

Kneeling Conditioning After Knee Replacement

Patient and physical therapy conditioning protocol

Patient: _____ Surgery / procedure date: _____

This is the full Pacific Bone & Joint postoperative protocol. Patient-specific operative and discharge orders take precedence over this default pathway.

Kneeling is a skill that can be retrained

Many patients can kneel after total knee replacement, but numbness, pressure sensitivity, scar discomfort and fear can make the first attempts difficult. A gradual exposure program can improve kneeling ability. Begin only when the incision is completely healed and the surgeon has cleared kneeling - commonly around 12 weeks after an uncomplicated TKA.

Before starting: Requirement

Skin / incision: Completely closed and healed; no scab, drainage, redness or skin breakdown.

Surgical restrictions: No active restriction against kneeling, weight bearing or deep flexion. Do not use this protocol after a recent extensor-mechanism repair/reconstruction until specifically cleared.

Function: Safe floor transfer strategy or stable support available; adequate balance and upper-extremity strength.

Symptoms: No large effusion or acute pain flare.

Preparation

- Practice scar desensitization with gentle touch, massage around a healed incision and progressively firmer fabric or towel contact.
- Restore comfortable knee flexion and quadriceps strength. A kneeling pad can be used permanently if it makes work or recreation more comfortable.
- Use a stable surface to get down and up. Start with both knees supported rather than dropping directly onto the operated knee.

Five-week kneeling ladder

Week: Surface and dose

Week 1: Kneel on a couch or soft bed surface for 5-10 minutes daily.

Week 2: Kneel on a thick couch cushion placed on the floor for 5-10 minutes daily.

Week 3: Kneel on a thin pillow, foam pad or thick carpet for 5-10 minutes daily.

Week 4: Kneel on a thin carpet or rug for 5-10 minutes daily.

Week 5: Progress to a firm floor or outdoor ground. Use a thin pad initially if needed.

How to progress

- Mild pressure, altered sensation or numbness over the front of the knee can be expected. The goal is gradual tolerance, not forcing pain.

- If discomfort is substantial, return to the prior softer surface for several days before trying again.
- Progress surface firmness before adding long duration. Five to ten minutes is enough to train tolerance for most daily tasks.
- For gardening, prayer, trades or floor work, practice the exact position and floor-transfer pattern once basic kneeling is comfortable.

Optional variations

- Tall kneeling on both knees, then controlled weight shifts.
- Half-kneeling with the operated knee either down or up depending comfort and the task.
- Use a permanent kneeling pad for occupational tasks; successful kneeling does not require tolerating a hard surface without padding.

Safety, expectations and maintenance

What is normal

Anterior knee numbness, pressure awareness and mild scar sensitivity can persist even when the implant and knee are functioning well. In a healed, stable knee replacement there is no routine implant-based prohibition against kneeling; comfort and skin tolerance are usually the limiting factors.

Stop and seek review for

- Skin breakdown, wound drainage, spreading redness or marked swelling after kneeling.
- A new painful pop, instability, sudden loss of motion or inability to bear weight.
- Pain that continues to increase rather than settling after returning to a softer surface.
- Any patient with a recent patellar tendon, quadriceps tendon or extensor mechanism reconstruction who has not been explicitly cleared.

Maintenance

Once comfortable, practice kneeling several times each week for the activities that matter to the patient. Continued quadriceps, hip and ankle strengthening makes floor transfers easier and reduces the need to place all body weight through the front of the knee.

Clinical references: Wallace and Berger. J Arthroplasty. 2019;34:898-900, Most Patients Can Kneel After Total Knee Arthroplasty. Wylde et al. EFORT Open Rev. 2019;4:460-467, Kneeling ability after total knee replacement.