

IMPORTANT FAQ's

1. ***What time will my surgery be?***
 - The time of your surgery will be determined the business day prior to your surgery (if your surgery is scheduled for Monday, you can expect a call on Friday). At that time, you will be told what time to arrive at the hospital on the day of surgery.
2. ***How long will I have to take Coumadin following my surgery?***
 - All questions regarding Coumadin should be directed to the internist who cleared you for your surgery or your primary care physician. The recommended length of time is usually 6 weeks.
3. ***Following surgery, approximately how long will it be until I am able to drive?***
 - Generally, patients are able to drive 3-4 weeks after surgery. You should be comfortable enough not to require narcotic medications and feel confident using your leg to control the pedals of the automobile. Begin by driving short distances.
4. ***How do I obtain a refill on my pain medication?***
 - It is recommended that you call Dr. Windsor's office 5 days before you run out of your medication so there is enough time for the nurse to mail the prescription. Please do not wait until your medication runs out to call, as this may result in a delay for you to obtain your medication.
5. ***How long will it be until I see Dr. Windsor post surgery?***
 - Please see the first page of your surgical packet; there is an appointment already scheduled for you 6 weeks following surgery. You can locate this at the bottom of the letter that was prepared for you.
6. ***Will Dr. Windsor be utilizing the minimally invasive technique?***
 - Yes. Dr. Windsor tries to make the incision as small as possible for all surgeries. Remember, Dr. Windsor will use the shortest incision commensurate with an excellent clinical result. The size of the incision depends on the size and musculature of the leg.

7. ***When will I know if I am eligible for rehab, and what facility will I be going to?***
 - A case manager will come to your room on the first post operative day to go over with you the available options regarding post-discharge care. Discharge planning cannot be determined until AFTER your surgery has been completed. The three standard options are: Home care with visiting nurse service and in-home physical therapy; Sub-acute care facility with physical therapy; Acute rehabilitation facility for a period of 7-10 days, usually. Longer stays are determined by the facility itself.
8. ***Can I have an MRI or CT scan after my knee replacement?***
 - Yes, the metal in the replacement is titanium.
9. ***When can I shower following my surgery?***
 - You may shower the day after your staples have been removed.
10. ***When can I resume anti-inflammatory medications for other joint pain?***
 - Three days after you discontinue Coumadin. You may also resume vitamins, supplements, and all foods and beverages at this time.
11. ***“I noticed small pinpoint areas that sometimes leak 3-4 weeks after surgery, should I be concerned?”***
 - Rarely, a local reaction to absorbable sutures underneath the skin may occur. Instead of the suture material being totally absorbed, the body will sometimes push the suture out of the incision. **This does not mean you have an infection.** You may observe a small thread. Please apply Iodine to this area twice daily and call the office if there is drainage that persists greater than 3 days.
12. ***My knee and leg are still swollen, when will the swelling subside?***
 - Swelling is normal and will diminish between 2 and 5 months from the date of surgery. It usually will decrease slowly as you resume normal activities and regain normal strength in the leg. Swelling after total knee replacement is quite common in the knee itself and sometimes down the entire leg.
13. ***My knee is warmer than my other knee, is this normal?***
 - This is normal and can persist for up to 1 year where there can be a slight degree of warmth in the operated knee compared to the non-operated knee.

14. *When can I stop using a cane or an assistive device?*

- Most patients stop using a cane around the house within a month from the date of surgery. You may stop using a cane outdoors whenever you feel confident in your ability to walk without it.

15. *What type of anesthesia will be used during my surgery?*

- The anesthesia will be an epidural with light sedation. There will also be a femoral block that will keep your leg numb from pain for the first 24-36 hours after surgery. The epidural catheter usually remains in place so that you, the patient, can obtain pain medication on demand by pressing a button. This is called epidural PCA (patient controlled analgesia). You will be informed more about this during the class that you will attend on the day of your pre-admission testing.