



Post-Operative Instructions Following Meniscal Repair

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 knee arthroscopy, it is normal to experience some discomfort. A pain medication prescription was 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. You may use Tylenol (Acetaminophen) along with or instead of the prescription medication.

It may have been suggested that you take Aspirin or another mild blood thinner. If so, you should not take any anti-inflammatories (ie. Motrin, Ibuprofen, Advil, Aleve, etc.). If not, you may have been given a prescription for Celebrex (Celecoxib) with your postoperative prescriptions. If so, take this as directed.

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 keeping the surgical leg elevated for the first two days when in bed. Your knee should be elevated above your heart. This can best be done by placing pillows under your calf.

3. HOW MANY DAYS SHOULD I USE MY CRUTCHES?

You are to be either nonweightbearing or at most, partial weight-bearing on your surgical leg. Either way, this will require that you use crutches while walking. If partial weight-bearing, only place about 50% of your weight on the ground with your foot flat on the floor, rather than landing on your toe.

Orthopaedic and Reconstructive Surgery • Sports Medicine • Arthroscopic Surgery • Spine Surgery

Hand/Wrist & Upper Extremity Surgery • Foot/Ankle & Lower Extremity Surgery • Physical Medicine & Rehabilitation

www.towncenterorthopaedics.com

While ambulating, it is recommended that you use the knee immobilizer or brace. Your weight-bearing will be restricted 4-6 weeks. We will guide you when it is ok to progress to full weight-bearing. It is ok and recommended to remove the brace while in bed and not ambulating. It is ok to bend and straighten your knee. Just don't force your knee bent. Rather let it bend to the amount that is comfortable.

4. 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 will be several stitches. At this point the stitches may get wet in the shower. Following your shower, pat the stitches dry and place Band-Aids over them. Do not immerse your knee in water (i.e. swimming, baths, or hot tubs) while the stitches are in place.

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 and will speed up your recovery. Ice may also be used. This 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, use common sense as your guide. Advance your daily activities as tolerated with the weight-bearing restrictions and brace use as described above. Painful activities are to be avoided.

6. WHAT EFFECTS MIGHT I NOTICE FROM THE 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.

7. WILL I HAVE AN EXERCISE PROGRAM TO FOLLOW?

You may have been scheduled for physical therapy in advance of your surgery. If you have not, please call my office so that we can assist in scheduling your therapy. In some cases, physical therapy is not necessary at this time to ultimately achieve a full recovery. If therapy has not been suggested, you will be started on an exercise program to help rehabilitate your knee when you come to the office for your first post-operative visit.

Orthopaedic and Reconstructive Surgery • Sports Medicine • Arthroscopic Surgery • Spine Surgery

Hand/Wrist & Upper Extremity Surgery • Foot/Ankle & Lower Extremity Surgery • Physical Medicine & Rehabilitation

www.towncenterorthopaedics.com