

Knee Arthroscopy with ACL Reconstruction
Postoperative Instructions
Stephanie Mayer, MD

Medications for Discharge: You were given the following medications:

PAIN

- Oxycodone 5mg tabs; take 1-2 tabs orally every 4 hours as needed for pain
- Tylenol 650mg orally every 6 hours for pain

NAUSEA/CONSTIPATION

- Zofran 4 mg oral dissolving tabs; take one tab and dissolve under tongue every 8 hours as needed for nausea
- Colace (docusate sodium) 50 mg orally twice daily as needed for constipation. Please take until you have your first normal bowel movement and continue to take as long as you are taking the Oxycodone.
- Miralax 1 capful-this medication is OTC. You make take 1-2 capfuls daily if no bowel movement has occurred in 24 hours.

INFLAMMATION

- Naproxen 500mg orally twice daily for 3 weeks regardless of pain to help control post-operative swelling and inflammation
- Aspirin – 325mg orally once daily for 14 days to prevent DVT (blood clot) formation.

Dressing:

- You may remove the dressing on post-op day #3 and apply xeroform, gauze and small tegaderm (in post op dressing kit provided to you) to wound sites to be changed every 2 days until your first clinic visit.
- Please do not use bacitracin or other ointments under the bandage.
- There will be small pieces of tape (steri-strips) on your incision under the dressing. You should leave these on until they fall off on their own, in about 2-3 weeks.
- **LEAVE THE STERI STRIPS OVER YOUR INCISIONS.** These will stay on for 1½-2 weeks and will slowly peel off. The sutures used are absorbable and will not need to be removed.
- Continue to use the ace wrap after the dressing has been removed, wrapping the whole leg from the foot to the thigh

Showering:

- **DO NOT SHOWER UNTIL POST OP DAY 3.**
- For first shower leave the clear dressing in place for shower then remove.
- After the first shower (day 3 post op) you may remove the dressing and let the water of the shower run down the leg, and pat dry then reapply the xeroform, gauze and tegaderm (provided to you in dressing kit) over each incision to allow the incisions to dry & heal.
- **SHOWER ONLY**
- Do not soak your incision in the bathtub, hot tub, or pool for at least 4 weeks to avoid risk of infection
- Typically getting into a bath or pool is permitted after the steri-strips have fallen off (around 4 weeks post surgery) unless otherwise instructed.

- If your incision is red, swollen, or has drainage please contact your physician ASAP.

Icing:

- Icing is very important to decrease swelling and pain and improve mobility. If you purchased a cold therapy device, please ice 6 times a day for 20 minutes at a time. Be sure to keep clothing or a towel between ice cuff and skin, as placing the ice directly on skin may cause a burn to the skin.
- If you did not purchase a cold therapy device please use ice packs 6 times a day for 20 minutes at a time. Be sure to keep clothing or a towel between ice cuff and skin, as placing the ice directly on skin may cause a burn to the skin.

Bracing:

- You will be put in a hinged knee brace after surgery. You are to remain in the brace with the brace locked straight at all times except when showering or while under direct supervision of your physical therapist, until instructed otherwise by physical therapist or physician.

Weight bearing: As indicated below. Brace worn at all times locked straight.

- weight bearing as tolerated
- 50% weight bearing (half of weight through crutches, half through surgical leg)
- Flat foot touch down weight bearing (weight of leg only about 20% bodyweight)
- Non-weight bearing

Range of Motion: As indicated below. Range of motion exercises can begin after your first physical therapy appointment.

- Full range of motion as tolerated
- Motion restricted: full extension – 90 degrees flexion

Nerve block: You may have been given an injection by an Anesthesiologist to block the conduction of a nerve which conducts pain and also controls some of your leg muscles. Therefore you should be relatively pain free for the first day, but you will have little control of your leg. Be careful not to place anything hot or sharp on the leg as you will have decreased sensation and this could cause injury to the leg or skin.

SCD's

- You will be given SCD's in preop and you should wear them as much as possible for the first 2 weeks. You can wear during sleep but ensure they are fully charged prior to sleeping. Do not wear while plugged in.
- Place the SCD around the lower leg (calf) under the knee brace

Ted Hose

- You were given white stockings that are knee high to be worn at all times on the non-operative leg for the first 2 weeks after surgery.
- You may remove for 1-2 hours daily.

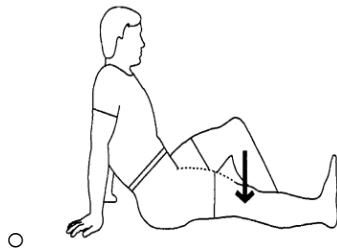
Activities After Surgery:

After knee surgery, it is normal to feel tired or tire easily for several weeks. You will likely need to take 1-2 weeks off of school and/or work for recovery.

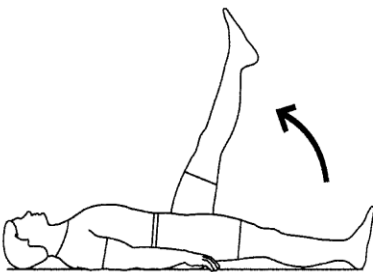
- Rest and elevate your leg for the first 24 hours. Continue elevating as much as possible for the next 6 weeks whenever you are sitting around at home/school.
- Do NOT place a pillow under knee. Elevate with pillow under your calf and ankle, being careful to place pillow so that no direct pressure is applied to the heel (foot should hang free) just past where the pillow is placed under the calf.

Exercises:

- Perform while wearing brace
 - Quadriceps contractions (5-10 per hour)
 - Sit with leg extended
 - Tighten quad muscles on front of leg, trying to push back of knee downward



- Straight leg raises (5 per hour)
 - Lie on back with knees straight
 - Keep back against mat, raise involved leg as high as possible while keeping both knees straight



Contact Information:

- If you are experiencing the following **symptoms**, please call our office at 720-872-4822 and ask to speak to Jordan Teboda (JT) our Athletic Trainer.
- If this occurs during evening and/or weekend please call 303-694-3333 and ask to speak to

the on call provider.

- If life threatening please call 911.
- ❖ Fever (temperature of 101.5 degrees Fahrenheit or over)
- ❖ Redness or yellow/brown/green drainage from the surgical incision site
- ❖ Low back pain/muscle spasm that maybe due to the spinal/epidural anesthesia. Please apply a heating pad.
- ❖ Persistent headache that maybe due to the spinal/epidural anesthesia. Please make sure you hydrate yourself and drink something with caffeine.
- ❖ Persistent severe sharp pain not relieved by pain medication
- ❖ Persistent and increasing swelling and numbness of the hip/leg.
- ❖ Difficulty with medications.
- ❖ If you experience Shortness of Breath

Please feel free to contact the office if you have any other questions at 720-872-4822 or you may email Jordan Teboda, ATC at Jordan.Teboda@cuanschutz.edu or reach out via My Health Connection.

Post-Operative Prescription Guidelines

All prescriptions will be given on the day of surgery or sent electronically no more than one day prior to surgery. Should you need refills, please contact the clinic within 48 business hours (Monday-Friday 8:30am to 4:30pm). **Refills will not be authorized outside of these hours.** Please have the phone number available of the pharmacy that you would like to utilize for your refills.

- One of the medications is a codeine derivative for pain and should be taken as directed and only as needed. After several days, pain may reduce significantly. At this point you may choose to cease taking or decrease the dose of the codeine derivative medication.
- The other medication you may be prescribed is called Indocin. It is in the drug named NSAIDs (non-steroidal anti-inflammatory) and will be given to you for 4 days starting the day after surgery.
- You will also receive another medication that is given as an anti-nausea agent, Zofran (use as needed).
- Aspirin will be given for 14 days to prevent DVT (Deep Vein Thrombosis).

Common symptoms of an allergic reaction to prescription medication include:

- Nausea and vomiting not relieved by lying down or eating bland foods.
- Severe itchiness
- Rash
- Severe dizziness
- Slowed heartbeat