

Post Op Instructions: Knee Arthroscopy

OMAR RAHMAN, MD, MBA
Orthopedic Surgeon | Sports Medicine
ARTHROSCOPIC SURGERY | JOINT RECONSTRUCTION



PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION IF NECESSARY - DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE SURGERY CENTER OR VIA PHONE/EMAIL TO OUR STAFF AFTER ARRIVING HOME

WOUND CARE

- Loosen bandage if swelling or progressive numbness occurs in the extremity.
- It is normal for the joint to bleed and swell following surgery — if blood soaks onto the ACE bandage, simply reinforce with additional gauze dressing for the remainder of the day and re-check. The ACE bandage can be laundered in a normal fashion and reused.
- Remove the ACE bandage and gauze 48 hours after surgery. Leave SteriStrips (clear Band-Aids) on. It is optional to replace the gauze and re-wrap the ACE bandage.
- 48 hours after surgery it is ok to shower. Please keep SteriStrips on when showering. It is OK if they fall off in the shower but do not rub the incision site.

MEDICATIONS

- You can begin the prescription pain medication provided to you upon arriving home and continue every 4-6 hours as needed for pain.
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per the directions on the bottle.
- Common side effects of the pain medication are nausea, drowsiness, and constipation – to decrease the side effects, take medication with food – if constipation occurs, consider taking an over-the-counter laxative such as Dulcolax or Colace.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed (1-800-974-5633)
- Do not drive a car or operate machinery while taking narcotic medication.
- Ibuprofen 200-600mg (i.e. Advil) may be taken in between the narcotic pain medication to help smooth out the post-operative 'peaks and valleys', reduce the overall amount of pain medication required, and increase the time intervals between narcotic pain medication usage.

ICE THERAPY

- Beginning immediately following surgery, use the ice machine (when prescribed as directed for the first 2-3 days following surgery. Ice at your discretion thereafter.
- When using "real" ice, avoid direct skin contact > 20 mins to prevent damage/frostbite of the skin. Check the skin frequently for excessive redness, blistering, or other signs of frostbite. When using the ice machine, it is okay to ice continuously as long as you check the skin frequently.

ACTIVITY

- Elevate the operative leg to chest level whenever possible to decrease swelling.
- Do not place pillows under knees (i.e. do not maintain knee in a flexed or bent position), but rather place pillows under foot/ankle.
- You can walk and bend your knee as much as tolerated. Use your crutches for the first week. Do not go for long walks or stand on your feet for extended periods of time. This will cause swelling and pain.
- Do not engage in activities which increase knee pain/swelling (prolonged periods of standing or walking) over the first 7-10 days following surgery.
- NO driving until off narcotic pain medication.
- Air travel is permitted 14 days after surgery. Air travel and immobility increase the risk of blood clots. Unless you have

been previously instructed to avoid aspirin products for medical reasons, or if you are under age 16, ensure that you are taking 81 mg baby aspirin twice daily beginning the day after surgery to minimize the risk of blood clot.

EXERCISE

- Knee stiffness and discomfort is normal following surgery. It is safe and preferable to bend your knee up to 90° while lying or sitting (unless instructed otherwise).
- Begin exercises 3x daily beginning the day after surgery (quad sets, straight leg raises, calf pumps, and leg hangs) unless otherwise instructed. See attached pictures of exercises on the last page for reference. If the exercises cause pain, stop, and try again later in the day.
- Do calf pumps (15-20) at regular intervals throughout the day to reduce the possibility of a blood clot in your calf.

DIET

- Begin with clear liquids and light foods (Jello, soup, etc.).
- Progress to your normal diet as tolerated.

APPOINTMENT

- Your postoperative appointment will be made prior to surgery. You will receive a reminder from the office prior to the visit. This will be 10-14 days after surgery at your surgeon's office.

****EMERGENCIES****

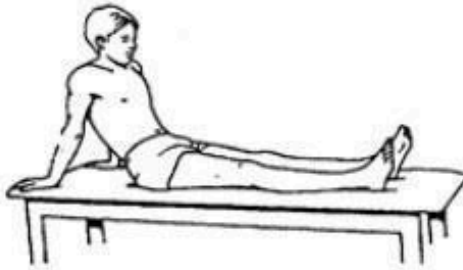
Contact the practice hotline at 1-800-974-5633 if any of the following are present:

- Unrelenting pain, despite taking medications as prescribed.
- Fever (over 101°). It is normal to have a low-grade fever following surgery.
- Continuous drainage or bleeding from incisions (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting uncontrolled

DO NOT CALL THE HOSPITAL OR SURGICENTER FOR EMERGENCIES IF YOU HAVE A NEED THAT REQUIRES IMMEDIATE ATTENTION, PROCEED TO THE NEAREST EMERGENCY ROOM

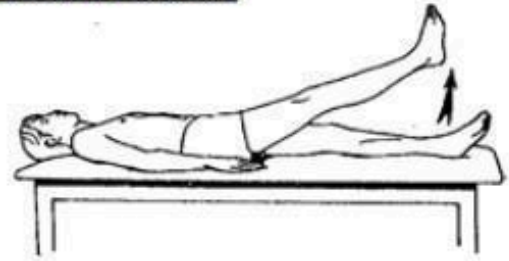
KNEE POST OPERATIVE EXERCISES

QUAD SETS



Tighten muscles on top of thigh by pushing knee down to floor or table.
Hold 1-2 seconds. Repeat 10-15 times
Do 3 sessions per day.

STRAIGHT LEG RAISE



Tighten muscle on front of thigh then lift leg 8-10 inches from floor keeping knee locked.
Hold 1-2 seconds. Repeat 10-15 times
Do 3 sessions per day.

CALF PUMPS



Relax leg. Gently bend and straighten ankle. Move through full range of motion. Avoid pain.
Hold 1-2 seconds. Repeat 10-15 times
Do 3 sessions per day

LEG HANGSWITH GRAVITY



Allow leg to hang w/ gravity and bend as tolerated for 60-90 seconds

Do 3x per day