PHYSIOTHERAPY FOLLOWING

TOTAL KNEE JOINT REPLACEMENT

To achieve the optimal outcome following your surgery you will be visited by a physiotherapist from the Lisa Hansen Physiotherapy clinic. These guide lines apply to your hospital admission only and immediate period following your discharge. Your physiotherapist will personalise this program to suit your specific needs during your hospital stay.

<u>Goals</u>

GOAL 1 AVOID CIRCULATION PROBLEMS

Wiggle your toes, paddle your ankles and tighten your thigh muscles little and often to maintain circulation in your lower limbs whilst on bed rest.

GOAL 2 AVOID CHEST INFECTIONS

- a) Take 3 deep breaths, in through your nose, out through your mouth.
- b) Huff once or twice as if steaming a window.
- c) Cough as able.

GOAL 3 MINIMISE SWELLING

- Ice 15min every one to two hours as able.
- Rest your leg
- Tubigrip once bandages removed.
- Elevation of your leg.



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GOAL 4

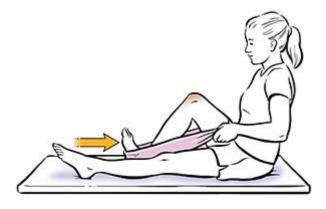
MINIMISE PAIN

- Rest.
- · Minimize swelling.
- Exercise little and often.
- Should you have undue pain, speak to your specialist or medical staff whilst in hospital.

Goal 5

Establish Appropriate Range of Motion and Strength

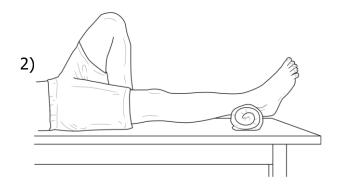
1)



Heel slides:

Place a plastic bag under your heel
Roll up a towel and bend your knee
with the use of the towel. Hold 5
seconds at the end of the bend

10 times every 1-2 hours



Full knee extension:

To ensure you achieve a straight knee, roll up a towel and place it under your heel:

10 minutes every hour

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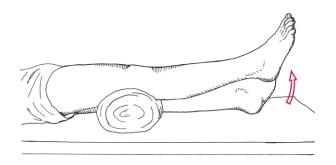
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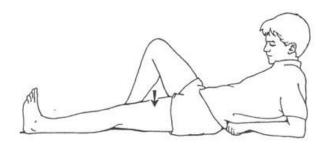
TOTAL KNEE JOINT REPLACEMENT



Retain quad strength:

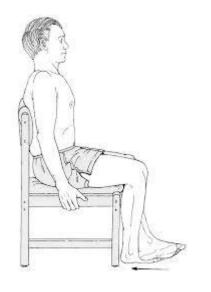
Roll up a towel under your knee and try lift your heel up off the bed

10 times every 1-2 hours



Quad strength:

Push your knee down into the bed and hold for 5-10 seconds 10 times every 1-2 hours



Sitting Knee flexion exercise:

While sitting hook your good leg on your bad leg and assist your knee to bend

Hold 5-10 sec 5-10 times 3 times per day

Goal 6:

Maintain normal walking

In the hospital your physiotherapist will size and fit you for your crutches. To maximise your rehabilitation it is important to maintain a **normal walking pattern**.

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	2-POINT GAIT	3-POINT GAIT
	Partial weight bearing both feet Provides less support Faster than a 4-point gait	Non-weight bearing (left foot) Requires good balance Requires arm strength Faster gait Can use with walker
↑ 4		
Ţ	Advance right foot and left crutch	Advance right foot
3	3. Advance left foot and right crutch	3. Advance left foot and both crutches
1 2	2. Advance right foot and left crutch	2. Advance right foot
1	1. Advance left foot and right crutch	1. Advance left foot and both crutches
Ţ	•	•
↑	Beginning stance	Beginning stance

Walking pattern with two elbow crutches:

- 1) Start with 3 point gait (see below diagram):
- Both crutches
- Bad leg between crutches
- Step through with good leg
- 2) Progress to 2 point gait:
- Opposite crutch and opposite leg at the same time

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GOAL 7: Stairs with crutches:

Up stairs:

Good
Affected (operation leg)
Sticks (Crutches)

Down steps:

Sticks (Crutches)

Affected (operation leg)

Good

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Your Surgeon believes that physiotherapy is a necessary part of your post-operative management and has asked that we provide this service for you.

You will see us to prevent occurrences of any post-operative complications and to educate you in other relevant exercises and advice.

There may be a separate charge for your physiotherapist and an account will be sent to you in the mail

For those of you on ACC you are fully funded, your bill for treatment will be covered by ACC but there may be a charge for any materials or equipment.

If you have chosen partially funded ACC you will receive an account in the mail.

For those of you with medical insurance you may be able to have some or all of your account reimbursed by your medical company.

For those of you who are coming through the district health board all of your care within the hospital will be covered and rehabilitation beyond the hospital for a reasonable time will also be funded. If you are choosing to see a local provider, they must contact Lisa to find out how this funding works.

If you chose to have follow up physiotherapy with us there will be a \$25 co-payment for ACC claims per session.

What you can except as part of agreeing to have physiotherapy

- Your Physiotherapist will introduce his or herself to you and give you this leaflet and
 most likely a handout about your surgery and what exercises you will need to do
 and any advice about your rehabilitation.
- He or She will assess your individual rehabilitation needs and treat appropriately.
- He or She will liaise with the doctors and nurses involved in your care to ensure your rehabilitation needs are part of a team approach.
- If you would like a chaperone or family member present during the physio time please let us know so we can arrange.

Please feel free to ask any questions of your therapist at any time Lisa Hansen and team wish you a speedy and enjoyable recovery

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