Knee Arthroscopy: Postoperative Instructions

Please read and follow these instructions so that we can help you recover smoothly from your knee surgery. Failure to follow these instructions may compromise the outcome of your healing.

Medications

You should be given a prescription for pain medicine upon discharge home. Fill any prescriptions issued to you and start medications as soon as possible, as prescribed.

- □ Percocet: Take 1-2 tablets every 4-6 hours as needed for pain
- □ Norco: Take 1-2 tablets every 4-6 hours as needed for pain
- □ Aspirin 325mg: Take 1 tablet every 12 hours for 2 weeks
- □ Ibuprofen 200mg: Take 3 over the counter tablets every 8 hours for 48 hours
- □ Other: ________________________________________________________

□ DO NOT take NSAIDS (Ibuprofen, Motrin, Naproxen) for 6 weeks post-operatively

Activity

Minimize your activity the day of surgery. Keep your knee elevated on pillows when you are lying down for the first several days to reduce swelling.

Pump your foot up and down 20 times per hour, every hour you are awake.

You may begin straight leg raising exercises. While lying down, tighten your quadriceps (thigh) muscle and lift your heel off the ground. Hold this position for 2 seconds, and then let the leg back down. Repeat the exercise 10 times, at least 5 times per day.

Take 10 deep breaths and cough every hour to prevent pneumonia.

□ You may begin to bend your knee as tolerated.

□ You should not bend your knee with weight for ______ weeks. You can bend your knee passively (i.e. when sitting or laying down).

□ You have been given a cooling unit to ice your knee. Apply cold therapy as demonstrated for at least 4 days following surgery, use 30 minutes at a time every hour for the first 8 hours, then as needed for 30 minutes at a time. Do not let the ice pad directly touch your skin. DO NOT use heat.
Diet

You should resume your regular diet as tolerated

Other Instructions

Do not smoke. Smoking severely impairs the healing of skin, soft tissue and bone. Smoking (nicotine) significantly increases surgery failure and wound healing complications.

Walking

☐ Walk with crutches as needed, bearing weight as tolerated, for the first 24 hours. The crutches can then be discontinued as tolerated.

☐ Use crutches. **DO NOT** bear weight on the operative leg until instructed at the next office visit.

Dressing

Keep the dressing clean and dry.

You can expect some light wound seepage or drainage through the bandage. **DO NOT BE ALARMED.** Fluid seepage is normal. If the dressing does get soaked, remove and replace with dry gauze and an ace wrap. **NEVER** remove paper tapes (steri-strips) or your sutures.

If the ace wrap is uncomfortable, you may remove it and rewrap it.

☐ Brace applied. You will be given specific instructions regarding the brace.

☐ Remove the dressing 72 hours after surgery. **NEVER** remove paper tapes (steri-strips) or your sutures. You should apply a Band-Aid over each incision after removing the dressing.

☐ Other:

__________________________________________________________________________

Showering

☐ You may shower 2 days after surgery unless told otherwise. It’s okay to let soapy water wash over the knee but **DO NOT** soak it and **DO NOT** rub the incision. After showering, reapply new band-aids or gauze pads, and an ace wrap or brace if applicable.
**Arthroscopic Findings**

- □ Torn Ligament: □ ACL  □ PCL  □ Other: __________________________

- □ Torn Meniscus (Cartilage): □ Medial (Inside) □ Lateral (Outside)
- □ Joint Lining Irritation (Synovitis)
- □ Focal Articular Cartilage Injury
- □ Loose Body or Bodies
- □ Arthritis: □ Mild □ Moderate □ Severe
- □ Other: _____________________________________________________________________

**Procedures Performed**

- □ Ligament Reconstruction
- □ Partial Menisectomy (Cartilage Removal)
- □ Meniscus Repair
- □ Joint Surface Smoothing (Chondroplasty)
- □ Microfracture
- □ Articular Cartilage (Joint Surface) Repair
- □ Removal of loose body or bodies
- □ Other: _____________________________________________________________________

**Physical Therapy**

- □ You will be given a physical therapy prescription. Please call to begin physical therapy in the next _______ weeks.

- □ You will be given a physical therapy prescription when you are seen in the office for your first post-operative visit. You will start physical therapy 4 weeks after surgery.

- □ Formal physical therapy is not needed at this time.

**Follow-Up**

A follow-up appointment will be made for you before you leave the surgery center. Please make sure you knew the date and time of this appointment before you leave the
surgery center. The usual post-operative period for wound/check/staple removal/suture removal is between 10-14 days depending on the site of the procedure.

**Notify Us**

Call if you are experiencing warning signs such as:
- Severe pain that is not reduced with elevation, ice and medication
- Fever above 101.5 degrees F
- Severe calf pain, shortness of breath, or chest pain
- Adverse reactions to the prescribed medications
- Severe pain uncontrolled by your pain medications
- Excessive bloody wound drainage

The Spine and Orthopedic Center is open Monday through Friday, 8:30AM-5:00PM.
- **Main Office Number:** (805) 563-3307
- **Office Call Service:** (805) 882-2000

If it is after-hours, you may call and/or proceed to the local Emergency Department.

**I ACKNOWLEDGE AND AGREE TO THE ABOVE:**

PATIENT/PARENT/GUARDIAN SIGNATURE: ____________________________ DATE: __________

If signed by someone other than patient, please state relationship: ____________________________

RESPONSIBLE ADULT SIGNATURE: ______________________________

Relationship to patient: ______________________________