

Wound Care

You may remove your ace bandage and dressings three days after your surgery. Your incisions will be covered with steri-strips or visible sutures. If the steri-strips do not fall off on their own after two weeks, you may remove them yourself. You are to wear your white compression stockings (TED hose) for two weeks after your surgery to help prevent blood clot formation.

Be sure to watch for signs and symptoms of infection after surgery, which includes: redness, increased swelling, warmth, wound drainage, or a fever greater than 101.5 degrees. If you notice any of these signs and symptoms please notify your surgeon.

Showering

You may shower and get the surgical area wet once you have removed your dressing on postoperative day three. Please remove your stockings to shower and replace them immediately after drying off. Do not immerse your incisions under water: no baths, swimming or hot tubs for at least two weeks after surgery.

Ice

The Ice therapy unit will provide comfort, decrease swelling and help with pain control for the first week following surgery. If you are not using an Ice therapy device, please ice your knee three to six times a day for up to 20 minutes at a time using a large bag of crushed ice. To avoid frostbite, place a towel between the ice and your skin.

Activity

- **For routine knee arthroscopy**, you will be given crutches, a cane, or a walker to help with walking for the first week following surgery.
- **For meniscal repair**, you may be asked to use crutches for three to six weeks.
- **For microfracture surgery**, you will be on crutches for six weeks with non-weightbearing. You will also be prescribed a motion machine (CPM) for six weeks which is to be used four to six hours per day.
- **For ACL reconstruction surgery**, you may be asked to be partial bearing on your surgical leg using crutches for two weeks after surgery. If this is the case, you should be working towards using only one crutch (the one crutch goes on your non-operative side) by day 10 to 12. A few days later you may wean to no crutches. You may be prescribed a knee brace by your surgeon as well. The brace will be locked in full extension when ambulating for two weeks and then unlocked. You may discontinue brace use at three weeks after your surgery. Your surgeon may also specify that you do not need a brace and that you may not need to be partial weight-bearing postoperatively. Ask your surgeon to confirm these specifics.
- **For more complicated procedures such as multiligamentous reconstruction or meniscal transplantation**, your surgeon will specify instructions.

Exercises

- **Straight Leg Raises:** raise leg 12 inches off the bed, couch or chair. Hold in position for a count of 10 seconds. Do 10 repetitions, five sets per day.
- **Knee Bends:** Lying on your back, keeping your leg straight, lift your leg towards your face. Slowly bend your knee until you reach 90 degrees of flexion, while supporting the back of your knee with your hands. Then, slowly straighten your leg back out. Do 10 repetitions, five sets per day.
- **Quad sets:** sitting with your leg straight, pull your toes toward your nose and tighten your thigh (flexing your quadriceps muscles). Hold for a count of 10 seconds. Do 10 repetitions, five sets per day.
- **Foot pumps:** sitting with your leg straight, alternate pointing your toes to the floor ('pushing on the gas pedal') and pulling your toes toward your nose. Do 30 repetitions, five sets per day.

Peddler

Begin using your bike the day following surgery for 10 minutes, three times a day. Slowly increase the time by one to two minute increments and progressively add mild resistance.

Stationary Bike

You may begin to gently ride a stationary bike with no resistance for 10 minutes per day starting a week after surgery. Slowly increase the time by two minute increments daily. In certain circumstances, your surgeon may specify that you may use it sooner.

Physical Therapy

You will be prescribed Physical Therapy to start immediately following surgery. There is a standard protocol that you will follow with your therapist. In certain circumstances, your surgeon may recommend that you only do the exercises on your own.

Medications

Take as prescribed. **Narcotic pain medications:** Vicodin (Hydrocodone) or Percocet (Oxycodone) is used for severe pain. It can be taken up to every four hours as necessary. Most patients only require Vicodin or Percocet for the first week. Once pain is better controlled, you may simply take extra strength Tylenol one to two tabs every six hours. Take these medications with food. If you have any problems taking the medications please stop them immediately and notify the clinic.

Driving

For right knee ACL surgery this is generally around six weeks after surgery. For left knee ACL surgery you may return to driving two to three weeks after surgery. Do not drive while taking narcotic pain medications such as Vicodin.

Follow-Up

Your initial follow up visit will usually be one to two weeks after surgery. These visits will be arranged for you. If you have any questions, concerns or problems between your scheduled visits please feel free to contact The CORE Institute at 1.866.974.CORE (2673).