

Questions to ask your doctor

Having trouble knowing where to start? These starter questions will help you talk about your knee pain with your doctor. They'll also help you and your doctor determine if knee replacement makes sense for you.

- Which pain relief options may work well for me?
- How much relief will non-surgical or surgical treatment options give me?
- Am I eligible for partial knee replacement?
- How is knee replacement done?
- What should I expect after the surgery?
- How much pain will I feel after surgery, and how is it managed?
- What are the risks or complications of knee replacement, or other treatment options?
- Will I have mobility restrictions? For how long?
- How long will I be in the hospital?
- How long before I can return to my normal activities?
- When will I be able to drive?
- Is knee replacement surgery covered by my insurance?
- Which company's joint replacement products would you use for me? Why?
- Will you be performing the surgery?
- · How many knee replacements have you performed?

Important information

Knee Replacements

Total knee replacement is intended for use in individuals with joint disease resulting from degenerative, rheumatoid and post-traumatic arthritis, and for moderate deformity of the knee.

Knee replacement surgery is not appropriate for patients with certain types of infections, any mental or neuromuscular disorder which would create an unacceptable risk of prosthesis instability, prosthesis fixation failure or complications in postoperative care, compromised bone stock, skeletal immaturity, severe instability of the knee, or excessive body weight.

As with any surgery, knee replacement surgery has serious risks which include, but are not limited to, pain, infection, bone fracture, peripheral neuropathies (nerve damage), circulatory compromise (including deep vein thrombosis (blood clots in the legs)), genitourinary disorders (including kidney failure), gastrointestinal disorders (including paralytic ileus (loss of intestinal digestive movement)), vascular disorders (including thrombus (blood clots), blood loss, or changes in blood pressure or heart rhythm), bronchopulmonary disorders (including emboli, stroke or pneumonia), heart attack, and death.

Implant related risks which may lead to a revision include dislocation, loosening, fracture, nerve damage, heterotopic bone formation (abnormal bone growth in tissue), wear of the implant, metal and/or foreign body sensitivity, soft tissue imbalance, osteolysis (localized progressive bone loss), and reaction to particle debris. Knee implants may not provide the same feel or performance characteristics experienced with a normal healthy joint.

The information presented is for educational purposes only. Speak to your doctor to decide if joint replacement surgery is right for you. Individual results vary and not all patients will return to the same postoperative activity level. The lifetime of any joint replacement is limited and varies with each individual. Your doctor will counsel you about how to best maintain your activities in order to potentially prolong the lifetime of the device. Such strategies include not engaging in high-impact activities, such as running, as well as maintaining a healthy weight. It is important to closely follow your doctor's instructions regarding post-surgery activity, treatment and follow-up care. Ask your doctor if the joint replacement is right for you.

Stryker Corporation or its other divisions or other corporate affiliated entities own, use or have applied for the following trademarks or service marks: Mako, Mobile Bearing Hip, Stryker, Together with our customers, we are driven to make healthcare better. All other trademarks are trademarks of their respective owners or holders.

Notes			