



 **MR DAVID STITSON**  
CONSULTANT ORTHOPAEDIC SURGEON

# POST-OPERATION CHECKLIST FOR ORTHOPAEDIC SURGERY

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Ensuring your home is ready for your return after a hip or knee replacement will make your recovery smoother, safer and more comfortable.

**David Stitson**

MBBS, FRCS(Tr & Orth), RAF(rtd)

**Consultant Orthopaedic Surgeon**



# ORTHOPAEDIC POST-OPERATIVE CHECKLIST

This checklist is for anyone recovering from or who is about to undergo surgery to have their hip or knee replaced.

The following information is designed to help you make important decisions about your recovery. Mr Stitson, your general practitioner (GP) and other healthcare professionals will offer you a lot of good advice - but ultimately, it's you who has to make the decisions.

**Contact:**

Nuffield Health Hospital,  
Plymouth, PL6 8BG

01752 761818

[enquiries@orthopaedicsplymouth.co.uk](mailto:enquiries@orthopaedicsplymouth.co.uk)

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# ORTHOPAEDIC POST-OPERATIVE CHECKLIST

It is not unusual to feel tired after surgery, and your sleep patterns may take a while to return to normal. Try not to feel frustrated at not being able to do all the things you want straight away. Gradually increase your activity levels, starting with short distances and increasing distance as you feel able.

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# WOUND CARE

If you experience any of the following symptoms of infection, please contact Mr Stitson or the hospital.

- Excessive discharge or ooze from the wound (this may be clear, blood-stained or yellow/green pus).
- Redness or inflammation spreading out from the edge of the wound.
- The area around the wound becomes swollen.
- The edges of any part of the wound separate or gape open.
- If Mr Stitson has used staples or stitches then the wound should be kept covered until these are removed.
- If your sutures are buried, the wound needs to be covered for the first few days, you will not have to worry about getting the scar wet, but follow the advice given by Mr Stitson about how to shower and bathe.
- The wound should not be submerged in a bathtub or pool until the sutures are removed.

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# ICING

- Apply ice for the first 5-7 days after surgery.
- While the post-op dressing is in place, application of ice should be regular.
- Once the dressing is removed on the first or second day, ice should be applied for 20-minute periods, 3-4 times per day.
- Care must be taken with ice to avoid frostbite. **DO NOT** apply ice directly to the skin. Always wrap in a towel and limit exposure to 15-20 minutes at a time.

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# MOBILITY

- Follow the weight-bearing instructions you were given at discharge.
- A frame, crutches or a walking stick may be necessary to assist walking.
- Elevate the operated limb elevation for the first 72 hours to minimise swelling.
- Walking is encouraged and you should walk as far as is comfortable every day.

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# POST-SURGERY

- The anaesthetic drugs used during your surgery may cause nausea for the first 24 hours. If nausea occurs, drink only clear liquids.
- If nausea and vomiting become severe or if you show signs of dehydration, call your GP.
- Call the doctor if you have a high temperature.
- You may take a prescribed anti-coagulant daily, as this may lower the risk of a blood clot developing after surgery. How long this is prescribed will depend on the procedure type and your individual risk.
- Should severe pain in the affected limb or significant swelling of the joint occur, please call Mr Stitson or the hospital.

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# PAIN MEDICATION

- Local anaesthetics are put into the incision after surgery. It is not uncommon for patients to encounter more pain on the first or second day after surgery. This is the time when swelling peaks.
- Taking pain medication before bedtime will assist in sleeping.
- It is important not to drink alcoholic beverages or drive while taking narcotic medication.
- You should resume your normal medications for other conditions the day after surgery.

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# DRIVING

- Driving while under the influence of narcotic pain medication is dangerous, illegal and discouraged.
- Driving should be avoided for the first 6 weeks.
- Your insurance company should be informed about your operation.
- Before resuming driving, you will need to be fully recovered from your surgical procedure.

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# ACTIVITIES

- Returning to work also depends on the degree of post-operative pain and the demands of your job type.
- Pain is generally a good guide as to whether you can return or not.
- Returning to high-impact sports, such as running, will be discussed by Mr Stitson on an individual patient basis.
- Most people can return to lower-impact sports, such as swimming, golfing and bicycle riding if they choose.

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# CONTACT US

Do you have questions or want to learn more?

Our friendly team is here to assist. Contact us via email, phone, or visit our website for further information and inquiries.

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Website

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**This information is not intended to replace specific instructions from Mr Stitson. Check with your doctor to make sure these instructions apply to your case.**