the-counter stool softeners like **Colace** or **Senna** if needed

How do I prevent blood clots after surgery?

- Blood clots are rare but may occur after a joint replacement surgery.
- To help prevent blood clots, it is important that you do the following:
 - **Walk** for 5 minutes 5 times per day and do your daily exercises
 - Take your prescribed blood thinning medication:
 - **Aspirin 81mg** or **Eliquis 2.5mg** twice per day for 4 weeks
 - If you were previously taking an anticoagulant, you will get specific instructions about when to resume your usual dose
- **Call our clinic** at 831-757-3041 if you experience the following:
 - New increased leg swelling that has not been present from surgery and does not improve with 30 minutes of elevation
 - New pain/tenderness in either calf that has not been present from surgery
 - Blood in your stool or increased bleeding from your incision
- **Call 911** if any of the following occurs:
 - Sudden chest pain, shortness of breath or rapid/difficulty breathing

How do I prevent an infection?

- The most important way to prevent infection is for your incision to heal without drainage.
 - Follow Incision Care guidelines mentioned in the discharge instructions.
- Fevers up to **101.5° F** are very normal after surgery and should respond to Tylenol
- Call our clinic at 831-757-3041 if you experience the following:
 - Persistent drainage or new saturation of your dressing
 - Fever greater than **101.5° F**
 - Burning or pain with urination
- We recommend waiting **4-6 months** after surgery before having any **dental or other surgical procedures** to reduce the risk of infection. Antibiotics are not typically needed unless instructed by your surgeon.



Your Activity and Exercise Plan

When will I start physical therapy?

- A physical therapist will visit your home for the first 2 weeks after surgery
 - Your therapist should call you within 24-72 hours after discharge to schedule the visits
 - You will have 1-3 visits per week until your first postoperative visit.
- On Day 1 after surgery, begin doing your daily at-home exercises
 - Use the **MyMobility App** videos or the **Joint Replacement Guide**
 - Review these exercises with your home physical therapist
- You will begin outpatient physical therapy after your 2 week follow up visit

How much should I be able to bend my knee after knee replacement surgery?

- Achieving full knee range of motion should be your main goal after surgery!
- The first **6 weeks** are the most important to achieve a full motion before scar tissue forms.
- You should be able to straighten your knee fully - do not place any pillows behind it!
 - Place towel or pillow under your heel to allow gravity to help straighten your knee
- You should be able to bend your knee with the following goals:
 - 1 week: 90 degrees
 - 2 weeks: 110 degrees
 - 4 weeks: 120-140 degrees

When can I resume regular activities?

- **Weeks 1 - 2:**
 - Begin daily at-home exercises and start home physical therapy
 - **Walk** for 5 minutes, 5 times per day. Use your **walker** at all times to prevent falls
- **Weeks 3 - 4:**
 - Begin outpatient physical therapy, continue home exercises
 - Discontinue walker/cane as directed by physical therapy
- **Weeks 5 - 6:**
 - Most patients can return to normal activities of daily living without limitations
 - Resume driving if off narcotics and can safely operate gas & brake pedal with return of normal reaction time. This may occur sooner after left-sided surgeries.
 - Resume sexual activity if incision is healed and it does not cause pain
- **Week 12:**
 - Most patient may return to work and approved low-impact athletic activities

Allowed	Allowed with Experience	Not Allowed
Stationary/road cycling, Golf, Hiking, Bowling Swimming, Rowing Weightlifting, Yoga, Pilates	Skiing, Ice/roller skating, Pickleball, Tennis (doubles) Rock climbing	Basketball, Baseball, Football, Soccer, Volleyball, Racquetball Jogging, Tennis (singles) Snowboarding, Martial arts