We value your feedback

Your feedback helps us improve the care and services we provide. Whether you want to share a compliment or raise a concern, there are several ways to get in touch.

Start by speaking to the nurse in charge or another senior member of staff. They may be able to resolve your concern straight away.

If you'd prefer to speak to someone outside the department, you can contact:

Patient Advice and Liaison Service (PALS)

Email: PALS@health.gov.je
Call: (0)1534 443515

Feedback team

Email: feedback@health.gov.je
Call: (0)1534 442044

You can also visit gov.je and search for 'feedback' to submit a compliment, complaint, comment or suggestion online.

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Health and Care Jersey

Patient Information

Knee Replacement

What to expect before, during, and after total knee replacement surgery, and how you can take an active role in your recovery, including practical advice, and contact details for support

Bring this leaflet with you all of your physiotherapy appointments

Trauma and Orthopaedics Department
Jersey General Hospital

The Enhanced Recovery Programme

The Enhanced Recovery Programme (ERP) is designed to improve your experience and support your recovery following a knee replacement.

It includes

- pre-operative advice
- tailored pain relief
- early eating after surgery
- getting you moving again as soon as possible.

You're encouraged to take an active role in your recovery. By working closely with your healthcare team, you'll give yourself the best chance of a smooth and successful outcome.

Before your surgery

In the weeks leading up to your operation, staying active will help your recovery. Try to keep moving as much as possible. Follow the exercise plan provided by your healthcare team. You'll find full details towards the back of this leaflet.

It's important to focus on your overall health and wellbeing. Managing your weight can reduce the risk of complications, and your GP can support you with advice if needed.

If you smoke, we strongly recommend stopping at least 2 weeks before and for 6 weeks after your surgery. Smoking slows wound healing and increases the risk of chest complications.

Reducing your alcohol intake before admission and for 6 to 8 weeks afterwards will also support your recovery.

Eating a balanced diet and staying hydrated helps your body heal, so please drink plenty of fluids unless advised otherwise.

☐

Step ups
Step up with your operated leg. Keep this leg on the step. This is your starting position

Lean forwards and bring your other leg up onto the step.

Slowly return to the starting position

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Single leg standing balance
Balance on your operated leg. You may need to hold on to something for assistance at first.

Gradually increase how long you balance for. The goal is to get to 30 seconds on both sides

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Chair squats
Stand tall with your feet hip width apart.

Slowly sit down and tap your bottom on the chair. Push back up into standing squeezing your bottom muscles

Exercises to start at your follow-up appointment

Start these exercises once you have practised them at your first appointment in Outpatient Physiotherapy.

- repeat each exercise 8 to 15 times, this is 1 set
- complete 1 set 3 times a day, every day

As your exercises become more challenging, stay consistent with pain relief and icing to support optimal recovery.

☐

Bridges
Bend you knees. Keep them hip width apart with your arms by your side. Lift your bottom as far as able and squeeze.

Hold for a count of 5

☐

Knee extension stretch
Lying face down on a bed with your feet over the edge.

Let the weight of your feet straighten your knees.

Hold for 30 seconds

Before your surgery you'll have an appointment with the pre-assessment team to go through your medical history and make sure you are fit for surgery. They'll advise if you need to stop any medication.

Understanding the risks

Around 15% of total knee replacement patients and 5% of partial knee replacement patients report dissatisfaction with the outcome.

Like any major surgery, knee replacements carry some risks. Common surgical risks include:

- pain
- stiffness
- bleeding
- infection
- problems with wound healing
- damage to nerves, bones, or blood vessels

Blood clot related risks include:

- deep vein thrombosis (DVT) which is a blood clot in the leg
- pulmonary embolism which is a clot that travels to the lungs

Implant-related risks include:

- loosening of the prosthesis
- Fractures and dislocations
- early implant failure
- leg length differences

Serious medical complications such as heart attack or stroke are rare, and the risk of death is estimated at 0.3% within 3 months of surgery. If you'd like more information, speak with a member of the clinical team.

Planning ahead

Before your operation, it's helpful to plan for transport to and from the Hospital.

Make sure your home is safe by securing loose rugs or mats. If you live alone, consider asking someone to stay with you for the first few days after you return home.

Stock your fridge and freezer with easy meals, and reorganise your kitchen so frequently used items are within reach.

You might also want to ask family or friends to help with housework during the first few days.

Let us know in advance if there's anything that might delay your discharge such as your carer being away or unavailable.

Inform us of any new medical issues that arise between your pre-assessment appointment and your admission.

Packing for hospital

Bring:

- your completed Oxford knee score questionnaire
- all current medications in their original packaging
- comfortable clothing for both day and night
- enclosed shoes like slip-on trainers
- your personal hygiene items
- any essentials such as glasses or hearing aids

We recommend leaving valuables at home.

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Seated knee extension stretch
Whenever resting, please rest in this position to work on getting your knee straight and to reduce the swelling.

This position may feel uncomfortable in the back of the knee, but it is important to stretch these tissues and stop them from becoming tighter.

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Heel raises
Stand holding onto a stable surface.
Push up onto your toes.

☐

Mini squats
Stand holding on to a supportive surface.
Bend your knees and stick your bottom backwards so the weight goes into your heels as if you are going to sit down.

Exercises for after your operation

☐

Straight leg raise
Lying on your back or half sitting with the operated leg straight and the other leg bent.

Bend your ankle and lift your leg keeping it straight. The lower you hold it the harder it is.

Hold for up to 10 seconds.

☐

Seated knee extension
Sit on a chair.

Pull your toes up, tighten your thigh muscle and straighten your knee.

Hold for 5 seconds

☐

Knee flexion
Sit on a chair. Slide the foot under the chair as far as you can.

You can place something under your foot to improve the slide such as a plastic bag.

On the day of your surgery

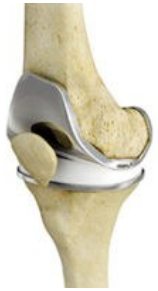
You'll receive instructions about fasting before your admission. You may drink clear fluids such as water, black tea or coffee until you arrive.

You might also be asked to take special pre-operative drinks, this will be discussed at your pre-assessment clinic.

During the procedure

When you arrive for surgery, we'll make sure you're comfortable and ready. You'll have anaesthesia, so you won't feel anything during the procedure. Once you're asleep, we'll make a cut over your knee to access the joint.

We'll carefully move the surrounding tissues aside and remove the damaged surfaces of your thigh bone (femur) and shin bone (tibia). If needed, we'll also smooth the underside of your kneecap (patella) to prepare it for the new joint.



Next, we'll fit metal components to the ends of your femur and tibia, and place a smooth plastic spacer between them. This spacer helps your new joint move easily and reduces friction. If your kneecap is being resurfaced, we'll attach a plastic button to its underside.

Once everything is in place and moving smoothly, we'll close the incision with stitches or staples and apply a dressing to protect the area.

After your operation

After surgery, you'll wake up in recovery. We'll monitor you closely and help you start moving around about 4 to 6 hours after your procedure. Getting up and walking soon after surgery reduces the risk of blood clots.

The next day, you'll have an X-ray and possibly a blood test. A therapist will assess your progress and help set recovery goals. Staying actively involved in your recovery will help you get the best results.

It's normal to feel some nausea or discomfort after surgery, this can be managed with medication.

Going home

Most people go home within 1 to 3 days. You'll be encouraged to return to your usual daily activities as soon as possible, as this helps speed up recovery and reduces the risk of complications.

Make sure you've arranged your own transport home, as hospital transport isn't generally provided.

Once you're home a nurse will visit you twice within the first 10 days to check your:

- health
- pain control
- exercises
- wound

They'll also remove the stiches or staples.

These exercises may cause discomfort, but should not increase your daily pain levels. If they do reduce the repetitions or sets.

Inner range quads

Lie on your back with one leg bent and the operated leg straight. Place a rolled towel under the operated knee.

Bend your ankle and straighten your knee. Push your knee down against the towel

Hold for 5 to 10 seconds

Knee bends

Lying on your back. Bend your knee as far as you can.

It can help to have a sliding surface under your knee to assist the movement.

Sit to stand

Stand tall with your feet hip-width apart. Slowly sit down on the chair. Push back up into standing using your hands to assist.

Aim to gradually reduce the amount you assist with your hands.

Exercises for after your operation

Start these exercises straight after your operation

- repeat each exercise 5 to 12 times, this is 1 set
- begin with 1 set and build up to 3 sets
- do this every day, up to 4 times a day

☐

Deep breaths
Take deep breaths in through your nose and out through your mouth. This will improve the amount of oxygen that is carried around your body.

☐

Ankle pumps
This exercise will your help circulation and reduce your risk of deep vein thrombosis (DVT).

☐

Static quads
Lying on your back or half sitting with legs straight.

Bend your ankles and push your knees down firmly against the bed.

Hold for 5 seconds and then relax.

To reduce swelling, we recommend an ice pack or frozen peas wrapped in a pillowcase. Apply for 20 minutes at a time, up to 4 times a day, and elevate your leg while icing.

Once your wound has healed, you can gently massage it with a fragrance-free moisturiser like BioOil or E45. Avoid picking scabs, and only start when advised by a clinician.

Using the stairs

Take extra care when using stairs. In the early stages of recovery, always use a handrail for support and take one step at a time.

Going up
Step up with your unoperated leg first
Lift up your operated leg and then the crutches.
Ensure both your foot and crutch are fully on the step.

Going down
Reverse the order.
Step down with your crutch first, then your operated leg followed by your non operated leg.

Returning to your normal activities

Some discomfort with activity and at night is normal for several weeks.

Gradually increase your housework, but be careful when bending or twisting.

You may not be able to drive for about 6 weeks, you must be able to safely perform an emergency stop and change gear.

If you plan to fly soon after surgery, speak to your consultant.

The amount of time you'll need off work depends on your job, discuss this with your consultant.

Most sporting activities can be resumed after 3 to 6 months, but check with your physiotherapist first.

Arthroplasty clinic

An arthroplasty clinic is a specialist outpatient service that supports your recovery after joint replacement surgery such as a knee replacement.

The arthroplasty clinic is where you'll attend follow-up appointments with the Orthopaedic team. These appointments typically happen at around 6 weeks, and at 6 months after surgery.

This may change depending on your needs. Further tests or assessments can be arranged during these visits.

These exercises may cause discomfort, but should not increase your daily pain levels. If they do reduce the repetitions or sets.

Tick the exercises you have started before your operation

☐

Straight leg raise

Lying on your back or half sitting with the operated leg straight and the other leg bent.

Bend your ankle and lift your leg keeping it straight. The lower you hold it the harder it is. Hold for up to 10 seconds

☐

Heel raises

Stand holding onto a stable surface. Push up onto your toes.

☐

Squats

Stand holding on to a supportive surface. Bend your knees and stick your bottom backwards so the weight goes into your heels as if you are going to sit down.

Exercises to do before your operation

Start these exercises at least 6 weeks before your operation:

- repeat each exercise 8 to 15 times, this is 1 set
- complete 3 sets with a 1 minute rest between each set
- do this every other day

☐

Seated knee extension

Sit on a chair. Pull your toes up tighten your thigh muscle and straighten your knee.

Hold for 5 seconds

☐

Knee flexion

Sit on a chair. Slide the foot under the chair as far as you can.

You can place something under your foot to improve the slide such as a plastic bag.

☐

Inner range quads

Lie on your back or half sitting with 1 leg bent and the operated leg straight. Place a rolled towel under the operated knee.

Bend your ankle and straighten your knee. Push your knee down against the towel.

Hold for 5 to 10 seconds

During your appointments, the team will:

- check your progress and mobility
- review your pain levels and wound healing
- assess the function of your new knee joint
- arrange further tests or imaging if needed
- answer any questions or concerns you may have

Sharing your data with the National Joint Registry

You'll be invited to take part in the National Joint Registry (NJR), which collects information about joint replacements across the UK.

You'll receive a booklet explaining what's involved and be asked to give your consent. You can find out more at www.njrcentre.org.uk.

Physiotherapy

A physiotherapist will help you begin rehabilitation on the ward. This includes regaining mobility and preparing to go home.

We recommend you continue the exercise programme in this leaflet, it includes exercises for 6 weeks before and after surgery.

You'll be invited to the outpatient gym around 3 weeks after surgery. We'll send you the details in an appointment letter.

The initial session lasts about 30 minutes, followed by group sessions every 2 weeks for 3 to 4 sessions. If you need extra support at home, we'll help you find the right service.

Wear loose clothing and closed shoes, and bring water.

When to seek medical advice

After surgery, keep an eye out for signs of DVT such as:

- pain
- tenderness
- swelling
- redness in your calf or lower leg

Signs of infection include:

- increasing pain
- swelling
- redness
- stiffness
- fever or chills
- night sweats
- fatigue

Pulmonary embolism may cause sudden shortness of breath or chest pain.

Blood collection under the skin near the wound, this is also known as a wound haematoma, and usually resolves on its own.

If you notice any of these symptoms, go straight to the Emergency Department.

Contact us

If you have further questions, concerns or notice signs of infection, contact:

- Orthopaedic Nurse Specialist: 01534 442162
- Orthopaedic Ward (Beauport Ward): 01534 442777

Other useful contacts

- Pre-assessment clinic: 01534 442156
- Arthroplasty specialist nurse: 01534 442162
- Beauport Ward (orthopaedic ward): 01534 442777
- Physiotherapy outpatient department: 01534 442639
- Occupational therapy: 01534 443013

Scan this QR code or search ‘bones and joints’ to visit the Trauma and Orthopaedic website on Gov.je.

Scan this QR code to access our information video.