



KNEE

**(TOTAL KNEE OR
UNICOMPARTMENTAL
PROSTHESIS)**

Exercise Program,
Activity Restrictions
and Mobility

The following exercises are recommended both before and after surgery. However, they should not increase your pain level above **4 or 5 out of 10 on the pain intensity scale** (i.e., moderate pain). The pain should decrease within 45 minutes to 1 hour after completing the exercises.

You may take pain medication 45 minutes to 1 hour before exercising to help you perform the exercises more comfortably. All exercises should be performed 2 to 3 times a day, starting the day after your surgery, and continued until you begin your physiotherapy follow-up.

WALKING IS THE ESSENTIAL EXERCISE AFTER SURGERY

Walking is essential to maintaining and improving your breathing capacity, gait, knee mobility, and digestive function. It is recommended to walk several times a day, as tolerated, with a cane or a walker. Gradually increase the walking distance.

- Aim to walk without limping, taking steps of equal length.
- Use a walker, crutches, or a cane as recommended by your therapist.
- Use the cane on the side opposite to the operated leg.
- Walking without an aid can begin only once you no longer have a limp. The pain will subside quickly, but the limp may persist for a period of time.

PATELLAR (KNEECAP) MOBILIZATION

Two weeks after surgery, if you no longer have a dressing, staples, or sutures and your wound is fully closed, it is recommended to massage the scar and to move your patella (kneecap) to prevent adhesions. In addition, applying a vitamin E-based cream may help promote better wound healing.



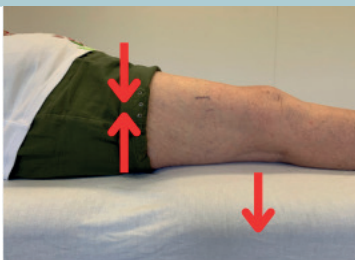
1. Massaging the wound

With your thumbs placed on each side of the wound, massage the scar in depth in every direction while bringing the edges of the wound together.



2. Mobilizing the patella (kneecap)

Fully extend your leg, and use your thumbs and index fingers to move the patella side to side and up and down.

Exercise 1: Quadriceps (thigh) contraction

Lie on your back, legs straight.

- Draw your toes toward you.
- Push the operated knee downward, as if to press down on the mattress. (Do not squeeze your buttocks.)
- Hold for 5 to 10 seconds, then release.
- Repeat 10 times.

Exercise 2A: Hip-knee flexion

Before beginning this exercise, make sure there is no discharge from the wound.



Lie on your back.

- Bend your knee as much as possible, keeping it aligned with your shoulder and hip.
- Hold for 5 to 10 seconds, then release.
- Repeat 10 times.

Tip: You can use a towel if needed to perform the movement.

Exercise 2B: Sitting position

Before beginning this exercise, make sure there is no discharge from the wound.



- Bend your knee as much as possible, keeping it aligned with your shoulder and hip.
- Hold for 5 to 10 seconds, then release.
- Repeat 10 times.

Tip: You can use the non-operated leg to slide the operated one.

Exercise 3: Quadriceps (thigh) strengthening



Lie on your back.

- Place a rolled towel under the operated leg.
- Raise your heel above the mattress until your leg is fully extended, while drawing your toes toward you.
- Hold for 5 to 10 seconds, then lower slowly.
- Repeat 10 times.



IMPORTANT : Your knee must remain in contact with the towel.

Exercise 4: Hip abduction



Lie on your back, legs straight.

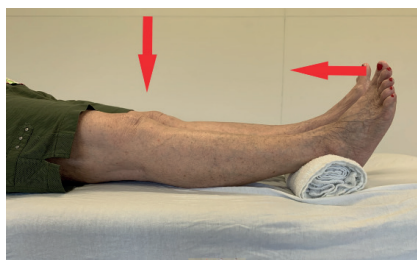
- Gently slide the operated leg outward along the mattress.
- Return to the starting position without bringing your knees together.
- Repeat 10 times.



IMPORTANT : Always point your toes toward the ceiling and keep your leg straight.

Tip: You can place a plastic bag under your leg if you find the movement difficult.

Exercise 5: Knee extension (supine)



Lie on your back, legs straight, with a support under your heel.

- Straighten your leg to bring the back of your knee as close to the mattress as possible.
 - Hold for 5 seconds, repeat 10 times
- or**
- Hold the position for 5 to 10 minutes.

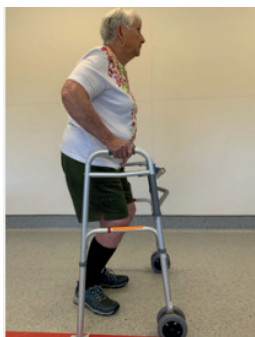
Exercise 6: Knee extension while sitting

Sit in a straight-backed chair.

- Draw your toes toward you and lift your foot as high as possible.
- Hold for 5 to 10 seconds, then release.
- Repeat 10 times.

Tip: If this exercise causes pain under your patella (kneecap), stop and speak to your therapist.

AFTER YOUR SURGERY, ONCE YOU FEEL COMFORTABLE AND
STEADY ON YOUR LEGS, YOU MAY ADD THE FOLLOWING EXERCISES.

Exercise 7: Half-squats

Stand with your hands resting on a walker or the edge of a table.

- Lean your body forward and bend your knees slightly as if to sit down.
- Hold for 5 seconds.
- Return to starting position while tightening your buttocks.
- Repeat 10 times.

Make sure you have a chair, bed, or armchair behind you.

REMINDER

Your pain level must not exceed 4 to 5 out of 10 on the pain intensity scale and should decrease within 45 minutes to an hour after completing the exercises. If the pain persists, apply some ice and reduce the intensity of your exercises during your next session.

Ice application

If the exercises increase your pain, you may apply ice for 20 minutes to help reduce pain and inflammation. A bag of frozen peas, ice cubes in a plastic bag, or soft gel packs (Ice Packs) are highly recommended. Do not use rigid Ice Pack blocks.

To avoid frostbite, never apply ice directly to your skin.

- If the wound is healed and there is no dressing or staples, place a damp towel between your skin and the ice to improve its effectiveness.
- Avoid using a towel that is too thick, so you can benefit from the cooling effect of the ice.
- Avoid moving around immediately after applying ice in order to prevent falls.

ACTIVITY RESTRICTIONS AND MOBILITY



Never place a cushion or pillow under your operated knee while lying down, except if otherwise directed by a health professional.



The kneeling position is rarely completely contraindicated, but it is usually uncomfortable after knee replacement surgery. If you have had patellar (kneecap) resurfacing, check with your surgeon as recommendations may vary.

CLIMBING STAIRS

When using stairs, make sure to hold the handrail on one side and use your cane on the other. If there is no handrail, keep using your cane on the side opposite the operated knee, as when walking.

IMPORTANT : Place both feet on the same step before continuing.

Tip to remember the technique:

“ Good leg to heaven, bad leg to hell. ”



Going up the stairs: Step up first with your non-operated leg, then bring your operated leg onto the same step. Repeat for each step.



Going down the stairs: Step down first with your operated leg, then bring your non-operated leg onto the same step. Repeat for each step.

4-6-12858 (FR) | 4-6-12859 (ENG)

August 2026

© Centre intégré universitaire de santé et de services sociaux
de l'Estrie – Centre hospitalier universitaire de Sherbrooke, 2026

santeestrie.qc.ca

*Centre intégré
universitaire de santé
et de services sociaux
de l'Estrie – Centre
hospitalier universitaire
de Sherbrooke*

Québec

