



NEW HAMPSHIRE KNEE CENTER AT THE ALPINE CLINIC



KNEE SURGERY POST-OPERATIVE INSTRUCTIONS

(for arthroscopy, ligament reconstruction, and meniscal repair)

I. ACTIVITY LEVEL

- A. Maintain active rest with elevation of the operated knee **above the level of the heart**, except when doing your exercises. This is basically your position for the first week after surgery. After the first week we want you to take advantage of any opportunity for elevation, especially at work or school.
- B. **Apply ice packs to your knee 6 to 8 times per day** for the first week post-op. Gel packs, frozen bags of peas or corn work well and mold easily. These vegetables can then be refrozen and used again for therapy only. If you have the blue Cryo Cuff, continue to use this iced water exchange frequently in this first week.
- C. Begin walking with crutches (see handout in your pre-op folder). Weight bearing **as pain allows** for routine arthroscopy and ACL reconstruction is permitted unless advised otherwise. For meniscal repair and microfracture procedures, 10 lbs. touch down weight bearing is permitted initially. Try to walk normally even when putting some weight on the crutches. DO NOT use only one crutch as this develops poor posture and incorrect gait habits.
- D. Use crutches until you can walk **without pain or a limp**.
- E. **ONLY WALKING IS PERMITTED UNTIL FURTHER NOTICE.** No kneeling, jumping, squatting or running allowed. Walking for some easy exercise is fine and will help you feel better, get your heart pumping and blood circulating to stimulate the healing process. If conditions are slippery outside, a protected and safe place for walking, such as an indoor gym, is advised.
- F. Do not return to work, P.E. class or athletics until your initial post-operative evaluation, unless previously cleared by Dr. O'Neill.
- G. The range of motion exercises found in your pre-op folder should be done 3-5 times daily. Those patients provided with a CPM machine should use this machine at least 8 hours in a 24 hour period.

II. MEDICATION

- A. A prescription for a narcotic (e.g. Vicodin) may be given to you prior to discharge. Take this medicine **only as needed**, and prescribed. Narcotic medicines may make you drowsy and/or dizzy, therefore driving a car or operating machinery is **NOT ALLOWED UNDER ANY CIRCUMSTANCES**. Generally you will not need narcotic medication for more than 24 hours after you get home. Taking a full dose of Aleve or Advil allows you to stop the narcotic sooner and will aid you in your recovery. Anti-inflammatories such as Aleve and Advil work at different receptors than the narcotics and thus can be taken in conjunction with a narcotic medicine.

NOTE: Consider filling your prescriptions on your way home from the hospital OR have a friend or family member fill it before leaving in order to have your medications available when first settling in on your post-operative course at home. **Always take these medications with food and plenty of fluids.** If there is any stomach upset or other undesired effects from the medicine prescribed, **DISCONTINUE IMMEDIATELY.** You may substitute *Tylenol, Advil, Motrin, Aleve* or other pain medicines if they have worked for you in the past.

III. CARE of INCISION

- A. Do not disrupt the "steri-strips" (1/2" adhesives across the incisions). If gauze becomes soiled with drainage (some oozing is normal), you may replace it with a sterile gauze (available at the local drug store). After washing your hands thoroughly, pull down the stocking and remove the gauze that comes off easily. Dab everything with an alcohol soaked papertowel. Do not disturb the steri-strip adhesives across the incisions. Put a light layer of gauze over the staples, stitches, or steri-strips making sure to only touch the corners of the gauze with your fingers. Pull the stocking back up or replace it with the clean stocking from your other leg. Keep using the stocking until your first post-op visit.
- B. **Keep the incision clean and dry after surgery.** Showering is permitted, keeping the affected area dry by wrapping the knee with a plastic bag or saran wrap. **NO baths, swimming or hot tubs until the incision is completely healed, (about 2 weeks).** Routine showering may be resumed after first post-operative visit for an arthroscopy, 2 weeks for ACL patients and other surgeries with removable skin stitches or staples unless advised otherwise by Dr. O'Neill. Steri-strips will soak off gradually with showering. When in the shower, have an old chair or stool to sit on to prevent slips or falls.
- C. Once skin edges are healed together, scars can be massaged with a vitamin E cream. Be sure scars are kept covered with clothing or sunscreen when out in sunlight to minimize discoloration for at least the first year after surgery.

IV. NEUROVASCULAR (nerve and blood supply) ASSESSMENT

- A. As mentioned previously, you will have a compression dressing over the operated knee following surgery. This is comprised of a white elastic stocking, holding the dressings in place. Please continue to wear this until your post-op appointment, unless it feels terribly tight. For ACL reconstruction, a blue Cryo Cuff will be provided. Follow the instructions for it's use in the ACL book. It should be snug, not tight.
- B. Some numbness around the incisions is normal during healing. Should you experience numbness below the knee in the operated extremity, loosen anything that you think might be inhibiting blood supply to your leg. If numbness continues or the ability to flex and extend the ankle is impaired, **contact the office immediately.**
- C. Please report any of the following to Dr. O'Neill's office as they may be a sign of infection:
 - 1. Spreading redness around the wound.
 - 2. Increasing pain.
 - 3. Unusual swelling.
 - 4. Excessive fluid, pus, or odor from the wound.
 - 5. Fever of 101.0 or higher.

V. EXERCISES

- A. Day surgery patients should continue with the exercises that were introduced before your surgery (ROM & Phase I knee exercises). Do not hesitate to ask for copies or visit our website for additional information. For ACL reconstructions you will follow along in your ACL books. If you are confused about any exercises, just ask!

NOTE: Should you have any questions, or experience any problems regarding any of the above, contact our office. If Dr. O'Neill is not on call at the time, one of his associates will be available to receive your call. You are not bothering us by calling and there is no such thing as a stupid question.