

Ted's Care Plan: Knee Replacement

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About Ted

Ted is a 72 year-old man who suffers from chronic knee pain. He has always been active and is an avid tennis player, but his arthritis has become so painful that he now has trouble walking up the stairs. Medicine, including prescription medicine and steroid injections, no longer works to manage his pain, so he has consulted with his doctor about knee replacement surgery. Ted's doctor supports surgery as an effective treatment option, and Ted's family agrees that now is an appropriate time for the procedure.

Ted's Care Team

After his surgery, Ted will follow-up with his **surgeon**, who will monitor how the wound is healing. Ted will work with a **physical therapist** to strengthen his knee muscles and improve his mobility to return to performing his normal household activities. His **daughter** has invited Ted to live at her house for the first few weeks after his surgery. Her house has a bedroom on the first floor, which is crucial because Ted won't be able to climb stairs for many weeks. When he does return home, Ted worries about his wife being able to help him around. The family has discussed hiring a **home health aide** for a few weeks.

Clinical Goals

- **Preventing infection.** While Ted is recovering in the hospital, a big concern is preventing infection, which can threaten Ted's health, require the removal the artificial joint, and increase his length of stay in the hospital.
- **Avoid falls.** Once Ted is out of the hospital, it is important to avoid falls, which could damage the artificial knee and cause the need for further surgery.

- **Prevent wear-and-tear.** Over the long-term, his surgeon wants to prevent Ted from wearing out the artificial joint because doing so can cause pain and the loosening or dislocation of the joint, which would necessitate further surgery. She recommends that Ted refrain from engaging in high-impact activity, and suggests low-impact activities like walking, swimming, or golfing instead.



Personal Goals

- **Regain normal activity levels ASAP.** Ted takes a family vacation every summer at their lake house, and he is determined to be able to get around without a walker or cane.
- **Exercise with his wife.** Ted would really like to play tennis again because it is an activity that he and his wife do together. He is struggling with the reality that he can no longer do high-impact activities.
- **Continue driving.** Ted does not want to be a burden to his family, and he also hopes to maintain his independence. His surgeon mentioned that he might be able to drive in four to six weeks, depending on his range of motion.

Care Team

- Ted
- Primary care physician
- Surgeon
- Family members (wife and daughter)
- Physical therapist
- Home health aide

Action Steps to Achieve Goals

- **Ted** and his **surgeon** choose to implant a type of artificial joint that does not wear with activity as easily as a typical prosthetic so Ted can be more active. His surgeon also prescribes antibiotics to prevent infection while Ted is in the hospital.
- His **physical therapist** develops an exercise plan that gradually increases Ted's activity level, beginning with chair exercises and short walks around the house and progressing into normal household activities. Ted keeps a daily log of his activity and his resulting fatigue and pain.
- The local **Red Cross** provides free transportation service, so Ted's family plans to use this service to take him to his physical therapy appointments (until Ted is driving again).
- Ted's **daughter** organizes the installation of appropriate safety features in Ted's home, including handrails on the stairs and a shower bench for bathing, to help Ted avoid falls when he moves back home.
- **Ted** and his **wife** register for ballroom dancing classes, a low-impact activity that they can do together rather than tennis.