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Department of Orthopaedic Surgery

425 West 59th Street, 5th floor
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INSTRUCTIONS ON CARING FOR YOURSELF AT HOME

POST OP INSTRUCTIONS FOLLOWING KNEE ARTHROSCOPIC SURGERY

Medications:

- Long acting local anesthetics are routinely used to minimize postoperative pain. This will wear off within 8 to 18 hours.
- Most patients will need some narcotic pain medication such as Percocet (Oxycodone) or Vicodin (Hydrocodone). Take as directed on the bottle.
- Common side effects of pain medicine are nausea, drowsiness, and constipation. To minimize these side effects, take the smallest dose needed to control the pain. Take medications with food. If constipation occurs, take an over the counter. A stool softener such as Colace may prevent constipation.
- If you have severe nausea, or your pain is not controlled please call the office to have your medication changed.
- Do not drive a car or operate machinery while taking narcotic pain medications.
- Aleve or Ibuprofen (Advil, Motrin etc), can be taken in between narcotic pain meds to help with peaks and valleys of pain. It will help reduce the overall amount of narcotic pain medication needed, and to increase the time interval between narcotic pain medication usage.
- Antibiotics are typically not prescribed after knee arthroscopy.

Diet:

- Begin with clear liquids and light foods such as broth, and Jell-O.
- Progressively normalize your diet if you don't experience nausea, vomiting, or bloating.

Activity:

- You may weight bear as tolerated unless otherwise instructed by Dr. Seneviratne.
- You may walk as tolerated. You may need a cane and sometimes crutches.
- Sex – no restrictions.
- Driving
 - Patients who have had surgery on the **left** knee, and who have an automatic transmission may drive when they can comfortably get the leg in and out of the car.
 - Patients who have had surgery on the left knee and have standard transmissions should not drive until they have good muscular control of the leg. This usually takes 5-10 days.
 - Patients who had surgery on the **right** knee should not drive until they have good muscular control of the leg. This usually takes 1-2 weeks.

Exercise:

- Begin exercises 24 hours after surgery (see following diagrams and instructions).
- It is safe to bend your knee immediately after surgery – in fact it will enhance your recovery and decrease you pain.
- It is normal for your knee to be stiff for a few days after surgery.

Wound Care:

- Keep your operative dressing on for 48 hours. You may loosen bandage if excessive swelling of the foot and ankle occurs.
- Remove all cotton and yellow gauze 48 hours after your surgery.
- Use Band-Aids to cover the portal incisions.



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- You may shower 48 hours after surgery
- Please use CAUTION!! Be careful not to slip, twist, or fall. A stool placed in the shower so you can sit is a great idea so you can stabilize your knee.
- Do not soak in a bathtub, hot tub, or pool until Dr. Seneviratne tells you it is O.K. to do so.
- Once you are done showering pat the wound dry and reapply a dry dressing as directed above.

Elevation:

- When you are not walking your leg should be straight with 2 pillows under your foot or ankle (not behind your knee). Try to elevate knee as much as possible to reduce swelling.

Ice/Cryotherapy:

- You should use cold therapy on the knee immediately after surgery. Use cold therapy as often as possible (especially after exercising) to reduce swelling and discomfort in the.
- If using an ice pack, do not ice the knee more than 20 minutes at a time. Let the knee warm up before reapplication. Avoid getting your wound wet.
- If you were prescribed a Cryocuff or Gameready cold therapy machine you may keep this on the knee continuously, but follow the instructions provided by the vendor of the machine.

Common Concerns:

- A sudden rush or feeling of fullness with pain when going from a sitting to a standing position in the knee is common after surgery.
- Bruising and/or swelling of the thigh, shin and ankle are common after surgery. This usually occurs 3-4 days after surgery. To relieve this discomfort it is best to ice the leg.

Please call if:

- If at any time you have discomfort, swelling, or redness in the calf (behind the leg between the knee and the ankle) please call the doctor immediately.
- Fever (>101.5 degrees F) especially if accompanied by chills (low grade fever is common and not be concerned with).
- Excessive bleeding.
- Pain that is not controlled with medications.
- Numbness in leg lasting more than 18 to 24hours.
- Any difficulty breathing or heaviness in the chest.

Follow-up visit:

- You need to see Dr. Seneviratne or his team about one week following surgery for your first post-op visit. At that time your sutures (stitches) will be removed and physical therapy will be started.

Follow-up care/Questions

- Dr. Seneviratne or a member of his team will call you on the first day after surgery to address any questions or concerns. If you have not been contacted within 48 hours please call the office at (212) 636 8290.
- If you do not already have a post op appointment scheduled, please contact the office during normal business hours and ask for appointment scheduling

REMEMBER - these are only guidelines for what to expect following arthroscopic knee surgery. If you have any questions or concerns regarding your knee please do not hesitate to call the office at any time.



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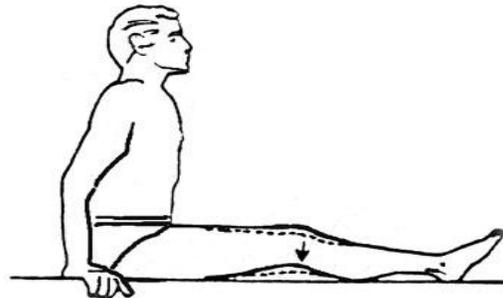
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Knee Arthroscopy Post Op Home Rehab Program

How fast and how well you regain knee motion is directly related to your motivation and perseverance. Strong determination and tolerance for temporary discomfort will hasten your return to normal activities. Follow the exercise routine prescribed by Dr. Seneviratne. Gradually increase the frequency of the exercise as your knee becomes stronger. Initially you may require assistance, but you should soon be able to perform these exercises and stretching maneuvers on your own. Swimming is a good form of exercise once the incisions are well healed. Many of the following exercises can be more effectively performed with the aid of the water buoyancy. You may wish to establish the exercise pattern with your good knee then switch to your injured one.

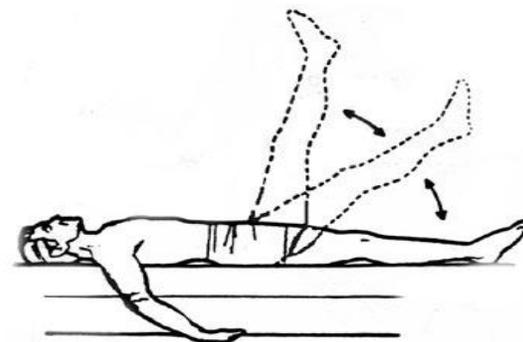
1. Quadriceps Isometrics Strengthening

Sit on a flat surface with legs out straight. Tighten the knee without moving the leg out of position. To get the idea of this exercise have someone their hand behind your knee (push against the hand attempting to flatten your knee). Relax and repeat slowly, holding the knee in the tightened position approximately two seconds each time. Repeat this exercise at least 25 times every hour that you are awake. This can also be preformed at odd moments also such as in your car while you're a passenger or, as you're a driver and stopped at a stoplight or while your sitting in a chair, etc.



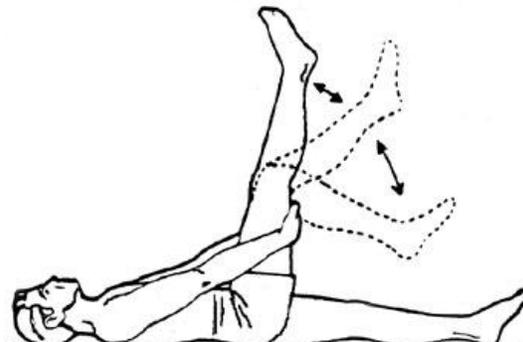
2. Straight Leg Raises

Lie on Your back with your legs out straight, knees unbent holding onto a solid object (bed frame or couch, etc...) lift your heel slowly off the bed. Raise the leg as high as possible. Slowly lower the leg to the bed keeping the knee straight. Repeat ten times; perform three times a day.



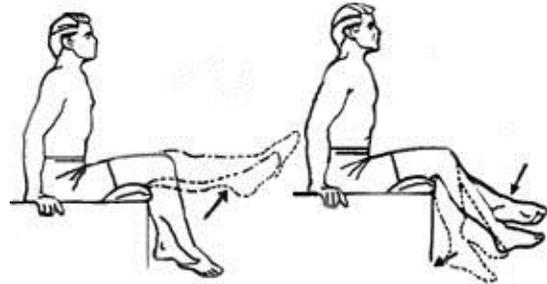
3. Knee Flexion Exercise

Raise the leg straight upward as in exercise # 2. Support the lower thigh just above the knee with hands clasped in back of the knee. Relax the knee muscles and let the weight of the leg bend the knee; then, with no additional aid straighten the knee to its previous position. Repeat, each time permitting the leg to bend further.



4. Sitting Knee Flexion Exercise

Sit on side of ed with pillow under knees and legs dangling. Straighten injured leg, using foot of good leg for support, let it drop by gravity, then force it to bend, using other foot to exert pressure on top of the ankle to limits of pain tolerance; repeat.



5. Movement with assistance from healthy leg

Sitting high on table or bed, let injured leg dangle with minimal or no support, and tighten hamstring muscles. Use opposite foot to gradually bend the injured leg by exerting pressure on the **TOP** of the ankle.



6. Imaginary Bicycling

Perform bicycling-type exercises, lying on your back with your feet extended into the air. Imitate the movement as if you were on a bicycle and pedaling. Stretch your leg as far as you can straight into the air while at the same time bending the opposite leg as close to your chest as possible, letting gravity pull it toward your body.



7. Bicycling

Use a stationary bicycle or a regular bicycle placed on jacks, with the seat placed in highest position. When you are able to make a full revolution comfortably, lower the seat. Increase the tension as you are able to lower the seat even more and have achieved 110 degrees of bend in your leg. Gradually increase the duration of time on the bike. When you can cycle comfortably for 20 minutes you may increase resistance.





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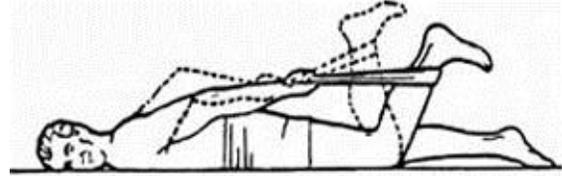
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8. Hamstring and Knee Stretches in Prone Position

Lie on your stomach and bend the injured knee by lifting foot from table. You may force the knee to bend by pulling a strap or towel looped over your foot. Gently pull on the strap until you feel pressure in your knee and hold for 2-5 seconds. Then, gently allow the leg to move back toward the ground with the assistance of gravity and the use of the strap (preventing it from falling to quickly).



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