Knee Replacement Surgery
Your Hospital Stay
BENEFITS OF THE FREEDOM KNEE®

The Freedom Knee is designed to help you return to an active lifestyle. The extensive component size selection means that the implants used will have the best fit, close to the shape of your knee, which is important for long-term durability. The Freedom Knee design allows for the natural bending motion needed to perform your daily activities in safety and comfort.

The contents of this guide with regards to preparing for your surgery, the items that might be used during surgery, the surgery itself and recovery have been written by Maxx Orthopedics, Inc. the manufacturer of the Freedom Total Knee® System. The information contained in this brochure is not medical advice and should not be interpreted or construed as or relied upon as medical advice. You should not use the information contained herein for diagnosing or treating any medical condition. Rather, you should consult your physician or other medical professional for medical advice. We strongly recommend that you review this information with your orthopedic surgeon.
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ITEMS THAT MIGHT BE USED DURING YOUR HOSPITAL STAY

**INTRAVENOUS (IV) SALINE LOCK**
A small soft plastic tube inserted in your vein to give IV fluid or medicine.

**PATIENT CONTROLLED ANALGESIA (PCA)**
Pain medicine that is in a pump attached to your IV. You control the amount of medicine you receive by pushing a button attached to the pump.

**INCENTIVE SPIROMETER**
A device that helps you take deep breaths in order to exercise your lungs. This helps prevent pneumonia by keeping fluid from building up in your lungs.

**SURGICAL DRESSING**
A sterile gauze pad placed over the incision to keep it dry and clean.

**URINARY CATHETER (FOLEY)**
A soft tube placed in your bladder to measure the amount of urine you produce. It also prevents retention of urine in your bladder.

**HEMOVAC**
A drain that is placed at the site of your surgery to drain blood and fluid from the area.

**INTRAMUSCULAR (IM) INJECTION**
An injection given into the muscle. Some pain medicine may be given by IM injection instead of using PCA.

**VENODYNE BOOTS**
A tubular device placed around your legs that inflates and deflates to keep blood circulating in your legs to help prevent the formation of blood clots. (Not every surgeon uses boots).
TED STOCKINGS
Elastic stockings that help increase blood return to the heart, prevent swelling in your legs and prevent blood clots from forming.

CONTINUOUS PASSIVE MOTION (CPM) MACHINE
A CPM flexes (bends) and extends (straightens) your knee to increase movement by stretching the surrounding muscles.

KNEE IMMOBILIZER
A splint that is placed on your legs when you first begin to get out of bed to help you maintain stability during the early stages of rehabilitation.

TRAPEZE
Located over the bed frame, a trapeze assists with in-bed movements and getting in and out of bed.
OTHER ASSISTIVE DEVICES
You may wish to purchase the following items to help you maintain independence in your daily living activities: reacher, long-handled shoehorn, sock and stocking aid, dressing stick, long-handled sponge and elastic shoelaces.

DAY 0 – THE DAY OF SURGERY
- After you’re admitted, you will be prepared for transit into the operating room.
- Your healthcare team will take your temperature, blood pressure and oxygen level and ask you some questions.
- You will change into a hospital gown and be asked to empty your bladder.
- You will meet the anesthesiologist and your surgeon.
- Your surgeon will mark the knee to be operated.
- You’ll have the opportunity to ask last-minute questions.
- IV will be started.
- You might be given medicine to help make you sleepy.
- A cap will be placed on your head.
- A urinary catheter will be inserted after you have received an anesthetic.
- Your leg will be prepared for surgery.
- After surgery, you’ll be monitored closely in a recovery room. You may be asked the same questions several times. This is to ensure your safety.
- You may be given pain medication.
- You will have a knee dressing and a knee immobilizer over the dressing to keep your knee straight. It is very important to keep your knee straight.
- Venodyne boots may be used to prevent blood clots.
- You may have a hemovac drain at your incision.
- A catheter will be used to collect urine. It will most likely be removed in 1 or 2 days.
- You will be transferred to a hospital room.
- Ice packs will be applied to help alleviate the pain.
- You may be given sleeping pills at night.
- You will start breathing exercises with the incentive spirometer device.

**DAY 1 – THE DAY AFTER SURGERY**
- You may continue to receive pain medication with PCA, oral pain medicine or IM injections as needed.
- You will continue with deep breathing exercises using the incentive spirometer in addition to coughing and deep breathing.
- You may be given IV antibiotics to help prevent infection.
- You can start a clear liquid diet and advance to a regular diet when you are ready or passing gas.
- Your IV fluids may be stopped when you begin taking fluids by mouth.
- An ultrasound test may be done to check for blood clots in your lower extremities.
- You will be instructed to keep your knee straight while in bed. A small rolled blanket may be placed under your ankle to elevate your heels and promote straightening. Nothing should be placed under your knee.
- The staff will teach you how to move in bed safely.
- You may be given an injection in your stomach 1-2 times a day to prevent blood clots. Some surgeons may prescribe the use of an external mechanical pump to help prevent any chance of a blood clot.
- Your leg may be placed in a CPM machine for approximately 1-2 hours, 2-3 times per day.
- You may be able to resume taking your regular medicines. You may be given an iron tablet and stool softener.
- Your vital signs (pulse, blood pressure and temperature) will be monitored. The nurse will check your blood flow to your toes.
- The dressing on your knee will be checked for drainage.
- You may have blood drawn for certain lab tests per your surgeon’s orders.
- The staff will be checking your skin frequently to make sure you are not getting any pressure sores.
- You will be asked to pump your ankles back and forth frequently. This is to prevent blood clots.
- You may continue to wear elastic stockings and/or Venodyne boots to help your circulation.
- A physical therapist and occupational therapist may begin working with you. You can expect to get out of bed and walk several steps with a walker, as well as sit in a chair for a few hours. You will also be shown how to use adaptive equipment to perform a variety of activities, such as dressing and bathing.
DAY 2 – TWO DAYS AFTER SURGERY
- Your urinary catheter may be removed if it wasn’t already. You can get out of bed to use the toilet with assistance from your nurse.
- The initial dressing from the surgery may be changed.
- IV fluids may be stopped.
- Oral pain medication may be started when your PCA or IM injections are stopped.
  Note: some patients may be on oral pain medication from the day of surgery.
- You will practice walking (gait training) with a therapist, using a walker first and then advancing to crutches. The therapist will continue to guide you through exercises and functional training. You can ask for pain medicine before therapy.
- You may continue to use the CPM machine.

DAY 3 – THREE DAYS AFTER SURGERY
- Based on your individual needs, you may be transferred home or to a rehabilitation facility.
- You will continue to work with a physical therapist to help you prepare to safely return to your daily activities.
- Exercises will be reviewed and reinforced.
- If you are discharged home, you may be given prescriptions for pain medications.
- You may be given a prescription for blood thinner or your surgeon may have you continue to use a mechanical pump device to help prevent blood clots.

Enjoy an active life with your new Freedom Knee.
Pursue Life™

For more information about what to expect from your knee replacement surgery, please ask your doctor about receiving these additional materials:

Introduction & Preparation

Getting Back in Motion