Pierre Bruneau, MD Post Operative Instructions Knee Arthroscopy

General Information:The operation was performed through two or three small incisions about the knee. You may experience some swelling in the joint. This is usually due to a combination of fluid used during the surgery for visualization and bleeding. This fluid will usually be reabsorbed by your body over time. You may have some bruising in the operated leg as well. This may travel down the leg with gravity over the course of 1-2 weeks.

You may experience some nausea after your surgery, especially if you had general anesthesia. This is a normal response for some people following surgery. It usually subsides within 24 hours after surgery. Eating bland foods and sips of fluids often is helpful.

After receiving spinal/epidural anesthesia you may encounter severe headaches. These rarely occur, but if you experience this, call the office immediately should they persist.

Dressing: The dressing will consist of yellow xeroform gauze covered by plain gauze and an absorbable pad held in place by an elastic compressive stocking. You should keep the stocking in place for 72 hours (3 days) after surgery. The dressing should stay dry during this period. After 72 hours you may remove the stocking, absorbable pad, white gauze and yellow gauze and take a shower. It is OK to let water run over your wounds, but don't submerge them under water. Afterwards, you may pat the wounds dry and either leave them open to the air or cover them with a band-aid if the sutures / incisions are sensitive. Your stitches will be removed at your first visit after surgery if they are bothering you. They are absorbable sutures and will eventually fall off around the 4-6 week mark after surgery. Please do not bathe, swim or submerge the wounds for the first 6 weeks after surgery.

Ice Therapy: You may place a large bag of ice or frozen vegetables (for example, peas) or Cryotherapy Unit to better conform to the knee. Keep this on for 20-30 minutes at a time each hour. You may use the ice as frequently as you wish and for as many days after your surgery as long as you have swelling and pain. In general, use at this frequency as long as it is effective.

Activity: Crutches or a cane may be necessary during the first 24-48 hours or longer. You may continue using them until you are able to walk comfortably without support. You may ambulate immediately and put as much weight as is comfortable on the operated leg unless you are told otherwise.

When resting, try to keep your knee as straight as possible. Do not place pillows beneath your knee keeping it resting in a bent position, but rather place pillows such that the leg is elevated in a straight position. A bent knee gets stiff and it becomes more difficult to move and straighten. If anything, keep a small towel beneath your heel to keep your knee

straight.

Pain Medication: It is normal to have some pain after surgery. Pain medications have been prescribed and enough pain pills have been given to cover you beyond your next office visit. DO NOT drink alcohol while taking prescribed pain medication. It is dangerous and illegal to drive while taking narcotic pain medicine. If you need a refill on pain medication before your first scheduled appointment, please call our office during regular office hours.

As you get further out from surgery (1-3 days), you may try to wean yourself off of the pain medication to avoid the side effects of taking narcotics. I suggest that you try decreasing the amount of pain medication or increase the interval between doses during the day.

You may start taking over the counter anti-inflammatory medication such as ibuprofen (Advil / Motrin) or naproxen (Aleve), provided that your stomach can handle this and there is no contraindication from your primary physician.

Additionally, you can add acetaminophen (Tylenol) and take between 3000-4000mg per day. Please be aware that your pain medication may already have Tylenol in it and you would need to subtract this from your total daily dose of Tylenol.

Blood Clots: You may be prescribed medication to lower your risk of forming blood clots. This medication is important to take until the prescription is finished. In addition, being active and performing your exercises properly can minimize your risk of developing a blood clot.

If you have never had a blood clot before and don't have an allergy to aspirin, then you will most likely be placed on one baby aspirin (81mg) twice per day for 3 weeks.

Work: You will discuss when you can return to work with your surgeon on your first post-operative visit.

Driving: You may drive when you have good control over the operative leg and are no longer on pain medicine. This may take longer if you underwent right knee arthroscopy or if you drive a manual transmission.

Follow-up: Your follow-up visit will be 10-14 days after surgery. Please call the office to confirm.

Home Exercises: Formal physical therapy is not often required or necessary after routine knee arthroscopy. Please perform the following home therapy exercise until your first follow up appointment. At that point in time if you are slow to recover, we may provide you with a formal physical therapy prescription.

Quad Sets: Tighten thigh muscle and press the back of your knee into the bed. Hold for 5 seconds and perform 10 repetitions 5 times per day.



Hamstring Stretch: Sit with leg straight. Place towel around the top of your foot and pull foot toward you. Lean your trunk forward so you can feel a stretch in the back of your thigh. Perform for 30 seconds 3-4 repetitions per day.



Calf Stretch: Stand facing the wall. Place your operated leg behind the nonoperated leg. Bend your front leg and lunge forward toward the wall. Keep your back heel on the floor and back knee straight so you feel a stretch in your calf. Place your hands on the wall for support. Perform for 30 seconds 3-4 repetitions per day.



Seated Knee Flexion: Sit on a secure chair. With the assistance of you hands, slide your heel back and bend your knee. Hold for 10 seconds, then slide foot forward while keeping it on the floor. Perform 10 repetitions 3 times per day.



Straight Leg Raise: Keep your operated leg straight and your non-operated leg bent. Tighten the top of your thigh on the straightened leg and raise it to the height of the opposite knee. Hold for 2-3 seconds and perform 10 repetitions 3 times per day.

