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Pain Management Protocol for Total Joint Replacement Surgery

The following is a novel and new protocol for managing pain and optimizing outcomes of your total joint. It is imperative that you follow this protocol as instructed below. These instructions supersede all other pain management instructions that may be given to you.

Preop at home

1. Tylenol 1000 mg Q8h starting 1 day before surgery
2. Bring all the medications that were delivered to you by Capsule pharmacy.
3. Prepare ice packs or the cryo machine as cooling the limb is an important part of pain control

Postop at home

Rehabilitation

1. Limit step count
 - a. 1000-2000 steps for first 7 days
 - b. 3000 steps or under for next 3 weeks
2. Light weight edema compression sleeves for 7days
3. Cryotherapy with compression (compression to start 48 hours post op) or ice packs for 20 minutes on and 20 minutes off
4. ROM Tech bike for 21 days
5. Home physical therapy

Medications

Round the clock medications

1. Cefadroxil 500mg every 12 hours for 24hrs – this is an antibiotic to minimize the risk of infection. (If you are allergic to Penicillin, or Cephalosporins, you will be given Clindamycin)
2. TXA 650mg every 12 hours for 14 days – to minimize internal bleeding in the knee
3. Tylenol 1000mg every 8 hours for 30 days – the foundation for pain control.
4. Celebrex 200mg once a day for 30 days – to minimize inflammation and pain.
5. Gabapentin 300mg at bedtime for 30 days – to minimize nerve pain and aid with sleep.
6. Dexamethasone 4mg every 12 hours for 14 days – to minimize inflammation.
7. Journavx 50mg every 12 hours for 14 days or 30 days – a new non opioid pain medication
8. Aspirin 325mg every 12 hours for 30 days – to prevent DVT and PE (blood clots in legs and lungs).
9. Pantoprazole 20mg once a day in the morning – to prevent heart burn.

As needed medications

1. Zofran 4mg every 8 hours as needed for nausea
2. Oxycodone 5mg every 4hrs for pain only if needed for rescue pain management. You will be given 5 pills in case you have pain that cannot be controlled (unlikely).