**Appendix 1.** Measurements

Patient name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_ Time:\_\_\_\_\_\_\_\_\_\_

Preop / POD1 / POD2 / POD 28

Right knee:

Thigh circumference:\_\_\_\_\_\_\_\_\_\_

Knee circumference:\_\_\_\_\_\_\_\_\_\_

Shin circumference:\_\_\_\_\_\_\_\_\_\_\_

Range of motion

Flexion:\_\_\_\_\_\_\_\_\_\_

Extension:\_\_\_\_\_\_\_\_\_\_

Left knee:

Thigh circumference:\_\_\_\_\_\_\_\_\_\_

Knee circumference:\_\_\_\_\_\_\_\_\_\_

Shin circumference:\_\_\_\_\_\_\_\_\_\_\_

Range of motion

Flexion:\_\_\_\_\_\_\_\_\_\_

Extension:\_\_\_\_\_\_\_\_\_\_

Name of evaluating person:\_\_\_\_\_\_\_\_\_\_\_