

OAKLAND ORTHOPEDIC PARTNERS TOTAL KNEE REPLACEMENT

A PATIENT GUIDE TO SURGERY
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www.oaklandorthopedic.com



Knee
Arthroplasty

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Provided to assist you and your family before and after surgery, this booklet contains important information to prepare for your surgery and as you heal. This is a partnership, and we will do our best to care for you.

Please carefully read this entire booklet. It will make you comfortable with the surgical experience and explain general and specific surgical risks. Should you have any questions, please call the office and one of our staff will be happy to assist you. It is our privilege to care for you.

IMPORTANT PHONE NUMBERS

Office appointments.....	248-334-0524
Surgery Dr. Henderson <i>Li</i>	248-334-0524
<i>Lil's Desk</i>	248-858-3842
Billing / <i>Nancy</i>	248-334-0524
Office Manager/Charlotte.....	248-334-0524

If you have any questions regarding your surgery, please call the office at the above phone numbers.

If you have any questions regarding the Joint Care Center, please call Martha at 248-294-6780.

Normal Knee

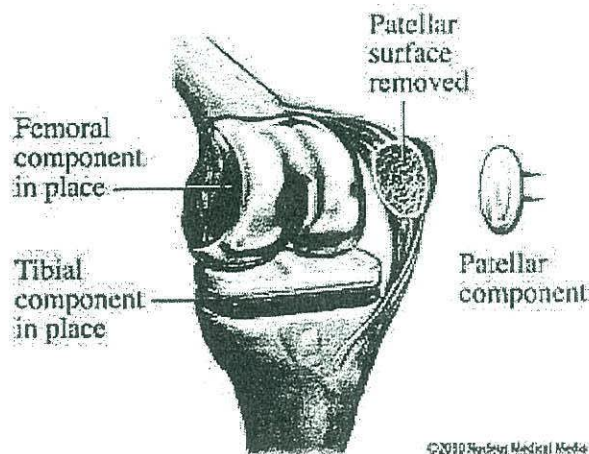
The normal knee has a thick layer of cartilage attached to the end of the thigh bone (femur) and the top of the leg bone (tibia). These layers serve as a cushion and buffer between the bones which allow the joint to move smoothly.

Unfortunately, due to arthritis, trauma and other factors, the cartilage can wear from the ends of the bone. This causes a painful "bone-on-bone" situation which usually does not respond well to any pills, shots and other non-operative treatment.

Total Knee Arthroplasty

Total knee replacement is an elective procedure to resurface the knee joint. It is actually a retreading operation, rather than a new or "bionic" joint. Therefore all of your knee's muscles, tendons and ligaments are maintained and will continue to make your knee work for you.

A knee replacement involves three components which together are called prosthesis. There is a round cap on the end of the femur with a smooth chrome metal surface. A flat surface component is anchored deeply into the tibia with a thick layer of plastic anchored to it. Finally, a new plastic surface is anchored to the undersurface of your kneecap (patella). All of these components are perfectly sized to your bone by direct measurements at the time of surgery. The surfaces of your new joint are then plastic against smooth chrome metal, which allow free movement without friction.



LONGEVITY

“How long will my knee replacement last?” The longevity of a knee replacement is dependent on many variables such as the patient’s activity level, body weight and bone density. **In general, given the optimal conditions of the above three variables, the modern prostheses have the potential of providing 20 or more years of pain free service.**

COMPLICATIONS

Complications are possible. These would include stroke, heart attacks, blood clots, anesthesia complications, infection and nerve damage. Other rare complications include calcium deposits, transfusion reactions and long term loosening. Many preventative measures are taken so that all of these problems are extremely rare.

EXPECTATIONS

The protocols of the Joint Care Center are carefully designed to address and minimize the possibility of complications. ***Most patients do extremely well with no complications or difficulty.** Together we will work with you to ensure that you have an excellent long term result. Healthgrades.com documents that St. Joseph Mercy Oakland has the lowest complication rate of any hospital in Southeastern Michigan! High personal motivation and compliance with our well structured program equal positive outcomes.

RECOVERY

“ATTITUDE IS EVERYTHING”

Clearly, the most important factors in successful recovery are the patient’s attitude, motivation and efforts. A positive attitude and a willingness to work hard will make a major difference in your recovery.

The recovery process can be quick or somewhat slow, depending on the attitude and motivation of the patient. While the swelling and soreness will take several weeks to completely resolve, it is possible to have resumed almost all of your normal activities including walking without support, use of stairs and driving in about two weeks. The rapid recovery of our specialized Joint Care Center is designed to make this happen.

COACH

You will need a coach to encourage and help you in the entire process of joint replacement. Your coach can be anyone....a spouse, family member or friend. Your coach must attend the scheduled preoperative teaching class with you before your surgery, and one or more sessions of group therapy while you are in the hospital. Your coach should continue to work with you after discharge with a full knowledge and understanding of the exercises that you must continue for a quick and easy recovery. **It is okay to be home alone some of the time during the day, but your coach, or someone over 16 years old should be available to check on you and to stay with you for the first couple of nights after you return home.**