

TOTAL JOINT Class FAQ's

When can I drive? This is up to your surgeon, but usually no driving for at least 2 weeks.

What position should I sleep in? Preferably on your back or in a recliner (this is what most people will say is comfortable). For total hips, your surgeon may allow you to sleep on your non-operative side with a pillow between your knees to keep the hips in line and prevent your legs from crossing over.

When can I resume my regular medications? Supplements? Right away!

What equipment do I need? Total hips and knees need a walker and a cane. Tall hips should get an elevated toilet seat to help prevent breaking 90 degrees. A shower chair would be based on patient preference.

When do I make my follow-up appointment? As soon as possible. Your surgeon likes to see you within 2 weeks.

When can I expect to be back to normal? Each patient is individual. With the adherence to post operative protocols and prescribed exercises, most patients report a 75-80% improvement in functional activity within the first 8-12 weeks. Arthritic pain is resolved, range of motion is nearly restored, and strength shows significant improvement. It is not uncommon to experience some lingering stiffness, swelling, and weakness which may persist for up to 12 months.

How long do I have to use the walker? This is up to PT and how well you are progressing. PT will let you know when you can progress to a cane.

How long do I have to wear the SCD's, or calf wraps? At least 2 weeks.

How long will PT come to my house? Over a period of 2 weeks PT may visit you 1-5 times for total knees and maybe only once for a total hip. Some patients may get a pre-surgical visit (this is insurance based).

PLEASE, PLEASE, PLEASE read and re-read all your discharge instructions.