

## Frequently Asked Questions

Please read this carefully to avoid unnecessary stress after your replacement!

**Q: What if my leg swells after surgery?**

A: It is very common to experience swelling after surgery. Sometimes, you will not swell until several days after your surgery. Remember that your body is healing from the surgery and some swelling is normal. The more activities and physical therapy you perform, the more the swelling you may experience.

With that said, we do want you to remain active and participate in therapy. But, when sitting and resting, you can decrease the swelling by elevating your surgical leg and using ice. It is important to elevate your leg, with your knee above the level of your heart, 4-5 times a day for 15-30 minutes each time to help reduce your swelling. Your toes should be above your nose!

**Q: Will I have bruising after surgery?**

A: Yes, you will have some degree of bruising after surgery, but everyone is different. Some will experience redness around only the incision; others will have bruising down the entire leg. Both are considered normal and will resolve over the first few weeks.

**Q: How much weight can I put through my leg after surgery?**

A: Put as much weight as you can tolerate through your surgical leg immediately after surgery. The term is “weight bearing as tolerated.” Your physical therapist will instruct you on how to use your crutches or cane in order to perform this properly.

**Q: What if I am having problems sleeping?**

A: Make sure that your pain is well controlled throughout the day. During the day be careful about taking naps. Try to plan your activities as near normal as possible. If you cannot sleep due to pain, please medicate appropriately. You may sleep in any position you are comfortable in, unless told otherwise. If you continue to have issues, please call us to discuss.

**Q: What should I expect my activity level to be?**

A: Every patient is different. The first week you should rest as much as possible. In the second week you should begin increasing your activity level, let

your pain level and swelling be your guide. You will be 90 percent recovered in the first 6-8 weeks following surgery. And the remaining 10 percent will come with the next year.

At some point, most patients overdo it with activities and take a few steps back in their recovery. You may have increased swelling or discomfort if this happens. You need to become concerned if you cannot control your pain with rest and pain medications, or if you have difficulty bearing weight through your surgical leg.

**Q: When can I shower or bathe?**

A: You can shower immediately after surgery if you are wearing a waterproof dressing. To ensure that your incision heals properly and avoid infection, we do not want you to bathe or get into a swimming pool until you have seen us in the office. If you have scabs on your incision, you may not get into a pool or hot tub. This takes about 6-8 weeks.

**Q: What should I do to avoid constipation?**

A: You should start your stool softener (Senokot) two days before surgery and continue it twice daily until you have a normal bowel movement or while taking narcotic pain medications. If you are traveling from out of town start the stool softener once you get to Palm Beach. Stop the stool softener if you experience loose or watery stools. If you continue to have symptoms of constipation you can take Milk of Magnesia (a mild oral laxative), MiraLAX, or Magnesium Citrate (a stronger oral laxative). All of these medications can be bought over the counter at the pharmacy.

**Q: When can I stop taking the aspirin (blood thinner)?**

A: The usual length of time is 4 weeks postoperatively.

**Q: When should I take antibiotics?**

A: You should take antibiotics before **ANY dental procedures, including teeth cleaning**. Do not schedule any of the below appointments between 3 weeks before surgery and 3 months after surgery.

- ANY dental procedure, including teeth cleaning
- Sigmoidoscopy/colonoscopy
- Bronchoscopy
- Genitourinary instrumentation
- Vaginal exam and GYN surgery
- Barium enema