

phil h. berry, jr., m.d.
miguel a. hernandez, III, m.d.
ray f. aronowitz, m.d.
david a. heck, m.d.
zachary kelley, m.d.
alexander cho, m.d.
jason k. lowry, md
jon e. nathanson, d.p.m.



810 north zang blvd.
dallas, tx 75208-4233
telephone (214) 941-4243
fax (214) 941-1153

www.TheBoneDocs.com
www.jasonlowrymd.com

2800 east broad st, suite 510
mansfield, tx 76063
telephone (817) 453-3500
fax (817) 453-3520

Dr. Lowry's Post-Op Instructions Knee Antibiotic Spacer for Infection

Patient:

1. To decrease the risk of a blood clot, you will be given thigh-high compression stockings & prescribed a daily aspirin; both are to be used for four weeks. If you are at higher risk of a blood clot, then you will be given an injectable of either Arixtra SQ or Lovenox SQ x 4-6wks.
2. To improve your bone strength, you will be prescribed Vitamin D & Calcium supplements.
3. Dressings: keep a sterile, island dressing (preferably an antibacterial material like Aquacel AG Surgical, Therabond, Primapore, etc) over all incisions for at least 2 weeks. **Do NOT change unless there is >50% strike-through.** If your facility does not have antibacterial dressings, then the next best option is to apply a thin layer of bacitracin ointment over the incision with each dressing change. Your nurse will educate you on proper dressing management. ****Ideally, an Aquacel dressing requires only ONE change after seven days & you can shower with it on.**** Replace the compression stocking up to the thigh, over the dressing on your knee.
4. You will also have a "cryo cuff" or "polar care" placed over your dressings. This is a device that circulates cold water around the knee to keep down the initial swelling & pain after surgery. Your nurse will instruct you & your family on how to properly use it. **NEVER PLACE IT DIRECTLY ONTO YOUR SKIN. THIS WILL CAUSE BURNS.** If you are not given one of these devices, then simply apply two properly sealed ice packs to your knee for 72 hours after your surgery.
5. Use your crutches or walker for **Partial Weight-Bearing** on your operative leg. The antibiotic spacer is not strong enough (nor is the infected bone) to hold your body weight.
6. Gaining full extension of your knee is critical right after your surgery. **PLEASE AVOID PLACING ANY PILLOW UNDER YOUR KNEE.** To address this, you will be placed into a knee immobilizer, which keeps your knee straight. This is to be worn for 2-3 weeks or until your incisions have completely healed.
7. Your antibiotics will be managed by your infectious disease physician, usually for 6 weeks.
8. We will plan for re-implantation of your new knee in 8 weeks if your infection labs improve.
9. Please make an appointment within 10-14 days after your surgery.

If you have any other questions or concerns please call my clinic.

Sincerely,

A handwritten signature in blue ink, appearing to read "J. Lowry".

Dr. Jason K. Lowry, MD FAOS