



FORT WORTH ORTHOPEDICS

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Postoperative Instructions for Outpatient Knee Surgery

Your Surgery Included:

Arthroscopic

- Diagnostic
- Synovectomy / Plica Removal
- Lysis of Adhesions / Anterior Interval Release
- Meniscectomy
- Meniscal Cartilage Repair
- Debridement / Chondroplasty
- Articular Cartilage Repair
 - Microfracture
 - OATS
- Ligament Reconstruction
 - ACL
 - PCL

Open

- Ligament Repair
 - ACL
 - PCL
 - MCL
 - PLLC
- Meniscal Cartilage Repair / Transplantation
- Articular Cartilage Repair
 - Microfracture
 - OATS
 - ACI
- Patella Realignment
 - Lateral Release
 - Ligament Repair
 - Realignment
- Tendon Repair
 - Patella
 - Quadriceps

1. **Explanation:** Knee surgery is commonly done in an outpatient setting allowing you to have surgery and return home both safely and comfortably the same day. On occasion, a patient will have nausea or pain which is severe enough to require overnight hospitalization.

2. **Pain Management:** A cold therapy cuff, pain medications, local injections, and in some cases, regional anesthesia injections are used to manage your post-operative pain. The decision to use each of these options is based on their risks and benefits.

Cold Therapy: You may have been sent home with a cold wrap for your knee. This wrap will help relieve pain and control swelling. Use the wrap throughout the day for the first two days and then as needed.

Regional Anesthesia Injections: You may have been given a regional nerve block either before or after surgery. This may make your leg or knee numb for 24-36 hours.

3. **Medications:** You were given one or more of the following medication prescriptions before leaving the hospital. Have the prescriptions filled at a pharmacy on your way home and follow the instructions on the bottles. If you need a refill on your medication, please call your pharmacy.

Narcotic Medication (usually Norco or Tylenol # 3): Begin taking the narcotic medication before your knee begins to hurt. Some patients do not like to take any medication, but if you wait until your pain is severe before you take the narcotic medication, you will be very uncomfortable for several hours waiting for the narcotic to work. Always take the narcotic medication with food.

Phenergan: If you have nausea at home, use this medication as directed.

Antibiotic (Keflex or Cleocin): Depending on the procedure, you may have been sent home with a two-day course of an antibiotic. Take as directed.

4. **Diet:** Eat a bland diet for the first day after surgery.

5. **Activity:** Limit your activity during the first 24 - 48 hours, keeping your leg elevated with pillows under your heel. After the first 24 - 48 hours at home, increase your activity level based on your symptoms.

6. **Dressing Change:** Remove the dressing on the 1st or 2nd day. It is normal for some blood to be seen on the dressings. It is also normal for you to see apparent bruising on the skin around your knee when you remove the dressing. If present, leave the steri-strip tape across the incisions. If you are concerned by the drainage or the appearance of your knee, please call the office.

7. **Showering:** You may shower on the day after surgery, but please keep the wound dry and clean. Do not let the wound soak in water until sutures are removed. If a brace or splint is applied, wrap in a plastic bag to bathe.

8. **Knee Brace:** You may have been sent home in a knee brace. Your brace is set at _____ to _____ degrees of motion. Wear the brace for 2 weeks.

9. **CPM Device:** You may have been sent home with a Continuous Passive Motion (CPM) machine. This device helps relieve pain, improve motion, and heal cartilage. Use the machine for 2 weeks (Settings: Extension _____, Flexion _____.) Try to use at night if able. Use _____ hours per day. Call the phone number on the device for return instructions.

10. **Weight Bearing:** You may have been sent home with crutches. Unless otherwise instructed (see below), you may walk with ALL of your weight on the operated leg as tolerated.
 - Non-weight bearing for 2 weeks (you may touch your toes to the floor)
 - Partial weight bearing for 2 weeks
 - Full weight bearing after 2 weeks

11. **Physical Therapy:** Physical therapy is an essential component to your recovery from surgery. Unless other instructions are given, you will begin physical therapy on the day after surgery. Mary will coordinate your first appointment. We will work together with the physical therapist to help ensure the best possible outcome.

Your first post-operative visit will be 10-14 days after surgery. If you have any problems, please contact the office at (817) 433-3450 opt # 4.