Procedure: Total Knee Arthroplasty (TKA)

**Issues Requiring Urgent Ortho Consult:** Phone # 608-637-4204
1) S & S of DVT
2) Non-healing wounds, blisters, incisions, or drainage
3) S & S of popliteal artery/nerve involvement
4) Uncontrolled Pain (ie ≥ 6/10 at rest after 1 wk) with normal activity.
5) Passive Extension lacking > 5° in first week (initiate 3 X 10= 0 Board)

**W/B Restrictions:** None, WBAT

**ROM Restrictions:** None, 0-120°+ ASAP/as tolerated

- Note: If extension is lacking passively- initiate 3 X 10=0 board
- Contact 608-637-4385 (VMH PT) for manufacturer info if needed

**Activity Restrictions:**
1) No kneeling times _6_ weeks; as tolerated after 6 weeks
2) Limit continuous, dependent position of operated knee(s) to 2-3 hours- RICE after activity for 8 weeks

**Gait:** Least restrictive assistive device

**Home Instructions:**
1) AAROM, AROM, PROM knee flexion and extension as tolerated
2) Gait training to increase tolerance to W/B
3) Eliminate limp
4) Swelling management: RICE minimum 3 times/ day; end compression
   - 2 weeks post-op unless otherwise indicated at 2- week Ortho F/UP

**PT D/C Goals:** Range 6-8wks or 18 to 24 visits

**Impairment Based:**
1) Swelling ≤ 1cm vs. opposite knee
2) AROM: 0-5-110° PROM: 0-120°+
3) Pain ≤ 4/10 @ worst
4) Strength: 4/5 MMT; 75% Isokinetic vs uninvolved; 10 reps sit to stand without UE assistance

**Function Based:**
1) Amb 1000+ ft with no assistive device independently; minimal to no antalgic gait; = W/B time; = flexion and extension cycles in gait cycle on level surfaces.
2) Up/down steps reciprocally; independent with rail as needed; as appropriate to patient’s home/community environment.
3) Amb on grass, asphalt, gravel with s.p.c. safely 50-300 ft independently.
4) Sit to stand without use of UE’s independently with safe descent to seat.