

**Sports Medicine North
Orthopaedic Surgery, Inc.**

*One Orthopedics Drive
Peabody, MA 01960
Tel: (978) 818-6350
Fax: (978) 818-6355*

**Ira K. Evans III, M.D.
David J. Fehnel, M.D.
Clay D. Miller, M.D.
Richard M. Ozuna, M.D.
Jeffrey A. Polansky, M.D.
Sherwin H. Ritter, M.D.
John B. Sledge III, M.D.
Robert M. Wood, M.D.
Jonathan A. Uroskie, M.D.**

PARTIAL AND TOTAL KNEE ARTHROPLASTY HOME EXERCISE PROGRAM

The home exercise program will assist your recovery and improve strength. It is important that you take time to exercise every day. The exercise program will take approximately 30 minutes to complete and should be done two times per day. If you are having any problems with the exercises, please call Sports Medicine North at 978-818-6350.

Recovering from a partial or total knee replacement and returning to a more active lifestyle will take time. It is important to be patient, to be an active participant in your exercise program, and to strictly follow the guidelines outlined in the enclosed packet.

Important Information

Now that you are home, you must keep working on bending and straightening your leg, as well as help increase the range of motion of your knee. This will enable you to walk, climb stairs and curbs, and sit on chairs or on the toilet.

1. It will take approximately six months for the swelling in your knee to go down. Therefore, it is important to ice your knee 3-4 times per day for at least the first six weeks after surgery. This should be done for 10-20 minutes at a time. The best time to ice is after you exercise or do a lot of walking. To ice, you can use storage sized Ziplock bags filled with ice, or two large (10" X 14") gel packs, which can be purchased at a surgical supply store. The best way for icing your knee is with the knee extended, i.e., straight with a towel rolled under your ankle.
2. Try not to sit for more than 45 minutes at any given time because your knee may become stiff and/or swelling of the entire leg may occur. If you wish to sit for longer periods of time, i.e., watching a movie or TV., you should stand and walk a short distance and attempt to bend and straighten your knee several times.
3. Do not sleep or sit with anything under your knee, i.e., a pillow.
4. If at anytime you notice persistent fever, swelling, pain, or drainage from your wound, immediately call your surgeon.
5. It is important that all physicians and dentists caring for you to know that you have a joint prosthesis. You will require antibiotics before and after any invasive procedures or dental work to protect against infection. You will be given a "medical alert" card.
6. Your new knee may activate metal detectors in airports and department stores. This is noted on your

"medical alert" card.

HOME EXERCISE PROGRAM FOLLOWING PARTIAL AND TOTAL KNEE REPLACEMENT (TKR)

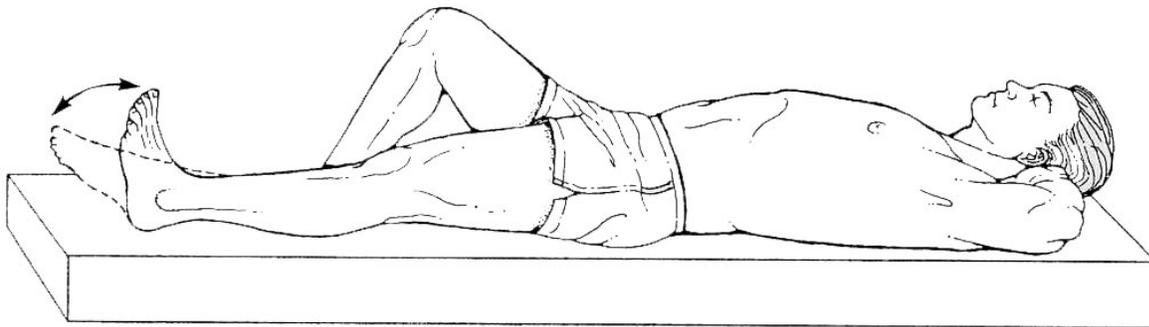
*** Acknowledging a contribution from Beth Israel Medical Center
Department of Physical Medicine and Rehabilitation, Boston, MA.*

DO NOT HOLD YOUR BREATH WHILE EXERCISING

****THESE EXERCISES ARE MOST IMPORTANT FOR YOUR KNEE****

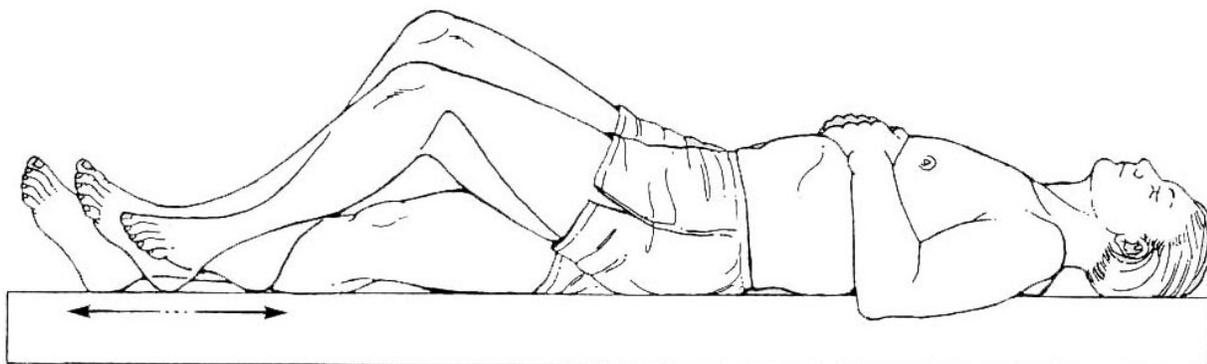
1- ANKLE PUMPS:

While lying flat on your back with your knee straight, bend ankle up and down as far as possible in both directions. Repeat with other leg.



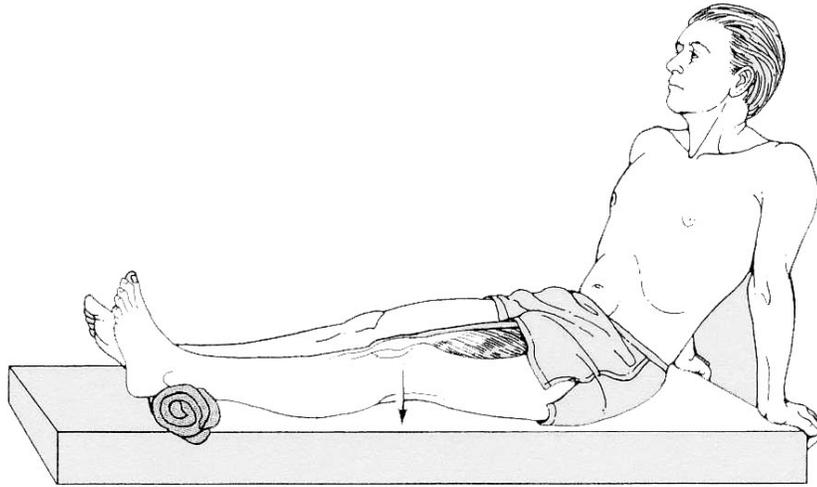
**2- HEEL SLIDES:

While lying flat on your back with your knees straight, slowly slide your heel in toward your buttocks. You should then straighten to the starting position. Please keep your foot on the surface at all times. Repeat with other leg.



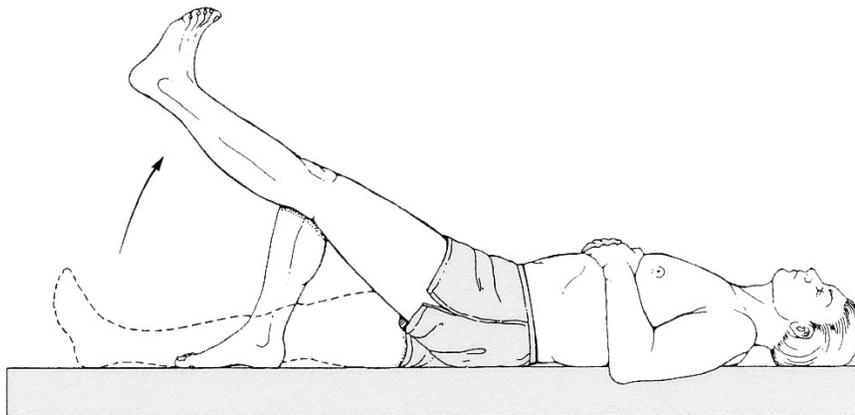
****3- KNEE PRESS:**

With your legs straight and a towel rolled up under your ankle, press knee down for contracting your thigh muscle. Hold for 5 seconds and then relax. Repeat with other leg.



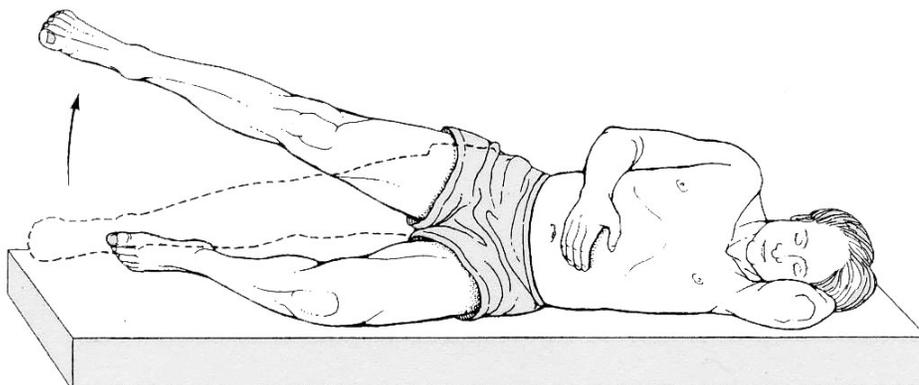
****4- STRAIGHT LEG RAISE:**

While lying flat on your back with your uninvolved leg bent and your foot flat on the surface, **tighten** your thigh and lift your involved leg. Keep your knee straight. Only lift to the height of the uninvolved knee. Repeat with other leg.



5- SIDE LYING ABDUCTION:

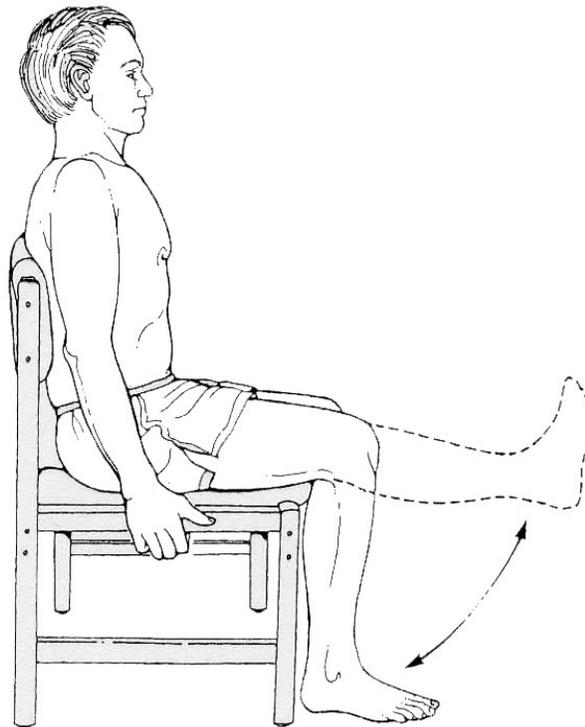
While lying flat on your uninvolved side bend your uninvolved leg forward. Raise involved leg about five inches and then lower to starting position. **Do Not** allow your toes or knee to turn upward. Repeat with other leg.



6- SITTING KNEE EXTENSION:

While sitting in a chair, straighten your involved knee as far as you can.

Hold for 5 seconds. Repeat with other leg.



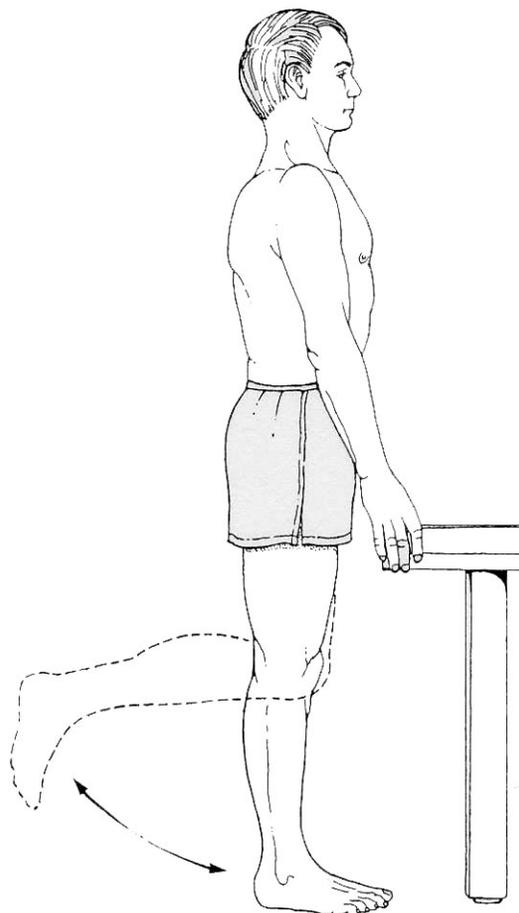
FOR ALL STANDING EXERCISES, BE SURE TO MAINTAIN UPRIGHT POSTURE.

7- STANDING KNEE BENDING:

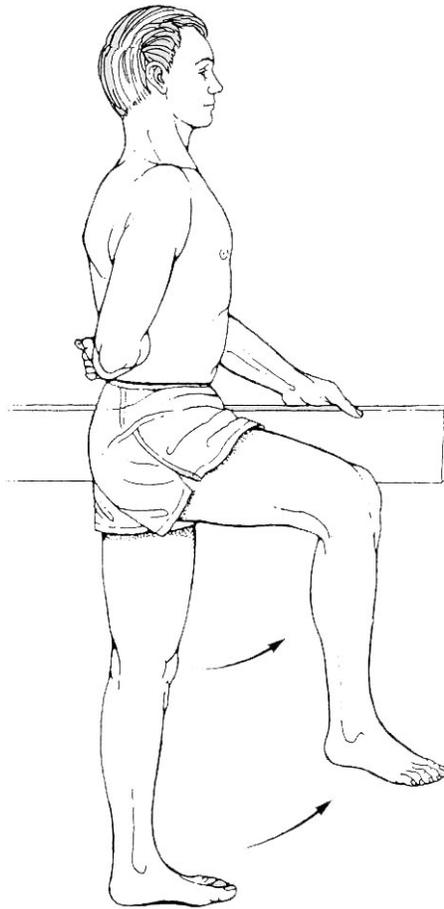
While holding on to a supportive surface, i.e. a counter top, bend your involved knee so that your foot rises toward your buttock.

Do not twist your leg inward or outward.

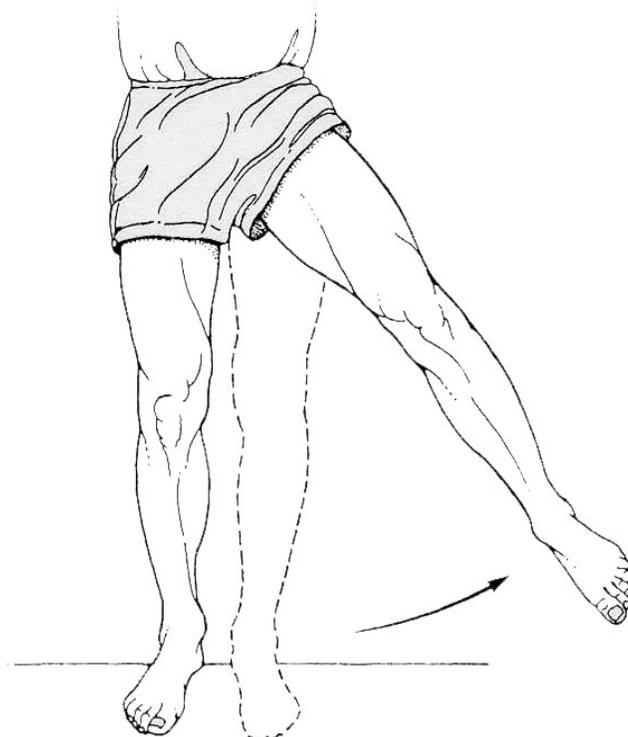
Then perform with your uninvolved leg.



8- **STANDING HIP BENDING:**
While holding on to a supportive surface, lift your knee up toward your shoulder by bending at the hip and knee. Then perform with your involved leg.

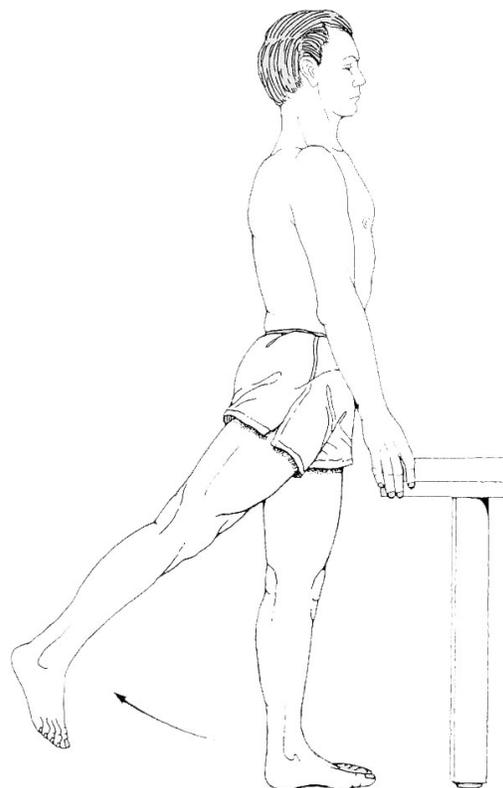


9- **STANDING HIP ABDUCTION:**
While holding on to a supportive surface, bring your involved leg out to the side keeping your toes pointing forward. Then perform with your uninvolved leg.



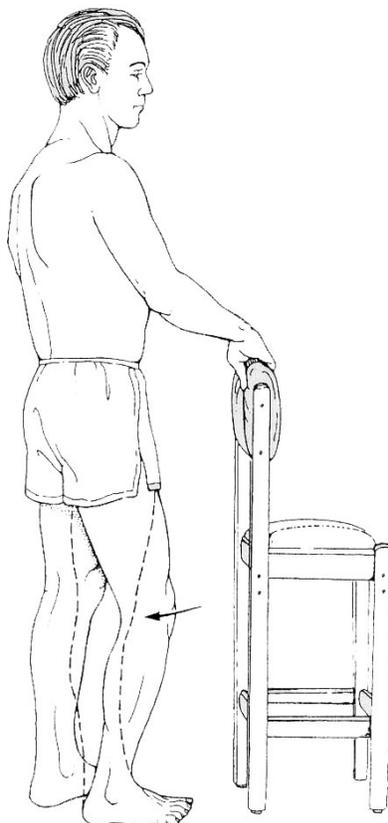
10- STANDING HIP EXTENSION:

While holding on to a supportive surface, bring your involved leg back keeping your knee straight. Then perform your uninvolved leg.



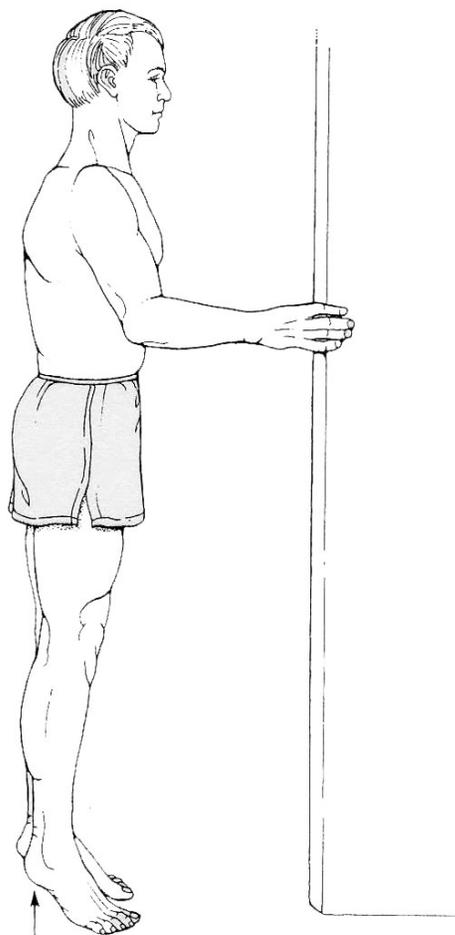
11- STANDING TERMINAL KNEE EXTENSION:

While holding on to a supportive surface, bend your involved knee slightly. Gently pull back your knee by tightening your thigh muscles, straightening your knee. Hold for 5 seconds. Do not over extend your knee.



12- HEEL RAISES:

While holding on to a supportive surface, lift both heels off the ground toward the ceiling. Hold for 5 seconds and then slowly return to the starting position.



13- SITTING ASSISTED KNEE BEND:

While sitting in a chair with your uninvolved leg cross in front of your involved ankle, push your involved foot backwards, assisting with the bending of the knee. Hold for 5 seconds.

