

KNEE SCOPE POST-OPERATIVE INSTRUCTIONS



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FINDINGS:

- Meniscus tear:
- ACL tear
- PCL tear
- Collateral ligament tear (MCL/LCL)
- Arthritis (cartilage wear)
- Cartilage defect or injury
- Joint lining irritation (synovitis)/ plica
- Loose Body
- Patella Tilt/Maltracking
- Other : _____

PROCEDURES:

- Partial meniscus excision
- Meniscal repair
- Arthroscopic Ligament Reconstruction
- Open Ligament Repair or Reconstruction
- Removal of loose body
- Microfracture of cartilage defect
- Chondroplasty (smoothing of cartilage)
- Synovectomy (Removal of Inflamed Tissue)
- Lateral Release
- Other: _____

DRESSING & INCISION CARE

- Keep dressing on and dry for 2 days, then OK to remove and place regular bandages over incisions.
- Apply ice for 20 minutes out of each hour while awake as needed to control pain and swelling.
- It is normal to have some bloody or clear drainage from the incisions. Place Band Aids over each incision if there is any drainage. Otherwise, incisions can be left open to the air. Keep all incisions clean and dry. The incisions may look red for at least a few days.
- Do not remove sutures or thin white strips stuck to your skin. Your therapist or I will do this at your follow-up visit (7-14 days after surgery).
- During the first 2 days, if pain unrelieved by icing, elevating and pain medications, loosen the dressing. Remove Ace bandages, peel open cotton padding, leave deep dressing in place and loosely reapply Ace bandages. If pain persists, call the office.

FOLLOW-UP VISIT

- Make an appointment to see Dr. Shah approximately 2 weeks following surgery.
- If an appointment is not already scheduled for you, call the office the day of or the day after surgery. Tell the office that you need to be seen for a post-op check by Dr. Shah.
- Dr. Shah will show you photographs from your surgery at your first post-op office visit.

DIET

- Nausea is common for 24-48 hours after surgery due to anesthesia and pain medications. Start with liquids and progress your diet as tolerated to your regular diet.

MEDICATIONS/PAIN CONTROL

- Use prescribed pain meds as directed. Your prescription was likely called in to your pharmacy.
- You may take over the counter Benadryl as directed for a rash or itching due to pain medications.
- You may use over the counter stool softeners such as Colace for constipation which is a common side effect of pain medications. Use as directed.
- You may use over the counter ibuprofen (Advil, Motrin) or naproxen (Aleve) as directed to supplement pain control and reduce swelling. Only use these if you have not had problems with anti-inflammatory medications in the past (gastric reflux, heartburn, stomach ulcers, GI bleeding, kidney problems).
- It is normal to have some pain after most surgical procedures. If your pain medicines, frequent icing, and the supplemental medications above are not controlling your pain or your prescribed medications are not tolerated, please call the office during business hours to discuss adjusting your medications.
- If you are running low on medications, please plan ahead and call the office during business hours to authorize refills. On-call physicians can not typically refill pain medications after business hours.
- If this box is checked, I recommend you begin using an over the counter cartilage nutrient supplement containing glucosamine and chondroitin sulfate (i.e. Osteobiflex, Cosamin DS, Joint Juice). Use as directed.**

PHYSICAL THERAPY

- Physical Therapy (PT) is a very important component in attaining a good outcome from your surgery. You should start PT on post-op day 1-2 or as soon as possible if it has been prescribed.
- You should see your therapist several times each week, but you **MUST** perform the prescribed exercises on your own each of the other days.
- If you are not aware of your therapy appointment or one has not been set up for you, please call the office to inquire about setting up your appointment.
- If you choose to do your therapy at another location outside of our clinic, please provide us with a location name and phone number so that we may send them a prescription and protocol.

ACTIVITY AND BRACING AND CPM MACHINE (adhere to all bullets and the checked boxes below)

- Make sure to move the hip, ankle, and toes several times per day starting the day of surgery.
- **If you have been placed in a brace, use it at all times (including sleep) until you return for follow-up. You may remove your brace for hygiene (showering), for physical therapy, and for your home exercises only. While it is off, do not bear weight on the leg or try to walk.**
- Knee Scope Protocol:** You may bear full weight on the operative leg and discontinue use of the crutches as soon as you are comfortable. You are encouraged to move and bend your knee as much as tolerated.
- Meniscus Repair/PCL/LCL Precautions:** You may bear slight (rest your toes down on the ground) weight on the operative leg in the brace locked in extension (straight, 0 degrees) while using crutches for assistance. Do not bear weight with the knee bent or flex the knee further than 90 degrees until cleared to do so.
- ACL/MPFL Protocol:** You may bear full weight on the operative leg in the brace locked in extension (straight, 0 degrees) while using crutches for assistance and balance.
- CPM Machine (Continuous Passive Motion):** You were prescribed a motion machine to use at home after surgery. Use the machine the night of surgery or morning after and approximately 4-6 hours per day each day until follow up. You can split the daily use in as many sessions as you like or can use it straight for 6

hours as well. Start the machine at 0 degrees to 45 degrees and increase the settings by 5-10 degrees every session to reach a goal of 0-110 degrees over the first 7-10 days. Increase the machine settings as fast as possible. Some discomfort with this is normal and expected.

WEIGHT BEARING (for operative leg)

- As tolerated with crutches as needed for comfort
- As tolerated with brace locked in extension and crutches for assistance and balance
- Toe touch (touch foot on ground) in brace locked in extension (straight, 0 degrees)
- Toe touch (touch foot on ground just to balance)- no brace necessary

CRUTCHES/WALKER

- Crutches or a walker may be needed to remain non/partial-weight bearing or just for balance. Follow the specific instructions you were given and adhere to the precautions recommended above.

SHOWERING

- You may shower after 48 hours. It is safest to sit while showering (on a tub bench or non-slip plastic chair or stool) or to have someone help you as your operative leg will be unable to be used to maintain balance.
- DO NOT SUBMERGE YOUR INCISIONS UNDER WATER. No hot tubs, pools or baths until you have been evaluated and cleared to do so by Dr. Shah.

WHAT TO EXPECT/WATCH FOR

- You will have pain, swelling, and soreness around the surgical site for at least a few days.
- A “squishy” sound, popping with movement, or a “slushy” feeling in the knee is common for a few days.
- Having fevers for the first few days after surgery is not uncommon. If temp is >101 degrees or accompanied by chills, sweats, increased pain, redness, or drainage at the incision site, please call us.
- Your toes may be slightly cool and have some tingling. Any true numbness or white digits are a concern. Call the office immediately. Numbness is expected if you had a “nerve block.”
- **Nerve Block-** If you had a nerve block performed by anesthesia, your pain will increase as it wears off. Take your pain medicine and stay ahead of the pain. If you have a catheter tube/pump, follow the instructions provided by the hospital and call the number they provided for nerve-block related questions.
- **Blood clots-** A DVT is a blood clot occurring in the veins of your lower leg. It is a rare complication of surgery. If you have calf pain, abnormal swelling, fevers, shortness of breath, or increased heart rate, please contact me or seek evaluation from a medical professional as soon as possible.

CONTACTING US

- The office # is 281-344-1715
- Dr. Shah’s medical assistant is Lupe Sanchez: guadalupe.m.sanchez@uth.tmc.edu
- Please feel free to also visit my website for more information and FAQs at www.SportsDocShah.com.

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