

HSS



Stavros Niarchos Foundation
COMPLEX JOINT RECONSTRUCTION CENTER
Revision Total Knee and Hip Revision



Complex Joint Reconstruction Center (CJRC) Revision Total Knee

There are a variety of knee replacement revision procedures. You and your health team will determine best options after considering factors specific to you.

Factors include: Your overall health condition, reason for revision, type of implant and the quality of your soft tissues and bone.

Revision knee replacement surgery involves the exchange of some or all of the components of the previous total knee replacement (ex. Femur, tibia, patella and plastic). Joint aspiration(s) or removal of fluid from around the implant will be done prior to revision surgery (on most complex cases to rule out any potential for infections.)

Special Considerations

In most cases the prior incision will be used to expose and access the joint, but sometimes the incision may be extended. Removal of implant may lead to loss of bone and other soft tissue structures that will then be prepared for the replacement implants. The revision implants often contain longer stems and porous metals to better secure them into bone.

Multiple x-rays and other imaging studies may be used to aid with diagnosis and the preparation of the revision surgery. These often include MRI, CT and rarely, bone scans. Please note that MRI is completely safe to do in the presence of metal implants.

Physical and Occupational Therapy

The rehabilitation team will follow the surgeon's request and tailor the exercise program based on the specific patient needs.

Detailed instructions will be provided following the surgery. There are many possible variations and modifications that will need to be addressed and customized. These instructions will be chosen, reviewed and reinforced following surgery. You may have instructions that limit your return to normal activities to protect your surgical site until healing occurs.

Some topics include:



Weight bearing status can vary

Potential options are:

- **Toe Touch** weight bearing (you may touch the floor with the operated leg only for balance)
- **Partial Weight** bearing-determined by surgeon (You may place a percentage of your body weight on your operated leg)
- **Weight Bearing** as tolerated (place only as much weight on your leg that is tolerable. Let pain be your guide)

Range of motion restrictions and limitations (if applicable)

- Range of motion protection and gradual progression
- No forced flexion exercise

Knee splints or braces (if applicable)

- Designed to keep your knee in proper alignment, restrict bending and to provide comfort and support
- Instructions will be provided on when to use such as: at all times vs while in bed or walking and except for skin assessment and bathing

Durable medical equipment

- Durable medical equipment may be recommended to keep you safe and able to manage normal activities (ex. Elevated toilet seat, easy-up cushion, long-handle sponge and reacher)

Complex Joint Reconstruction Center (CJRC) Revision Total Hip

There are a variety of hip revision procedures. You and your health team will determine best options after considering factors specific to you.

Factors include: Your overall health condition, reason for revision, type of implant and the quality of your soft tissues and bone.

Revision hip replacement surgery involves the exchange of some or all of the components of the previous total hip replacement (ex. Femur or acetabular(pelvis) cup and plastic liners). Joint aspiration(s) or removal of fluid from around the implant will be done prior to revision surgery on most complex cases to rule out any potential infection.

Special Considerations

In most cases the prior incision will be used if possible to expose and access the joint, but sometimes the incision may be extended. Often there is bone and soft tissue damage and loss, and the removal of implant may lead to loss of bone. The revision implants often contain longer stems and porous metals to better secure them into bone.

Multiple x-rays and other imaging studies may be used to aid with diagnosis and the preparation of the revision surgery. These often include MRI, CT and rarely, bone scans. Please note that MRI is completely safe to do in the presence of metal implants.

Physical and Occupational Therapy

The rehabilitation team will follow the surgeon's request and tailor your program based upon your specific needs.

There are many possible variations and modifications that will need to be addressed and customized. These instructions will be chosen, reviewed and reinforced following surgery.

Some topics include:



Range of motion restrictions and limitations

Some hip/leg positions should be avoided for **6 to 12 weeks** or until seen by your surgeon at your first post op visit including:

- No bending the hip greater than 90 degrees
- No crossing the operative leg past midline
- No turning the operative leg inward

Hip abduction brace (if applicable)

- Designed to keep your hip in proper alignment and provides support and stability
- Instructions will be provided about when to use the brace provided by your surgeon (such as at all times vs while in bed and except for skin assessment and bathing)

Durable medical equipment

(ex. Elevated toilet seat, easy-up cushion, long-handle sponge and reacher)



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