

ASHBURN • CENTREVILLE • FAIRFAX • RESTON PHONE: 703-435-6604

Post-Operative Instructions Following Tibial Tuberosity Osteotomy

1. WHEN DO I COME IN FOR MY FIRST FOLLOW-UP VISIT?

If an appointment has not already been scheduled, please call the office the day following surgery to schedule an appointment for approximately one week after your surgery.

2. WHAT SHOULD I EXPECT AFTER SURGERY?

After surgery, it is normal to experience some discomfort. A prescription has been sent to your pharmacy. Please use the medication regularly as directed for the first twenty-four hours and then as needed after the first day. Tylenol (Acetaminophen) may be used instead of or with the prescription medication.

You should not take any anti-inflammatories (ie. Advil, Aleve, Motrin, Ibuprofen, etc.). If you are not on regular blood thinners, you should take a baby aspirin (85mg) two times a day with meals. Assuming no problems develop while taking the medicine, you will continue this until the brace is discontinued and full weight bearing is permitted.

A low-grade temperature (99-101 degrees F) is common. Please call the office if your temperature is consistently elevated over 101.5 degrees.

Try to keep the surgical leg elevated for the first two days. Your knee should be elevated above your heart. This can best be done by placing pillows under your calf.

3. HOW LONG SHOULD I KEEP MY KNEE DRY AND WEAR THE BANDAGE?

The bandage should be kept dry and in place for 48 hours. For the first 48 hours, it is best to take baths with your knee hanging out of the tub so that the dressing may remain dry.

Forty-eight hours after surgery please remove and discard the bandages. There may be some dried blood on the bandages and knee. This is normal. In addition, there will be several stitches. After you remove the bandage, continue to keep the incisions dry and covered with either gauze and a loosely fitting ace bandage or Band-Aids. Do not place any creams or lotions on the incisions.

After removing the bandage, getting the incision wet in a shower is Ok. Sit on a stool while showering. It may be easier to take baths. However, do not immerse your knee in water (i.e. swimming, baths, or hot tubs) until further notice.

4. HOW MANY DAYS SHOULD I USE MY CANE OR CRUTCHES?

You will need to be partial weight-bearing on your operative leg for 6 weeks. Please only place your flat foot on the floor (do not walk on your toes) with minimal body weight (50%). This will require

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you to use two crutches. While walking, use the brace. After our first follow-up appointment, unless told otherwise, the brace can be removed when not walking.

5. WHAT CAN I DO TO HELP REDUCE SWELLING AND DISCOMFORT?

Limiting your activities and resting with your knee elevated above your heart are the best methods of reducing swelling and discomfort. This will also help speed up your recovery. You may have a cool therapy device. If this is the case, the company's representative should have provided you with instructions on its proper use. If not, please call our office. Ice may also be used. This is equally effective and can be done by filling a plastic bag with ice cubes and placing it over your knee with a towel between the skin and the ice bag. Leave the ice in place for 15-30 minutes. This may be done every hour while awake.

Regarding your activity level, advance your daily activities slowly. Avoid all risky or potentially risky activities. Be careful while climbing and descending stairs. Painful activities are to be avoided. Initially, it is best to limit your activities to those that are necessary. This will help reduce your swelling and discomfort.

6. WHAT ELSE CAN I EXPECT?

1. Initially, numbness around the incision site is a result of the anesthesia block, if administered. Later, it is usually due to the involvement of superficial nerves in your skin during the operation. This is normal and unavoidable. Most of this will resolve over time but a small area the size of a quarter may often remain numb.

2. A sudden rush or feeling of fullness with pain in the knee when going from sitting to a standing position is common following surgery. This will resolve as the swelling resolves.

3. Bruising and/or swelling of the shin and ankle are common after surgery. This is caused by bleeding from the bone and soft tissues (that are cut during surgery) into the area just deep to the skin. To reduce this, it is best to ice the leg. If at any time you have discomfort, swelling or redness in the calf (behind the leg between the knee and ankle) please call the office immediately.

7. WHAT EFFECTS MIGHT I NOTICE FROM THE ANESTHESIA?

If you had general anesthesia, some fatigue and lethargy may be noticeable for a day or two. Occasionally, nausea may occur. Eating light foods will help. Resume your regular diet as the nausea resolves.

If you had a block, soreness around the area of injection is common. Ice to this area is helpful in reducing discomfort. Apply it for 15 - 30 minutes three times a day. The soreness should resolve by three to four days following the surgery. If, by that time, it has not resolved, or it is getting worse, please call my office or call the hospital and ask for the anesthesia office.

8. WILL I HAVE AN EXERCISE PROGRAM TO FOLLOW?

You have been given my physical therapy protocol. A physical therapy prescription will be emailed to you. If you have not already scheduled an appointment, please call a physical therapy facility and schedule an appointment as soon as possible. You may begin therapy prior to your initial follow-up appointment with me. If you have any difficulty arranging the therapy call my office for assistance.

In the meantime, with the knee immobilizer in place and lying on your back, raise your leg 15 times for 3 sets, once a day. Then repeat while lying on your front and nonsurgical side.

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