

Your Guide to **Total Knee Replacement**

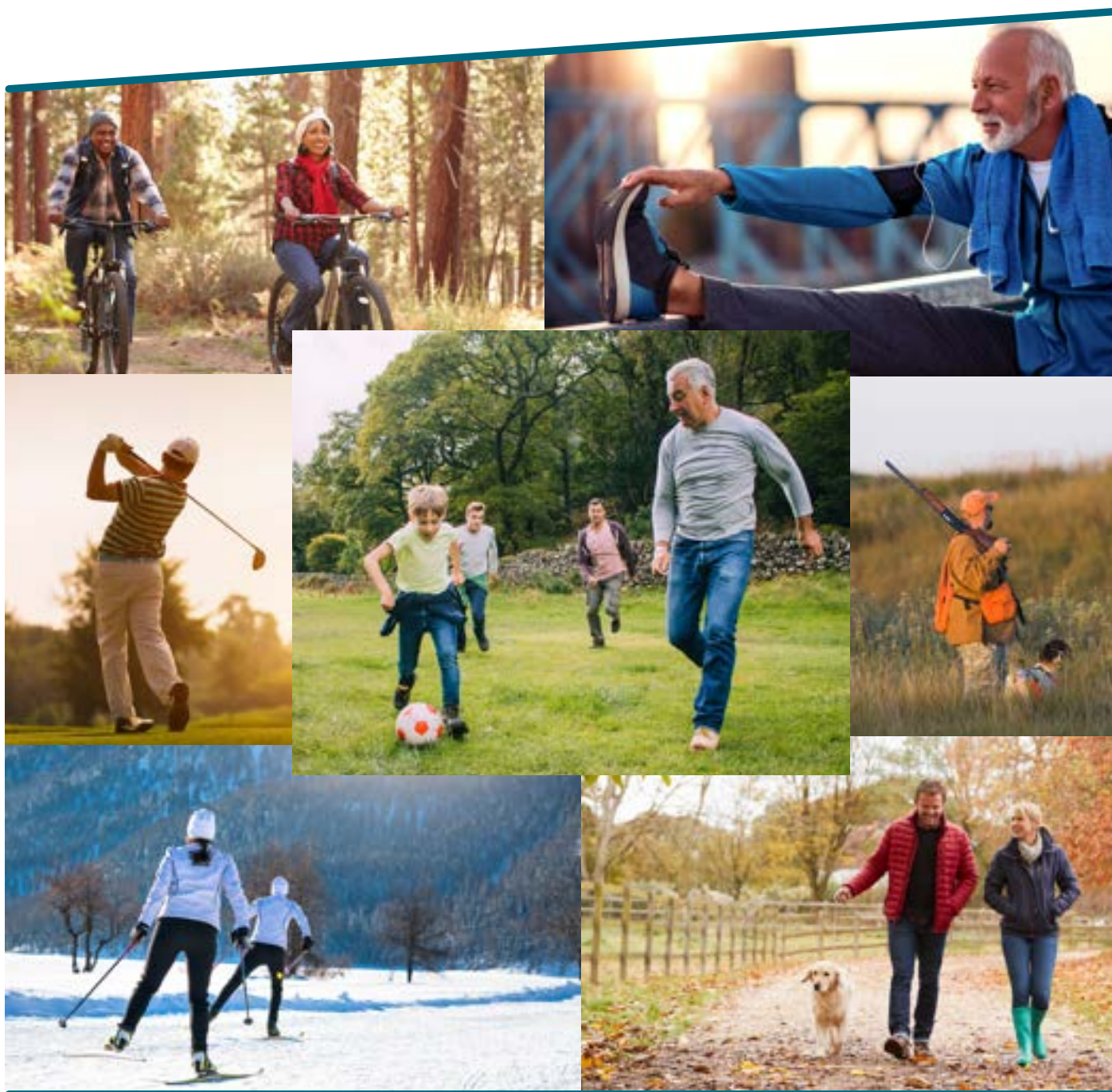


Table of Contents

Important Contact Information	2
Patient Journey Appointment Checklist	3
TotalCare Success Team	4
Total Knee Replacement	5
What is Total Knee Replacement?.....	5
How Do You Optimize Your Outcome?.....	5
Pain Management Solutions	6
Benefits of Robotic-Assisted Surgery.....	6
Meet with TotalCare Success Team	7
Your Patient Journey Walk-Through.....	7
Pre-Op Exercises to Speed Your Recovery.....	7
Advance Planning for Post-Surgery	8
Discharge Planning	8
Rehabilitation.....	8
Transportation & Driving	8
Home Planning & Preparation	9
FMLA & Short-Term Disability.....	10
Getting Ready for Your Surgery	11
Medications	11
Smoking.....	11
Vaccinations	11
Dental Work	12
The Night Before & Day of Your Surgery	13
Food & Liquids	13
Hygiene.....	13
What To Bring To The Hospital	14
Where To Go - Directions.....	15
Anesthesia: What You Need to Know	16
Duration of Surgery.....	16
Family & Friends	16
Going Home	17
Goals for Going Home.....	17
Going Home - Things to Know.....	17
Pain & Swelling Control.....	20
Infection Prevention & Incision Care.....	22
What to Expect at Your First Post-Op Appointment	23
Early Activity & Exercise	23
Return to Work.....	25
Yearly Follow-Up Appointments Are Important.....	25
Dos & Don'ts for the Rest of Your Life	25
Role of the Caregiver	26
Billing & Invoice	27
Frequently Asked Questions	28

IMPORTANT CONTACT INFORMATION



Michael J. Adler, MD

Patient Name _____

Surgeon: Michael J. Adler, MD

Physician Assistant: Scott Rawson, PA-C

Patient Navigator: Alyssa Grismer

Phone: 605.977.6840

Primary Nurse: Jill Swatek

Primary Care Provider _____

Phone: _____

Caregiver _____

Phone: _____

Physical Therapy _____



Scott Rawson, PA-C



Alyssa Grismer

Patient Portal

Use the patient portal to contact your care team directly with questions or concerns. If you haven't signed up for the patient portal, ask a member of your care team for instructions, or scan the code in the billing section.

Orthopedic Institute

810 E. 23rd St. Sioux Falls, SD 57105

Phone: 605-331-5890 (available 24/7)

Fax: 1-833-918-2049 (FMLA/Short-Term Disability)

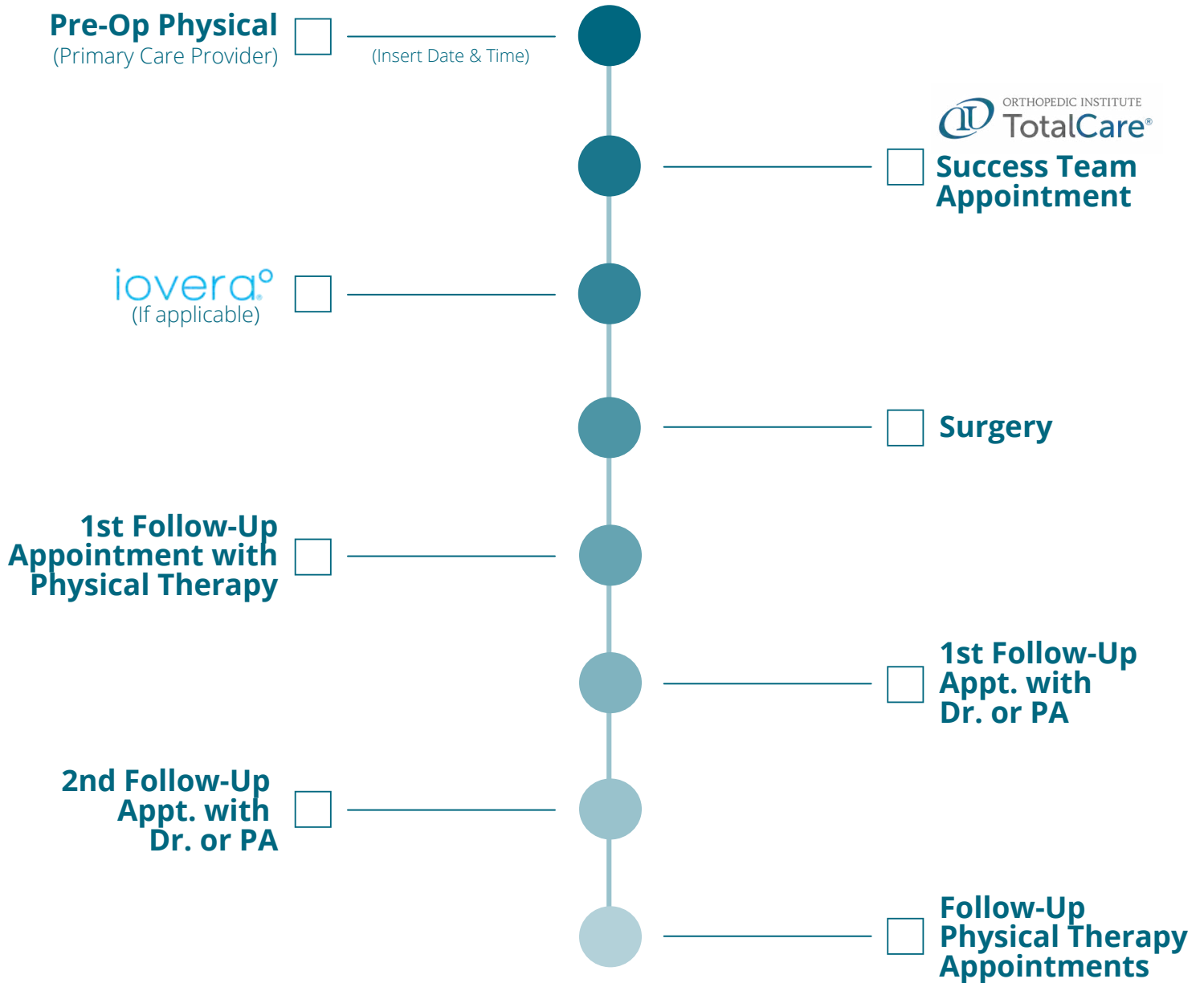
Scan for a digital version of this guide



Jill Swatek

PATIENT JOURNEY APPOINTMENT CHECKLIST

Check When Completed



TOTALCARE SUCCESS TEAM

(PHYSICAL THERAPISTS)



Rachael Bak, PT



Lisa Flannery, PTA



Jill Johannsen, PT



Ryan Johnson, PTA



Paul Kreber, PT



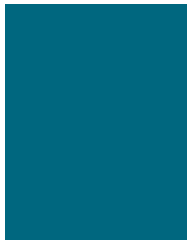
Aaron Olson, PT



Emily Miller, PT



Shelly Price, PT



Austin Ringling, PTA



Kristin Ripperda, PT



Nikki Shoup, PT



Josh VanRiper, PT



Shannon Van Zee, PT



Jeremy Zens, PT

Orthopedic Institute Physical Therapy Locations



Orthopedic Institute Physical Therapy Main Campus

810 E 23rd Street
Sioux Falls, SD 57117
(605) 977-6845



Scan with your smartphone camera for directions!



Orthopedic Institute Physical Therapy at GreatLife Woodlake Athletic Club

4600 S Tennis Lane
Sioux Falls, SD 57106
(605) 271-4412



Scan with your smartphone camera for directions!



Orthopedic Institute Physical Therapy at Performance Center

5901 S. Southeastern Avenue
Sioux Falls, SD 57108
(605) 271-1354



Scan with your smartphone camera for directions!

TOTAL KNEE REPLACEMENT

What is a Total Knee Replacement?

A knee replacement, also known as arthroplasty, is a surgical procedure that addresses arthritis or severe injury in the knee. The bones' ends are removed using special instruments, and the remaining bone is shaped to fit the artificial joint that is placed into the leg. Knee replacement surgeries restore the natural movement and function of your knee, and decrease knee pain and discomfort when walking, exercising, and enjoying other activities.

How Do You Optimize Your Outcome?

Studies have demonstrated that physical therapy performed before and after surgery and at home improves surgical outcomes.

Benefits:

- Mentally prepares patients for surgical procedures
- Speeds recovery
- Strengthens muscles, improves flexibility, and aids circulation
- Improves and optimizes surgical outcomes
- Lowers the risk of post-operative infections

Due to the positive impact and proven results of physical therapy before and after surgery, we created the TotalCare Success Team Appointment.

Your TotalCare Success Team member is an Orthopedic Institute Physical Therapist. Your visit with them will be one of your most critical visits with OI. It not only allows you the opportunity to ask any remaining unanswered questions about your procedure but the physical therapy exercises they teach you will form the foundation for your recovery after surgery.

Pain Management Solutions

Traditionally after surgery, opioids, non-steroidal anti-inflammatory drugs (NSAIDs), and local anesthetics are used to manage and relieve pain.

Because of concerns regarding opioid use, advancements have been made to help patients minimize or avoid the voluminous use of opioids. One advancement is called iovera^o which applies freezing cold to immediately reduce pain without using drugs.

The iovera^o treatment targets sensory nerves, providing an immediate reduction in pain and may last until the nerve has fully regenerated. A tech begins by administering a local anesthetic or cold spray before treatment. While the treatment should not be painful, it is normal to experience pressure, cold, warmth, or tingling during treatment. These sensations indicate that the treatment is working. One knee treatment, focusing on one nerve, can take as little as 15 minutes.

Please ask to see if your insurance plan covers iovera^o. To learn more, ask your surgeon about iovera^o.

Benefits of Robotic-Assisted Surgery

In February 2021, Sioux Falls Specialty Hospital (SFSH) announced that it now offers Zimmer Biomet's ROSA[®] Knee System. ROSA brings together robotic technology and industry-leading knee implants to help surgeons personalize surgical procedures for their patients.

Just like the human eye, the ROSA Knee uses a camera and optical trackers attached to the patient's leg to know precisely where their knee is at all times during surgery. The robot can spot changes and adjust accordingly in case the leg moves during the process.



Important

Benefits

- Personalized to the patient's anatomy
- Potential for better, long-term satisfaction and outcomes
- Surgeon skill with the accuracy of robotic technology

Getting a precise knee implant it is vital to the total comfort and overall experience following knee replacement. The minimized invasiveness and increased accuracy that ROSA[®] Knee helps deliver the promise of better outcomes to patients.



MEET WITH TOTALCARE SUCCESS TEAM

(PHYSICAL THERAPISTS)

Your Patient Journey Walk-Through

You will meet with your TotalCare Success Team physical therapist at your pre-operative appointment. This appointment is vital to a successful recovery and optimizing your outcome. They will discuss your entire patient journey and answer any questions. Topics covered at the appointment include:

- Pre-op range of motion baseline measurements
- Post-surgical goals and expectations
- Pre and post-surgical exercises
- Getting your home ready
- Surgery: what to expect
- Criteria for discharge from the hospital
- Swelling management
- Activities of daily living
- Home exercise and walking
- Physical therapy after surgery
- Goals to achieve by the first visit post-op with your doctor or physician's assistant

Pre-Op Exercises to Speed Your Recovery

Research demonstrates exercise programs performed prior to surgery speed up the recovery process after surgery. No special exercise equipment is required. Any exercise that causes further pain should be discontinued.

Benefits

- Strengthen muscles
- Improve flexibility
- Aid circulation

Instructions for the exercises will be given to you at your pre-operative appointment with your TotalCare Success Team member and can be found in your **Total Knee Replacement Therapy Guide**.


Important

ADVANCE PLANNING FOR POST SURGERY

Discharge Planning

Most patients are able to return to their home after leaving the hospital. You and your surgeon will discuss your discharge plan beforehand.

Rehabilitation

A rehabilitation plan will promote a quick, successful recovery to get you back to doing what you love.

Your rehabilitation plan includes a pre-operative appointment with your TotalCare Success Team member 1-2 weeks before surgery. If you are utilizing the iovera procedure, both appointments can be scheduled on the same day.

During your appointment, your physical therapist will cover your rehabilitation plan in depth and provide you with your **Total Knee Replacement Therapy Guide**, which outlines your at home exercises.



Important

Transportation & Driving

The hospital will not allow you to drive home after surgery. You will need to make arrangements for someone to drive you home.

You also need to arrange for a driver to take you to your physical therapy appointment until you are cleared to drive or are physically able.

Taxi, Lyft, or Uber will not assume responsibility after surgery and will not provide you transportation.

Home Planning & Preparation

Caregiver:

We recommend having a family member or friend available to help during your first few days home to ensure the transition home is smooth and pain is under control. You may need help with activities such as cooking, shopping, bathing, and laundry.

Modifying Your Home

We recommend minimizing the use of the stairs if possible until you have full mobility. If your bedroom resides upstairs, we recommend temporarily moving it to the main floor if possible. It is recommended to have a nightlight for assistance when getting up in the middle of the night.

Install safety bars in the shower, near stairs railings, next to the toilet, and other areas if this is a concern.

Remove all rugs, loose carpet, electrical cords, and clutter from hallways and common areas if you will be using a walker after surgery. Walkers typically require more space. If you are using a walker, consider attaching a bag or basket to your walker to help carry items with you.

Place commonly used items in cabinets and drawers that are easily accessible to avoid bending, standing on your tiptoes, and using step stools. Examples of these items include: your phone, TV remote, tissues, medications, reading materials, etc.

Chairs

We recommend using chairs with arms and avoiding chairs with wheels unless they can be locked.

Have extra pillows or pads available for chairs and couches to elevate surfaces and allow for easier accessibility when sitting down or standing up.

Pets

If you have pets, have a plan in place for taking care of them.

Grocery Shopping

Grocery shop beforehand for items you use frequently and consider having prepared meals available.

Constipation

Constipation is common after surgery because of the pain medication and lack of activity. If you are not using loperamide, we strongly recommend purchasing a stool softener in the event you experience constipation.

More information on Home Planning and Preparation and adaptive equipment is available in your **Total Knee Replacement Therapy Guide**.

FMLA & Short-Term Disability

Becoming ill is never part of our plan, but nevertheless, it happens. When it does happen, the Family and Medical Leave Act (FMLA) is available as a safeguard to protect both your job and your health insurance benefits while you're unable to work.

Contact your Human Resources Department at your workplace to request your FMLA/Disability paperwork. Your paperwork will need to be filled out and submitted to Orthopedic Institute prior to your surgery. Please allow 7-10 days for Orthopedic Institute to process your paperwork.

For a Total Knee Replacement, it is typical to plan to be out of work for 4-6 weeks.

Fax: 1-833-918-2049

GETTING READY FOR YOUR SURGERY

Medications

Inform your surgeon and care team of any medications you are taking, including vitamins, over the counter drugs, blood thinners, pain relievers, and herbs or natural products.

Anti-inflammatory medication - **Stop** taking anti-inflammatory medications one week before surgery. This includes prescribed NSAIDS (Mobic, Celebrex, Voltaren, etc.) or over-the-counter medications (ibuprofen, Advil, Aleve, naproxen, etc.). Failure to stop taking the medications listed above before surgery could result in the cancellation of your procedure. You are allowed to continue to take Tylenol or Acetaminophen.

Vitamins - **Stop** taking all vitamins and herbal medications a week before surgery.

Blood Thinner - If you are taking a blood thinner, your primary care provider will direct you on when to stop your medication before surgery.

 Important

Please discuss all questions or concerns with your surgeon and care team.

Smoking

Smoking affects bone healing and can increase risk for blood clots. It is best to stop smoking to avoid any complications after surgery.

Vaccinations

You are able to receive vaccinations before and after your surgery.

Dental Work

Dental work should ideally be performed and completed at least **one month before** surgery. Inform your dentist of your total joint replacement for their records.

After your joint replacement, you will need to take preventative antibiotics before any dental work.

You will need to do this for the rest of your life. This is to preserve and protect your artificial joint.

Please wait three months after having your total joint replacement before having any additional elective procedures done.

THE NIGHT BEFORE & DAY OF YOUR SURGERY

Food & Liquids

DO NOT eat any food after **midnight** the night before your surgery.

It is important to stay hydrated before surgery. You may only drink CLEAR liquids up to **two hours** before your arrival to the hospital.

Examples include: water, black coffee with NO cream or sugar, clear sports drinks like Gatorade, and sprite.

 Important

Contact your care team for any questions or concerns.

Hygiene

Follow all instructions regarding washing your body given to you by your care team.

Use two packages of Hibiclens (brand name product) before surgery to prevent infection and cleanse your body. Use one package **the night before surgery** and use one package **the morning of your surgery** to scrub the surgical extremity.

 Important

Do not apply lotions, powders, deodorants, make-up or any other products on your skin the night before or morning of your surgery.

Remove all nail polish before surgery.

Do not shave within 24 hours of surgery.

What to Bring to the Hospital

Please pack and prepare the following items to bring with you to the hospital on the day of your surgery if applicable or in the event of an overnight stay:

- Inhalers
- Eye drops
- Toiletries
- Shaving equipment (electric razors recommended due to blood thinners)
- Containers for eyeglasses, contacts, hearing aids, and dentures
- All labeled medications in the prescription bottle (except pain medication)
- CPAP Machine, mask, and plug in
- Loose-fitting pajamas and/or loose-fitting shorts and t-shirts for physical therapy
- Flat, comfortable, rubber-soled shoes
- Walker, cane, or crutches
- Pacemaker or defibrillator information
- Paper work (photo ID, insurance care, prescription cards, proof of legal guardianship)
- Phone charger and desired electronics (phone, tablet, laptop)

Things to Leave at Home

- Valuables and jewelry
- Vitamins and supplements
- Pain medications
- Larger suitcases

Upon Arrival

Please refer to the facility-specific COVID restrictions.

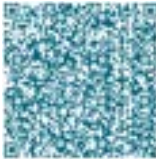
You will be taken to a private area where you will be given a patient gown to put on. Your personal items will be labeled and placed in your room after surgery.

You will remove all jewelry, contacts, eye glasses, dentures, and hearing aids.

The nurse will bring you to a holding area to prepare you for surgery. The nurse will take your blood pressure, pulse, and temperature, and start an intravenous infusion (IV).


Where to Go - Directions

Please arrive at your instructed time with all necessary paperwork.




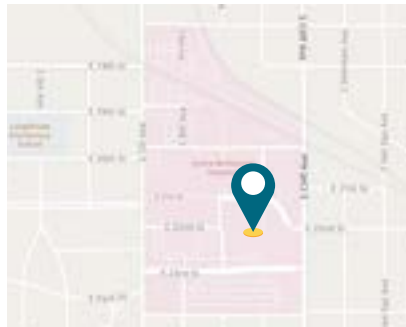
Scan the QR code with your smartphone camera to get directions!

Sioux Falls Specialty Hospital
910 E 20th Street
Sioux Falls, SD 57105
(605) 334-6730




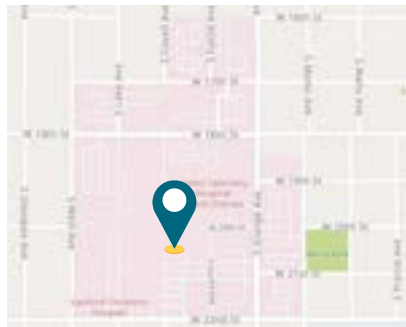
Scan the QR code with your smartphone camera to get directions!

Midwest Imaging
716 E 19th Street
Sioux Falls, SD 57105
(605) 334-6730



Scan the QR code with your smartphone camera to get directions!

Avera McKennan Hospital
1325 S. Cliff Avenue
Sioux Falls, SD 57105
(605) 334-6730



Scan the QR code with your smartphone camera to get directions!

Sanford Surgical Tower
1508 W 22nd Street
Sioux Falls, SD 57105
(605) 334-6730

Anesthesia: What You Need to Know

Your surgeon and anesthesiologist will determine which type of anesthesia is best for you. Your anesthesiologist will also talk with you prior to surgery.

General Anesthesia puts you into a deep sleep.

Regional Anesthesia provides numbness to certain areas of the body and is often combined with other medications to help you relax.

Duration of Surgery

The typical time frame for knee replacement surgery is generally one hour but could take up to three hours. This depends on the patient, preparation time, and type of anesthesia used.

Family & Friends

Typically, a family member is allowed to be with you in the pre-operative area initially but will be asked to wait in the surgical waiting room while you are in surgery.

Your family members will be informed of any updates during your surgery. They will be brought to your room when you wake up from surgery.

GOING HOME

Criteria for Discharge from the Hospital

The Physical Therapy Team at the hospital will work with you after surgery. Before you can be released from the hospital, all of the following must occur:

- You are medically stable to return home.
- The surgeon gives you permission to return home.
- Physical therapy confirms you can perform the following functions:
 - Safely ambulate household distances
 - Safely make transfers with chair, bed, and bathroom
 - Safely navigate steps

Going Home - Things to Know

Refer to your **Total Knee Therapy Guide** for information on navigating the stairs, sitting, walking, and getting in and out of the bed, shower, and car.

Expect returning home to be an adjustment. It is typical to feel overwhelmed and anxious, but just relax and focus on your recovery. Do not sit for longer than 30 to 45 minutes at a time. For a successful recovery, do not stay in bed all day. We encourage frequent, short walks to get your body moving.

Sleep

Discomfort in your knee can make sleeping at night uncomfortable. Relieve some discomfort by getting up and moving around. It is common for sleep patterns to change after surgery. You may sleep in whatever position is the most comfortable.

Diet

Resume your diet as tolerated. Be sure to eat a well-balanced diet of proteins, carbohydrates, and fats. Avoid large quantities of caffeine. A lack of an appetite after surgery is common and typically caused by anesthesia and some medications.

Medication

Follow all instructions given to you by your care team regarding your prescribed medication. Your anticoagulation medication may be needed for a month after surgery.

Before you take any over-the-counter medications or supplements, contact your care team.

Avoiding Blood Clots & DVT

Clots may form in the veins of the legs due to a lack of movement and inactivity. This could lead to deep vein thrombosis (DVT).

To prevent DVT, compression stockings or TED hose, are worn to increase blood flow and prevent clots from forming. You will wear the stockings during the day until your first post-operative visit unless instructed otherwise. You do not need to wear the TED hose at night.

Walking right after your surgery is one of the most important ways to prevent DVT.

You will likely be prescribed an anticoagulant to decrease your risk of a blood clot following surgery. Please take as instructed for the appropriate amount of time.

Warning signs of blood clots include:

- Increasing calf pain
- Tenderness
- Swelling or redness in your thigh, calf, or ankle
- Calf pain while performing ankle-pump exercises

Warning signs that the blood clot has traveled to your lungs:

- Sudden increased shortness of breath
- Difficulty or rapid breathing
- Sudden onset of chest pain
- Sweating
- Localized chest pain
- Confusion
- Unexplained fever

If you experience any of these warning signs, contact your care team.

Incentive Spirometry

The anesthetic medications used during your surgery and the pain medication used after surgery can inhibit you from breathing deeply, which can lead to pneumonia or a fever. The use of a small handheld spirometer is encouraged to keep the lungs properly inflated after surgery.

Your hospital nursing staff will inform you of the breathing exercises you will need to perform when you return home.

Constipation

Constipation is common after surgery because of the pain medication and the lack of physical activity. If you are not using loperamide, we strongly recommend taking a stool softener to help prevent constipation. We encourage consuming plenty of water and other fluids like prune juice. If you do not have a bowel movement within three days of surgery, you may need to take a laxative to relieve the constipation.

Driving

- Do not drive until you are cleared by your surgeon, physical therapist, or care team.
- Do not drive while taking narcotic pain medication.
- Once you are off narcotic pain medication, and have gained enough flexibility and strength in your leg to drive, you may be able to drive again.
- Even as a passenger in a car, you should use a firm cushion or folder blanket to elevate the seat in order to easily get in and out of the car.

Sexual Activity After Surgery

It is common for patients to worry about resuming sexual activity after a joint replacement. Talk with your care team for any questions or concerns.

Pain & Swelling Control

Your pain will decrease over time as you continue to heal. The strength and timing of your medication can help you to recover quickly.

It is important to note that **no pain is it typically not attainable**. Your care team and physical therapists will work to obtain a “tolerable” level of pain through the use of medication, ice, elevation, and rest. It is easiest to control pain when it is maintained and treated right away, before it gets worse. Do not let your pain get severe.

Pain Medication Refills

Contact your care team at least **48 hours** before you run out of pain medication if you think you will need a refill.

Please call during business hours M-F 7:00am – 5:00pm as pain medication requests are not granted after business hours, nights, or weekends. Please keep in mind, your insurance company or pharmacy may only cover or allow for a certain day supply of the prescribed pain medication.

Swelling Control

It is normal for your knee to swell after surgery when increasing activity and exercise. Swelling can increase pain and limit your mobility so it is important to take steps to reduce swelling.

TED Hose

- Compression stockings or TED hose are worn to increase blood flow and prevent clots from forming.
- Wear your TED hose during the day on both legs and remove when going to bed.
- Continue to wear as directed until your first post-op appointment with your surgeon.

Cold Therapy

- It is recommended to utilize ice packs or an ice machine (if provided) frequently for the first couple of weeks at home. Make sure to use a cloth barrier that is clean and dry between the ice pack and your skin to reduce the risk of skin irritation or frostbite.

Important

Elevation

- Keep your leg elevated as much as tolerated while sitting or lying down to reduce swelling. You may bend and straighten the knee as tolerated. When in bed, keep the knee as straight as possible.
- DO NOT place anything under the knee. Place a pillow under the lower leg and foot to encourage straightening the knee. Attempt to keep the foot above the level of the heart to assist with swelling control.

When should you call your care team? Call 605-331-5890

- **Available (24/7)** After regular business hours, an Orthopedic Institute nurse will answer your call.
- Fever
- Uncontrolled shaking or chills
- The incision has increased in redness, heat, drainage, or swelling
- A significant decrease in motion during activity and at rest
- Increased pain during activity or rest
- Increased swelling, pain, or tenderness of the thigh, calf, ankle, or foot
- Abnormal bleeding from anywhere on the body; around the incision, nose bleed, blood in urine, etc.

When to call emergency medical services? Call 911

- Difficulty breathing or shortness of breath
- Chest pain
- Chest pain when coughing or breathing deeply



Infection Prevention & Incision Care

A surgical site infection is an infection of operated body part. Minor infections only involve the skin around the incision. Major infections involve parts of the body that are deeper than the skin resulting in further procedures and require antibiotics, prolonging the recovery process.

Notify our office if you develop any skin lesions, rashes, or wounds on or near the surgical area immediately.

You will have a dressing over your incision for protection and promote healing. Keep the incision clean and dry. If the dressings becomes saturated, it will need to be changed. You may shower but keep your incision covered with a waterproof bandage.

WARNING! A temperature of 100.5 degrees or greater, increased redness or any drainage of the incision, or increased swelling needs to be reported. If you experience these symptoms, call 605-331-5890 (available 24/7) .

Numbness around your incision is normal after surgery.

You will be provided with dressing supplies upon dismissal from the hospital.

Do not apply lotions, creams, or powders to the incision until the incision is completely healed.

 Important

 Important

What to Expect at Your First Post-Op Appointment

- You will see your care team 10-14 days after surgery.
- X-Rays will be taken.
- Your surgical wound will be assessed and your dressing will be changed if needed.
- Avoid getting into tub baths, swimming pools, hot tubs, lakes, etc., until 4 weeks post-op and the wound is completely healed.
- Four weeks after surgery, you may apply over-the-counter scar cream, such as Mederma, to your incision.

Early Activity & Exercise

It is important to begin activity immediately after surgery for a quick recovery and to promote strength and mobility in your new joint.

You are encouraged to take short walks, perform home exercises, and attend physical therapy appointments to optimize your outcome.

You will see a lot of progress during the first 6 weeks after surgery. Many patients are eager to report their results at their follow-up appointments. It is important to note that all patients recover at different rates.

Many patients are able to accomplish the following within 6 weeks after surgery can:

- Bend the knee easily to 90 degrees
- Straighten the knee equal with other knee
- Control and manage swelling
- Walk with a normal gait pattern without limp and assistance on flat ground with the use of a walker or cane when needed
- Climb stairs
- Get out of bed without assistance
- Get in and out of chairs or cars without assistance
- Resume cooking, light chores, walking, and getting outside of the house at tolerated

As you begin walking, you may notice your knee "clicking". This is the mechanics of your knee replacement and generally lessens as swelling decreases.

Even after you have fully recovered, it is important to continue exercising to promote a strength and mobility.

What activities can I expect to return to after I am fully recovered from surgery?

Low impact exercises are allowed after given clearance by your care team. Always be sure to check with your care team before beginning any physical activity.

Expected activities: recreational walking, swimming, golfing, light-hiking, recreational biking, normal stair climbing, dancing, gardening, driving, bowling, water aerobics

Activities to be done with caution: running, contact sports, jumping sports, high-impact activities, vigorous walking/hiking, skiing, tennis, repetitive lifting of more than 75 lbs., repetitive stair climbing.

It is important to remember that each patient recovers at a different pace. If you have concerns about your pace of recovery, please contact your care team.

Return to Work

The ability to return to work depends on the patient and will be determined by your care team.

If you have a sedentary job, patients typically return to work 4 to 6 weeks following your surgery or sooner.

If you have a job which requires you to be on your feet for long periods of time, you can generally return to work in 6 to 8 weeks following surgery:

When returning to work, remember the following:

- Avoid heavy lifting
- Avoid long periods of standing or sitting
- Avoid frequent use of the stairs or ladders.
- Avoid kneeling, bending down, or any position that puts strain on the joint.

Yearly Follow-Up Appointments Are Important

Yearly follow-up appointments are important to ensure the health and mobility of your joint replacement. This is an opportunity to discuss any questions, concerns, or address any pain or complications that come up.

The following are good follow-up guidelines post-surgery:

- Anytime you have mild pain for over a week
- Anytime you have a moderate or severe pain

Dos & Don'ts for the Rest of Your Life

Maintain a regular exercise program to promote strength, mobility, and function of your new knee regardless of how quickly you recovery after surgery.

Your care team will determine what activities are suitable for you. Please note that high impact activities may put too much stress on your new joint.

To reduce the risk of future infection from dental work, you may be prescribed a preventative antibiotic. Even though the risk for infection is low, take the antibiotic an hour before any dental work to prevent infection.

Kneeling on your knee replacement is acceptable; however, it may take several months for it to feel comfortable.

Be sure to move and change positions when traveling to avoid stiff joints.



ROLE OF THE CAREGIVER

The patient will require additional attention and care as they are recovering from surgery. As their caregiver, you may need to assist the patient with the following activities and responsibilities:

- Driving to and from physical therapy and follow-up appointments until the patient is cleared and physically able to drive.
- Moving around the house, getting to the bathroom, sitting and standing, getting dressed, bathing, putting on shoes, cooking, cleaning, grocery shopping, laundry, and other household tasks.
- Following the medication schedule, and refilling and picking up prescriptions.
- Monitoring the incision, swelling, pain and significant changes in the patient's mental or physical health.
- Encouraging and motivating the patient through their recovery, home exercise, and physical therapy.

BILLING AND INVOICE

Our billing team can address questions regarding Orthopedic Institute payment policies, which insurance plans we participate with, and questions regarding your account or billing statement.

If you have any billing or insurance questions, please contact our billing customer service line at (605) 331-5890 (press option 3), Monday through Friday, 8:00 a.m. to 5:00 p.m.

If you have questions about how your insurance plan will cover your care, please contact your insurance carrier.

If you have not done so already, simplify how you manage and pay your healthcare bills by creating an account on our patient portal. Scan this code with the camera on your smartphone to set up your account.



Frequently Asked Billing Questions

When will I receive my first statement?

Orthopedic Institute will submit a claim on your behalf to your insurance carrier. After your insurance provider processes your claim, Orthopedic Institute will send you a statement outlining any out-of-pocket costs you may have. Your statement will include any deductibles or co-insurance amounts you may owe. You will receive a statement approximately 30-45 days after you receive services.

Do I need prior authorization?

The need for prior authorization differs by insurance plan and the type of procedure or service. Orthopedic Institute will initiate the prior authorization request from your insurance company for you; however, it is your responsibility to make sure that you have prior authorization before receiving certain health care procedures or services.

When will I become responsible for my bill?

You are responsible for your bill at the time you receive services from Orthopedic Institute. We will work with you and your insurance company to get all eligible benefits processed prompt manner. We will send you a statement approximately 30 – 45 days after you receive services for any patient responsibility amounts you may owe.

FREQUENTLY ASKED QUESTIONS

Why do people have total knee replacements?

Typically, knee replacements are performed to relieve pain and restore function of the knee. Knee pain is commonly caused by osteoarthritis. Individuals with knee pain have trouble walking, climbing stairs, getting in and out of chairs, and doing any physical activity.

Should I exercise before my total knee replacement?

Yes. Research demonstrates exercise programs performed prior to surgery speed up the recovery process after surgery. Pre-op exercise can help to strengthen muscles, improve flexibility, and aid circulation. You will learn more about pre-op exercises at your Total Care Success Team Appointment.

Am I too old for total knee replacement surgery?

Your overall health is more of a determining factor. At your pre-op physical with your primary care doctor, you will be assessed for any health risks. Your surgeon will determine which option is best to treat your knee.

Will I become addicted to my pain medications?

It is uncommon for patients to become addicted to pain medication after surgery. It is typical to be off of all medication 2-3 months after surgery. Talk to your surgeon or care team about any questions or concerns.

How long will I have to do physical therapy?

After surgery, physical therapy typically continues 2-3 times a week for an average of 8 weeks.

What should I wear to the hospital?

Wear loose-fitting, comfortable clothes that are easy to put on and take off. You will wear a surgical gown before surgery and wear it until you are discharged.

Bring loose-fitting, comfortable clothing to put on when you leave the hospital.

Should I try to lose weight before surgery?

If you are overweight, yes. The risk of complications during or after surgery can be decreased by losing weight for overweight individuals. Typically, physical therapy will be easier for you after surgery if you are at a healthy weight. Contact your primary care doctor for any questions or concerns.

When can I return to work?

The ability to return to work depends on the patient and will be determined by you, your surgeon, care team, and physical therapist.

Depending on the activity level required to perform your job, you can return to work 4 to 6 weeks after surgery. For those with sedentary jobs, you may return to work sooner than those with active jobs.

What if I live alone and I don't have anyone to help at home?

We recommend having a family member stay with you for your first few days home assist with the transition home and your ensure pain is under control. The caregiver may need to help with household tasks like cooking and bathing.

You can begin to do household tasks again as you recover and as your pain decreases. You may no longer need the assistance of the caregiver as you gain your independence back

What is the best way to take care of my total knee replacement after surgery?

Follow all instructions provided by your surgeon, care team, or physical therapist. Begin your home exercises and physical therapy program when told to do so.

In addition, beginning activity immediately after surgery is the first step to a quick recovery as it builds strength and mobility.

Do I have to do the at-home physical therapy exercises?

Yes. You will be given a list of home exercises to be completed 2-3 times a day. A list of these exercises will be demonstrated and given to you by your physical therapist.

How long will I need to wear compression socks after surgery?

It is recommended to wear compression socks during the day after your total knee replacement surgery. You may take them off when going to bed.

Most patients wear compression socks for about a month after surgery. Talk to your surgeon or care team about any questions or concerns.

060922v1