

Frequently Asked Questions

1. How do I pick a surgeon to do my total joint replacement?
Many orthopaedic surgeons can skillfully perform joint replacement surgery. In choosing a surgeon, you should consider the surgeons' experience, reputation, training and certainly your comfort level with the surgeon. Experienced surgeons will always give you complete and truthful answers to your questions and concerns.
2. I need both knees done. Can they be done at the same time? If not, how far apart? Many patients have severe arthritis in both knees. Although both knee replacements can be completed during the same hospitalization, this can be a difficult endeavor and is appropriate for only a few patients. Most patients prefer "staged" replacements three to six months apart. This option should be considered with your surgeon.
3. I am afraid of having spinal anesthesia. Why is the spinal so important?
Spinal anesthesia is extremely safe and is generally preferred due to the excellent pain relief provided for up to 24 hours. It also lowers risk of nausea, bleeders and blood clots. Upon your request, general anesthesia is nearly always acceptable.
4. Isn't it dangerous to have a tourniquet on for the whole surgery?
Tourniquets, which minimize blood loss during surgery, have been used successfully in orthopaedic surgery for more than 50 years. Generally, tourniquets can be used safely for up to three hours. In knee replacement, the tourniquet is generally utilized for only one hour.
5. What is the cost of the new knee joint that you are putting in?
The components implanted during knee replacement vary by design and manufacturer, but they generally cost between \$4,000 to \$6,000.
6. How long does the pain from surgery last?
Stronger pain medications, like narcotics, are generally required for four to six weeks following surgery. After that, simple over-the-counter medications, such as Tylenol or Ibuprofen, are usually adequate. Maximum pain relief may be realized as long as six months after surgery.
7. How long after surgery will the pain and stiffness last? Can it be expected to go away completely?
Pain relief after Total Knee Arthroplasty is extremely good; however, your knee replacement usually has some remaining stiffness and occasionally mild pain. It is rare for any patient to require long-term pain medication.
8. Do I need someone with me at home after surgery? If so, for how long?
Upon returning home, you are expected to be able to care for yourself for most daily activities. Having a spouse or companion available for some assistance is desirable for only the first week at home. Nearly all patients can be left alone during most of the day. Patients who progress more slowly will generally benefit from a brief stay of five to ten days at a rehabilitation facility.

9. Does the presence of the artificial knee interrupt blood flow through the joint by either vessels or osmosis?
The components (joint replacement parts) in no way reduce the circulation to bones or the tissues around the joint, **but you might have increased swelling below the knee that should gradually go away (knee replacement patients).**
10. What can I expect the first week at home after my knee surgery is done? Can I go out to eat? Go to church? Or should I just stay home?
During the first week after discharge from the hospital, most patients generally recover at home. In the second and third weeks, patients are usually able to make brief trips away from home (family visits, church, grocery store, etc.). Most patients are able to travel long distances in the second month after surgery.
11. Once this surgery is done, can I still easily get down on my hands and knees to do gardening?
Although kneeling is certainly safe and possible after Total Knee Arthroplasty, many patients still find kneeling difficult. A gardening kneeling pad can certainly be helpful.
12. How does the surgeon straighten my leg for bowlegged knees during knee replacement surgery? Or is straightening my leg not possible?
Leg alignment abnormalities associated with arthritis, such as being bow-legged or knock-kneed, can usually be fully corrected with knee replacement surgery. This is accomplished by appropriate bone cuts and re-balancing of ligaments.
13. Will I set off airport metal detectors?
The metal sensitivity of airport detectors varies, but nearly all knee replacement patients will activate the alarm and require individual selective screening. It is not necessary or useful to carry a card indicating you have had a joint replacement.