

LARGE PRINT



Surgery Recovery Tracker

For hip and knee replacement, day by day

Warning signs • home checklist • my details • 6-week daily log

Type in it on screen, or print as many copies as you like

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Warning Signs

KEEP THIS PAGE WHERE YOU CAN SEE IT • AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS



Some pain with activity and at night is common for several weeks.

These signs are not. Do not wait for your next appointment.

Possible infection: call your surgeon right away

- Fever that does not go away (higher than 100°F by mouth)
- Chills
- Wound getting more red, tender or swollen
- Drainage (fluid) coming from the wound
- Pain getting worse both when moving and at rest

Possible blood clot in the leg: call your surgeon right away

- Pain in your calf that is getting worse
- Tenderness or redness above or below the knee
- New or increasing swelling in your calf, ankle and foot

Possible clot in the lung: call 911 now

- Sudden shortness of breath
- Sudden chest pain
- Chest pain in one spot that gets worse when you cough

NUMBERS TO CALL

SURGEON'S OFFICE _____

AFTER HOURS _____

PHYSICAL THERAPIST _____

Get the Home Ready

TICK EACH ONE BEFORE SURGERY DAY • WHAT HELPS IN THE FIRST WEEKS



BATHROOM

- ☐ Safety bars or a secure handrail in the shower or bath
- ☐ A raised toilet seat with arms, if the toilet is low
- ☐ A shower chair or tub bench
- ☐ A long-handled sponge and a hand-held shower head

STAIRS AND FLOORS

- ☐ Secure handrails along the stairs
- ☐ Loose rugs and cords taken up
- ☐ A night light from the bed to the bathroom
- ☐ A bed set up on the main floor, if stairs will be hard

SITTING AND REACHING

- ☐ A stable chair with arms and a firm back
- ☐ A footstool to raise the leg
- ☐ A reacher or grabber, and a sock aid
- ☐ Everyday things moved to between waist and shoulder height

GETTING AROUND

- ☐ Walker, crutches or cane ready, as your team advised
- ☐ A bag or basket that fits on the walker
- ☐ Someone to drive you, and to help for the first days
- ☐ Meals made ahead or delivered

My Details

FILL IN BEFORE YOU GO HOME FROM THE HOSPITAL



NAME _____

SURGERY (HIP OR KNEE, LEFT OR RIGHT) _____

SURGERY DATE _____

SURGEON & PHONE _____

AFTER-HOURS NUMBER _____

PHYSICAL THERAPIST & PHONE _____

BLOOD THINNER: NAME, DOSE, UNTIL WHEN _____

FOLLOW-UP APPOINTMENTS

DATE & TIME	WITH	QUESTIONS TO ASK

MY EXERCISES (FROM MY PHYSICAL THERAPIST)

EXERCISE	HOW MANY	HOW OFTEN

Daily Recovery Log

DAYS 1–14 AFTER SURGERY • PAGE 1 OF 3



DAY	DATE	PAIN 0–10	PAIN MEDICINE (TIMES)	EXERCISES AM / NOON / PM	WALKING FAR / LONG	WOUND OK?	SWELLING / NOTES
1				☐ ☐ ☐		☐	
2				☐ ☐ ☐		☐	
3				☐ ☐ ☐		☐	
4				☐ ☐ ☐		☐	
5				☐ ☐ ☐		☐	
6				☐ ☐ ☐		☐	
7				☐ ☐ ☐		☐	
8				☐ ☐ ☐		☐	
9				☐ ☐ ☐		☐	
10				☐ ☐ ☐		☐	
11				☐ ☐ ☐		☐	
12				☐ ☐ ☐		☐	
13				☐ ☐ ☐		☐	
14				☐ ☐ ☐		☐	

Wound OK = dry, no new redness, swelling or drainage. If not, see the Warning Signs page.

Daily Recovery Log

DAYS 15–28 AFTER SURGERY • PAGE 2 OF 3



DAY	DATE	PAIN 0–10	PAIN MEDICINE (TIMES)	EXERCISES AM / NOON / PM	WALKING FAR / LONG	WOUND OK?	SWELLING / NOTES
15				☐ ☐ ☐		☐	
16				☐ ☐ ☐		☐	
17				☐ ☐ ☐		☐	
18				☐ ☐ ☐		☐	
19				☐ ☐ ☐		☐	
20				☐ ☐ ☐		☐	
21				☐ ☐ ☐		☐	
22				☐ ☐ ☐		☐	
23				☐ ☐ ☐		☐	
24				☐ ☐ ☐		☐	
25				☐ ☐ ☐		☐	
26				☐ ☐ ☐		☐	
27				☐ ☐ ☐		☐	
28				☐ ☐ ☐		☐	

Wound OK = dry, no new redness, swelling or drainage. If not, see the Warning Signs page.

Daily Recovery Log

DAYS 29–42 AFTER SURGERY • PAGE 3 OF 3



DAY	DATE	PAIN 0–10	PAIN MEDICINE (TIMES)	EXERCISES AM / NOON / PM	WALKING FAR / LONG	WOUND OK?	SWELLING / NOTES
29				☐ ☐ ☐		☐	
30				☐ ☐ ☐		☐	
31				☐ ☐ ☐		☐	
32				☐ ☐ ☐		☐	
33				☐ ☐ ☐		☐	
34				☐ ☐ ☐		☐	
35				☐ ☐ ☐		☐	
36				☐ ☐ ☐		☐	
37				☐ ☐ ☐		☐	
38				☐ ☐ ☐		☐	
39				☐ ☐ ☐		☐	
40				☐ ☐ ☐		☐	
41				☐ ☐ ☐		☐	
42				☐ ☐ ☐		☐	

Wound OK = dry, no new redness, swelling or drainage. If not, see the Warning Signs page.