

Discharge Instructions: Knee Arthroscopy +/- partial meniscectomy

Crutches / Weight Bearing :

- You may weight bear as tolerated after surgery.
- You may use crutches as needed for 2-3 days after surgery to help with pain management and swelling.
- When you are able to walk comfortably without a limp, stop using the crutches and walk unassisted.
- Nerve blocks are typically not required for knee arthroscopy. If you had a nerve block, crutches should be used while the nerve block is still in effect. Once the nerve block has worn off, you may discontinue crutches and start weight bearing as tolerated while wearing your brace.

Wound Care:

- Remove dressing in 3 days.
- Keep dressing clean and dry until removed 3 days after surgery.
- Leave the steri-strips clean dry and intact. DO NOT Remove.
- You may shower normally after your dressing is removed (3 days after surgery).
 - Do not scrub incision or scrub/remove skin glue. Allow soapy water to run over your incisions and pat dry with a clean towel.
- Do not submerge your incisions underwater (bath, swimming pool, etc.) until fully healed (typically around 4 weeks).
- There are no sutures to remove, they are beneath your skin and will dissolve over time.

Ice:

- Use ice packs regularly for 2-3 days after surgery to help with pain and swelling.
- Apply ice for 20 minutes every 2 hours while awake.
- Ice or cold pack should never be applied directly on the skin as this may cause frostbite. A cloth or towel should always be used between the skin and ice pack to protect the skin.
- You may consider purchasing a commercially available ice and compression device available online (e.g., amazon.com). Some options include a NICE Machine, Game Ready machine or Cryocuff. These devices are not always covered by insurance; please contact your insurance company for cost details. If desired, Dr. Stapleton can write you a prescription for these devices.

Diet:

- Begin with clear liquids and light food (jello, toast, etc.)
- Progress to your normal diet if you are not nauseated.



Activity:

- Elevate the operative leg above your heart as often as possible for 3 days after surgery to help decrease post-operative swelling.
- Take frequent short walks to help promote blood flow in your legs and minimize the risk of blood clots.
- **Do not drive while on narcotic pain medication.** In general, you can resume driving 3-5 days after your operation when you have fill control of your arms and legs and are pain free.

Physical Therapy:

• Formal physical therapy is typically not necessary but will be assessed for necessity at your first postop appointment 10-14 days from surgery.

ANKLE PUMPS - AP Bend your foot up and down at your ankle joint as shown.	Repeat Hold Complete Perform	10 Times 1 Second 1 Set 3 Times a Day
QUAD SETS Sit down and straighten your leg and knee. Tighten your top thigh muscle to press the back of your knee downward. Hold this and then relax and repeat.	Repeat Hold Complete Perform	10 Times 3 Seconds 1 Set 3 Times a Day
STRAIGHT LEG RAISE While lying or sitting, raise up your leg with a straight knee. Keep both knees straight the entire time.	Repeat Hold Complete Perform	10 Times 1 Second 1 Set 3 Times a Day
HEEL SLIDES Lying on your back with knees straight, slide the affected heel towards your buttock as you bend your knee. Hold a gentle stretch in this position and then return to original position.	Repeat Hold Complete Perform	10 Times 1 Second 1 Set 3 Times a Day

Begin these home exercises the day after your surgery.

DR. ERIK STAPLETON FELLOWSHIP TRAINED ORTHOPEDIC SURGEON Sports Medicine Specialist



Pain / Medications

- Some swelling and bruising can occur after surgery. Make sure to apply ice to the affected area and elevate your leg to help with swelling and pain control.
- It is easier to maintain pain control if you stay ahead of the pain. It is difficult to catch up with your pain if it gets too severe.
- Expect to have pain following surgery. Pain level of 4-5/10 is our goal. The pain medications prescribed by Dr. Stapleton should provide relief, but often does not take all the pain away. The first few days after surgery are often the most painful. Your pain will improve with time.
- Please use narcotic medications (Tramadol) sparingly and slowly try to decrease the amount and frequency over the next two weeks.
- Do not make important decisions or sign any legal documents while on narcotic pain medication.
- **Constipation** is common after surgery due to pain medication and lack of activity. Consider taking a stool softener such as Miralax or Colace as needed.

Continue all medications you were taking before surgery in addition to the medications Dr. <u>Stapleton prescribed below.</u>

Narcotic Pain Medication

• You have been prescribed a narcotic pain medication. **Tramadol 50mg by mouth every 4-6 hours as needed for pain.**

Non-narcotic Pain Medication

• In addition to your narcotic medication, you should also take: Tylenol 1,000 mg every 6 hours. Do not exceed 4,000mg of Tylenol per day.

Ibuprofen 600 mg every 8 hours for additional pain control.

• Take this medication with food to help avoid stomach upset.

Blood Thinner

• You have been prescribed a medication to help prevent blood clots in your legs after surgery (medication indicated below). It is very important for you to take this medication as directed.

Aspirin 81mg (Enteric Coated) - Take one pill by mouth two times per day for 30 days.

Xarelto 10mg - Take one pill by mouth each day for 14 days.

Eliquis 2.5mg – Take one pill by mouth two times per day for 14 days.

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Return to Work or School:

You may return to work or school as soon as you are comfortable and able to walk safely. This typically
occurs 1-2 weeks after surgery. Return to work/school clearance notes can be obtained from Dr.
Stapletons' office if needed.

Follow-up Appointments:

- Your first post-operative appointment will be in approximately 10-14 days.
- If you do not have an appointment scheduled, please call Dr. Stapletons office at (304) 647-5114.
- Follow-up care is a key part of your treatment and safety. Please keep and attend all appointments and call Dr. Stapleton if you have concerns or problems.

When to call for help:

Call 911 anytime you think you may need emergency care. For example, call if: You pass out (lose consciousness). You have severe trouble breathing. You have sudden chest pain and shortness of breath.

Call the office at ((304) 647-5114 if you have:

Severe pain that does not improve with pain medication. Calf or lower leg pain and swelling. Fever over 101°F for more than one day. Incision keeps bleeding 3 days after your surgery. Signs of infection, such as redness around incision or pus draining from your incision.

If you have questions or concerns, please call the office at (304) 433-8788.