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Knee Osteochondral Allograft Post-Operative Instructions

Initial Instructions

- 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 allowed to weightbear.

Dressing Change

- Leave the dressing in place for 72 hours following surgery.
- 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 immediately at 713-486-1823.

Bathing

- You may shower 72 hours after your surgery and get your incisions wet.
 - Let the water run down over the incisions but do not rub or scrub them.
- 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 are to remain nonweightbearing on the leg that had surgery until instructed otherwise.
- 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.
- A CPM machine has been arranged for you. Use it 4-6 hours each day, divided as tolerated. Start at 0-40 degrees and advance it as tolerated.
- You may remove the brace for range of motion exercises.

Bracing

- You will be put in a hinged knee brace after surgery.
- You are to remain in the brace at all times except to shower until instructed otherwise by your therapist or physician.
- The brace will be locked in full extension following surgery. You can adjust it 0-90 degrees once your femoral nerve block has worn off in 24-48 hours.

Cryotherapy

- Icing is very important to decrease swelling and pain, and improve mobility.
- You will be provided with a cryocuff.
 - Keep cold therapy cuff on at all times for the first 24 hours after surgery.
 - Refill with cold water every hour while awake.
 - After 24 hours, continue to use the cuff 3-4 times a day, 15-20 minutes each time.
 - 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 DIRECTLY ON SKIN.**
- If a cryocuff is not provided, please use ice for 20 minutes each hour over surgical site. **DO NOT PLACE DIRECTLY ON SKIN.**

Femoral Nerve Block

- You may have received an injection into your upper thigh to block the conduction of your femoral nerve. This nerve conducts pain and activates your quadriceps muscles.
- Therefore you should be relatively pain free for about 12-18 hours but may NOT be able to contract your quadriceps muscles. This will allow you to have very little control of your leg.
- If you were given a brace, you must wear it and use crutches until advised by your physician.
- The anesthesiologist will discuss this procedure in more detail with you on the day of surgery.

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.
- Also take Enteric coated Aspirin 325 mg, one tablet each morning for 4 weeks. This is to decrease the risk of a blood clot. 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

- If the appointment was not arranged prior to surgery, please contact the office at 713-486-1823.

Emergencies or Concerns

- Contact us at 713-486-1823 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.