

Riverview Health Orthopedics and Sports Medicine

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POSTOPERATIVE INSTRUCTIONS
KNEE ARTHROSCOPY
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YOUR POSTOPERATIVE APPOINTMENT

_____/_____/_____ AT _____

WEIGHT BEARING STATUS

- _____ Full Weight Bearing - wean off crutches when you are comfortable to do so
- _____ Full Weight Bearing - wean off crutches when therapist determines adequate quad function with no limp
- _____ Full Weight Bearing - brace locked in extension
- _____ Toe-Touch Weight Bearing - partial body weight with crutches for _____ weeks
- _____ Non Weight Bearing - no weight bearing at all, use crutches for _____ weeks

BRACE STATUS

- Hinge Brace: _____ YES _____ NO
- Instructions for brace use: _____ Locked in extension for 6-8 weeks
- _____ With Weight Bearing and while sleeping

CPM (Continuous passive motion)

- CPM machine: _____ YES _____ NO Start at _____ degrees
- Instructions for CPM use: 8 hours per day for 6-8 weeks

If you have been told you will be getting a CPM machine, you will be contacted in the next 1-2 days to have a home delivery arranged. A CPM machine is used to continuously cycle the knee to assist in regaining range of motion. We use this device for cartilage procedures to enrich the healing environment in the knee. Due to its role in stimulating healing, it is important to use the CPM the entire 6-8 weeks for 8 hours per day, even after you have achieved your range of motion goals.

WOUND CARE

- You may remove the dressing after 3 days and then shower
- No bathing, hot tubs, or water immersion until at least 2 weeks after surgery
- Do not remove your sutures--they will be removed in the clinic at the appropriate time
- If indicated, you may receive a prescription for an antibiotic the day of surgery to help prevent infection--take as directed

PAIN MANAGEMENT

- You will receive a prescription for pain medication upon discharge--take as directed
- Common side effects are nausea, drowsiness, and constipation. Consider taking the medication with food. Try an over the counter laxative for constipation if necessary
- Do not operate a motor vehicle or heavy machinery while on narcotic pain medication
- You may take ibuprofen or aleve with the pain medication if you are allowed to take NSAIDs
- When taking your pain medication to not consume alcohol, tylenol products, or any other pain meds

PHYSICAL THERAPY

- Therapy usually begins immediately after surgery. You should have been given instructions to arrange this ahead of time at a location convenient to you. If you have not made an appointment already, please do this as soon as possible
- If you go to a therapist outside the Riverview Health System, you must bring your physical therapy prescription to your appointment or the therapist will not be able to treat you
- If you are not doing PT at a Riverview facility, please have your therapist contact our office (317-770-3777) for a protocol.
- Stiffness and discomfort are common after surgery. Try to continue your exercises as they are important for recovery and may help your symptoms.

TED HOSE

- If indicated, you may have received TED hose stockings the day of surgery. These are used to improve circulation and help prevent blood clots. If this applies to you, you will begin wearing one stocking on your non-operative leg in the preop area. Add the other stocking to your operative leg after you have removed the dressings on the third day. Wear at all times except bathing. Take care that they are worn smoothly and are not bunching up behind your knee or thigh. They can be laundered in cold water and mild detergent, 15-20 minutes on low heat or air to dry. These will typically be worn for a period of 2-6 weeks depending on your doctor's instructions.

BLOOD CLOT (DVT) PREVENTION

- You will either be on aspirin (81 mg twice daily) or another anticoagulant for blood clot prevention. This will be started while you are in the hospital
- This medication will be continued for 6 weeks after surgery

OTHER IMPORTANT INSTRUCTIONS

- NEVER PLACE A PILLOW UNDER YOUR KNEE FOR EXTENDED PERIODS OF TIME, ESPECIALLY FOR SLEEPING AT NIGHT--IT WILL MAKE GETTING YOUR FULL EXTENSION BACK VERY DIFFICULT AND MORE PAINFUL
- You may prop something under your ankle to help with extension
- Use your crutches as directed paying close attention to your prescribed weight bearing status
- Try to keep your leg elevated and ice consistently--this will help some with pain and swelling
- Avoid long periods of sitting, bed rest, or travel for the first two weeks after surgery as this can contribute to developing blood clots
- Do not drive until cleared by your physician
- The effects of anesthesia may linger after your surgery and can cause drowsiness, nausea, and vomiting

PRECAUTIONS

- After anesthesia, rest for 24 hours. General anesthesia may cause a sore throat, jaw discomfort or muscle aches. These symptoms can last for one or two days. **Do not drive, drink alcoholic beverages or make any important or legal decisions during this time.**
- Keep your first few meals after surgery light and drink plenty of fluids, and some people are nauseous after surgery.
- **Smoking increases your risk of infection and can delay healing times. If you smoke, you are encouraged to quit, cut back or at least quit smoking during the post-operative period.**
- Pain medications are important for the first few days after surgery to treat postoperative pain. Addiction, tolerance, and side effects are a big concern. Decrease the pain medications as soon as you can. This is typically after the first few days. Most patients require narcotic pain medications only for the first few weeks after surgery (even large procedures). Prolonged use increases the risk of problems with these medications.

MOST COMMON POST-OPERATIVE CONCERNS

- **Pain** - It is important to start your pain medication as soon as you can after surgery, even if you are not experiencing any pain. If you receive a block and when the block wears off, there can be a heightened sense of pain. If this occurs, understand that this can be normal. You may also add in Advil (ibuprofen) or Tylenol (acetaminophen) for added pain relief.
- **Swelling** - Due to surgery, fluid may build up in your knee. Due to gravity the swelling may move to your foot. This is normal. Your body will naturally reabsorb the fluid over the first 1-2 weeks after surgery.
- **Nausea** - The pain medication can cause nausea/vomiting. It is suggested to take pain medication with food. We will also prescribe anti-nausea medication (ondansetron/promethazine). It is recommended to take this before taking pain medication
- **Constipation** - Pain medication can also cause constipation. We also prescribed constipation medication (docusate). It is recommended to take this medication, and plenty of water, the first few days after surgery until you have your first few bowel movements. If you have not had a bowel movement within 5 days after surgery, you can pick up over the counter Milk of Magnesia at any pharmacy. Make sure you stay hydrated.
- **Sleeping** - Due to the pain, lack of sleep is a very common concern after knee replacement. We also suggest scheduling your pain medication so that you are taking it before bed if possible. The pain medication may cause you to be drowsy. We also suggest taking tylenol PM, Advil PM, or melatonin to assist with sleep.
- **Spasms** - Due to surgery, you may experience muscle spasms or cramps around your knee. This is completely normal. If this happens, we suggest using a heating pad around these muscles for 20 minutes every hour when the cramping occurs. This will help relax the muscle.
- **Numbness/Tingling** - Due to swelling, you may notice some numbness and or tingling in your knee on the surgical side. This is normal and should decrease over time. If it fails to improve, please let us know
- **Driving** - We do not recommend driving immediately after surgery. IF YOU ABSOLUTELY HAVE TO, then you can not be taking narcotics, you cannot drive a manual shift car, and you have to be able to safely operate your vehicle.

NOTIFY THE OFFICE IMMEDIATELY, 317-770-3777, IF YOU DEVELOP ANY OF THE FOLLOWING:

- Increased redness or swelling over the incision area
- Incision area is warm or hot to touch
- Incision has foul smelling drainage
- Relentless pain, nausea, vomiting, bleeding or drainage
- Severe calf pain or chest pain
- You develop a fever greater than 101.4 more than 48 hours after surgery

If you are having an emergency that requires immediate attention go to the nearest emergency room or call 911.

Please contact the office with any other questions or concerns that you may have regarding your surgery at 317-770-3777