

Alfred A. Mansour, III, M.D.
Stephanie Stekier, PA-C
Pediatric Sports Medicine and Hip Preservation
713-486-1820 office
713-512-7240 fax
Vanessa.Escamilla@uth.tmc.edu
6400 Fannin Street, Suite 1700
Houston, TX 77030
www.uth.tmc.edu/ortho/

# **Knee Arthroscopy Post-Operative Instructions**

#### **Initial Instructions**

- o Ice and elevation along with pain medicine are your keys to initial pain management.
- After you arrive home, rest the remainder of the day. You may be tired or nauseated from the anesthesia and/or pain medication.
- You will be given crutches upon discharge. Continue to use until your first post-op visit.

# **Dressing Change**

- Leave the dressing in place for 48 hours following surgery.
- o After this, remove the dressing making sure to leave the steri-strip tape on the incisions in place.
  - The steri strips will stay in place for 1 ½ to 2 weeks before falling off on their own.
- You may now apply a new, clean, dry dressing at least once a day.
  - Place sterile gauze over the incisions and then wrap the knee with an ACE™ bandage.
- It is extremely important to keep the surgical site clean and dry at all times to help prevent infection.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.4 degrees
   F) and drainage from the wound. If you note any of these signs, please call the office <u>immediately</u> at 713-486-1820.

## **Bathing**

- You may shower 48 hours after your surgery and get your incisions wet.
  - Let the water run down over the incisions but do not rub or scrub them.
- o Do not soak or submerge the surgical site for at least 3 weeks following surgery.

## **Activity**

- Rest and elevate your leg for the first 24 hours.
  - Use a pillow under your calf and ankle. Never place a pillow under your knee.
- Use your crutches while walking. You may progressively place weight on your leg as you feel comfortable unless instructed otherwise by your physician.
- o It is very important to get your leg as straight as possible, as soon as possible.
- Begin range of motion exercises (ROM) on the first day post-op and advance during the first week.
  - Quadriceps Contractions: perform 5-10 every hour, push back of knee into bed and tighten thigh
    muscle.
  - Straight Leg Raises: perform 5 every hour, lift leg off bed to 45° angle.

- Work to obtain full extension by placing a rolled up towel under the heel and gently pushing the knee into the bed/flat surface.
- The clinical staff will arrange formal physical therapy as needed.

#### Cryotherapy

- o lcing is very important to decrease swelling and pain, and improve mobility.
- Ice for 20 minutes each hour over surgical site.
  - Be sure to keep clothing or a towel between ice and skin, as placing the ice directly on skin may cause frostbite. **DO NOT PLACE ICE OR CRYOTHERAPY DIRECTLY ON SKIN.**

#### Medications

- You will be given a narcotic pain medication. This should be taken as needed every 4-6 hours for pain. Take with a little food.
- If given a prescription for an anti-inflammatory, such as Naproxen or Motrin take as directed.
   Take with food.
- We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation.

# **Post-Op Office Appointment**

o If the appointment was not arranged prior to surgery, please contact the office at 713-486-1820.

#### **Emergencies or Concerns**

- o Contact us at 713-486-1820 or go to the nearest emergency room.
  - Pain worsens or does not go away after pain medication is taken.
  - Redness or swelling in your thigh or calf that will not decrease.
  - Difficulties moving your toes.
  - Develop a fever greater than 101.4 degrees.
- Please note that refills on pain medication will not be approved during evenings or on weekends.