

# Knee Arthroscopy Post-Surgical Instructions

## Pain Medications:

1. Take with food and water.
2. Prevent nausea/vomiting – start with light food/water.
3. Nerve blocks – if you received a nerve block, start your pain medications BEFORE the nerve block wears off.
4. Anti-inflammatories (NSAIDS) (if not allergic):
  - a. Ibuprofen: take 1 tablet (800mg) every 8 hours as needed for 7-14 days.
  - b. If allergic to NSAIDS - discuss with Dr. Hommen.
5. Pain medications:
  - a. Percocet (Oxycodone/Acetaminophen), Norco or Vicodin (Hydrocodone/Acetaminophen), Ultram (Tramadol): take one or two tablets every 4-6 hours as needed for pain.
  - b. If allergic to the above - discuss with Dr. Hommen.
  - c. Florida State laws limit the number of narcotic pills you will be given.
  - d. Section 893.055(3)(a), Florida Statutes mandates that Dr. Hommen reviews and reports your controlled substance prescription to E-Force Florida Prescription Drug Monitoring Program.
  - e. Possible side effects of narcotics: addiction, constipation, nausea, over-dose, disorientation, hallucination, liver and other organ problems.
  - f. Try to discontinue narcotic medications (Percocet, Norco, Tramadol) as soon as possible.
  - g. Therapy sessions – if you are having pain with therapy, coordinate your medications prior to the session.
  - h. Many patients after 24-48 hours from surgery are able to control all pain with a combination of 1) Tylenol extra strength (use as directed on bottle) AND/OR 2) over-the-counter Aleve or Advil (use as directed on the bottle).
  - i. Pain management – a) if you are taking narcotics prior to surgery, b) under the care of a pain management specialist or other doctors for pain medications – Dr. Hommen will need to coordinate your pain medications with your other providers.

- ***Note – should you experience stomach problems or if your body is not tolerating any of the medications above, STOP the medications. You may discontinue the above medications as you see fit and refer to over-the-counter medications like “Advil”, “Aleve”, or “Tylenol”.***

## Aspirin/Blood Clot Prevention:

1. You are recommended to start Aspirin 325mg (enteric coated) tonight (same day as surgery).
2. Take one tablet every night for next 3 weeks (21 days).
3. Do not take if allergic to aspirin (acetylsalicylic acid) or anti-inflammatories.
4. If you have a history of blood clots or have a significant risk factor for blood clots, you may be prescribed a stronger blood thinner after surgery.
5. Calf squeezes. You may do calf squeezes by bending your ankle up and down 5 sessions per day. Do 20 squeezes per sessions. Purpose: to avoid stiffness, swelling and blood clots in the lower extremity.

## Activity and Wound Care:

1. Rest of day of surgery through 72 hours after surgery.
2. Cryo-cuff or ice machine: (insurance permitting). Use for first 72 hours for maximum benefit. Remove cuff or wrap from the surgical site every 20-30 minutes per hour to allow skin to warm to avoid ice burn to the skin.

3. Ice packs – consider the use of a gel pack if no ice machine was authorized. You should benefit from similar affects. Use same instructions as above.
4. Bandages:
  - a. Keep your incision sites and sutures clean and dry.
  - b. Remove outer bulky dressing and gauze 72 hours after surgery.
  - c. Leave steri-strips (butterfly stitches) in place to be removed by Dr. Hommen’s office.
  - d. Open to air – if your incisions are clean, dry and intact without drainage, then you may leave the incisions with steri-strips in place open to air throughout the day and night.
  - e. Ace wrap – you may re-apply the wrap for compression of the wound site.
  - f. Ace wrap – you may re-apply the wrap for compression of the wound site.
  - g. Shower – after having removed the dressings, you may shower 72 hours after surgery. Do not scrub the incision sites. Allow shampoo to run over incision. After shower, towel dry the incisions. Leave the steri-strips in place. No need to apply further dressings or band-aids.
  - h. If incision sites are moist, draining, red, or painful, do not wet the incision sites and contact Dr. Hommen’s office.
  - i. Pool/Bath – do not submerge your incisions in pool or bath until Dr. Hommen clears you to do so.
  - j. Your incisions may have Dermabond (similar to Krazy-Glue). Allow the sutures underneath to absorb on their own.
  - k. Your incisions may have sutures that need to be removed 10-14 days after surgery in Dr. Hommen’s office.

### **Knee Immobilizer Brace Use:**

1. Length of use depends on the procedure you had done.
  - a. Anterior cruciate ligament reconstruction without meniscus repair (usually 3-4 weeks).
  - b. Anterior cruciate ligament reconstruction and/or meniscus repair (usually 6 weeks).
  - c. Cartilage chondrocyte transplantation (usually 6 weeks).
  - d. Meniscus transplantation (usually 6 weeks).
  - e. Patella realignment (usually 6-8 weeks)
  - f. Patella tendon or quadriceps tendon repairs (usually 6-9 weeks).
  - g. Debridement, meniscectomy – no brace needed.
  - h. You will be notified how long to wear your sling after your specific surgical procedure
2. When your brace is off:
  - a. Avoid weight bearing, twisting, turning on the foot.
  - b. Avoid bending knee past the recommended angle – usually 90 degrees.
  - c. Home exercises – you may do seated straight leg raises to encourage thigh and hip muscle activation.
3. Hinging brace:
  - a. Usually started 7-14 days after surgery to allow muscle activation/prevent atrophy.
  - b. Done by opening the hinges on the side of the immobilizer brace.
  - c. Usually for ambulation/daytime use only. Keep brace locked in full extension at nighttime.
  - d. Dr. Hommen will advise you and therapist when to start hinging brace.
4. Four General Rules of removing brace during first 3-6 weeks:
  - a. Do NOT remove for sleep. This may lead to a permanent knee flexion contracture.
  - b. If permission given, you may remove when at relaxing at home (seated, watching TV).
  - c. May remove for showers.
  - d. Do NOT remove when outside of house.
  - e. EXCEPTIONS to above: 1) multiple ligament reconstructions, 2) other complex surgeries.
5. Crutches and limited weight bearing:
  - a. Use 2 crutches at all times while walking for proper balance.
  - b. Anterior cruciate ligament reconstruction without meniscus repair (usually 3-4 weeks).
  - c. Anterior cruciate ligament reconstruction and/or meniscus repair (usually 6-7 weeks).
  - d. Cartilage chondrocyte transplantation (usually 6-8 weeks).

- e. Meniscus transplantation (usually 6-8 weeks).
- f. Patella realignment (usually 8-9 weeks)
- g. Patella tendon or quadriceps tendon repairs (usually 9-12 weeks).
- h. Simple debridement, meniscectomy – discontinue crutches after as surgery as tolerated.
- i. You will be notified how long to use crutches and your weight bearing status after your specific surgical procedure.
- j.

### **Physical Therapy:**

1. In your discharge papers, you will be given a prescription for physical therapy.
2. If there is no PT prescription, in your folder, then you will be given one at your first postop appointment.
3. Contact our office to locate physical therapy facilities around the area of your choice.
4. It will be beneficial to start therapy 48-72 hours after surgery.

### **Return to Work or School:**

1. You may return to work (sedentary) or school 2-3 days after surgery if pain is tolerable.
2. Returning to heavy labor will be determined by Dr. Hommen.

### **Normal Sensations and Findings after Surgery:**

1. Nerve block – will stay in effect 8-24 hours from the time of surgery. This may cause numbness and inability to use the extremity including the knee, foot and ankle until the block wears off. Avoid standing on the lower extremity while nerve block in place to prevent falls.
2. Persistent numbness at foot and ankle – usually resolves 2-3 days after surgery.
3. An increase or surge in the amount of pain after the block wears off. See Pain Medications instructions above.
4. Hip, thigh, knee, calf pain for several weeks.
5. Knee, ankle and foot swelling and warmth up to 6-12 weeks.
6. Small amount of bloody drainage first 3-4 days.
7. Low grade temperature under 101.5 degrees. If this occurs, a) drink plenty of fluids, b) cough, c) take 10 deep, slow breaths and hold for a second and cough forcefully afterwards.
8. Redness at incision sites for several days.

### **NOTIFY OFFICE IMMEDIATELY IF ANY OF THE FOLLOWING SIGNS OR SYMPTOMS OCCUR:**

1. Change in incision (increased redness, drainage, incision opens up, suture comes out, foul smell, yellow discharge).
2. Sharp or increasing pains at knee, calf, thigh, ankle, foot.
3. Temperature over 101.5 degrees.
4. Fevers, chills, nausea, vomiting, diarrhea.
5. Pain not relieved by pain medications.

### **Post-Surgical Appointments:**

Please call the office to schedule if you do not already have your first appointment.