

Knee Surgery

Lindsay Remy, MD | Kingsport, TN
423.578.1570 | LindsayRemyMD.com

Your surgery involved the following:

- | | | |
|--|---|--|
| <input type="checkbox"/> Meniscus Debridement: | <input type="checkbox"/> Lateral | <input type="checkbox"/> Medial |
| <input type="checkbox"/> Meniscus Repair: | <input type="checkbox"/> Lateral | <input type="checkbox"/> Medial |
| <input type="checkbox"/> Meniscus Transplantation: | <input type="checkbox"/> Lateral | <input type="checkbox"/> Medial |
| <input type="checkbox"/> Loose Body Removal | | |
| <input type="checkbox"/> Chondroplasty | | |
| <input type="checkbox"/> OATS (autograft or allograft) | <input type="checkbox"/> Trochlea | <input type="checkbox"/> Femoral Condyle (Med/Lat) |
| <input type="checkbox"/> Anterior Cruciate Ligament Reconstruction | <input type="checkbox"/> BTB | <input type="checkbox"/> Hamstring |
| <input type="checkbox"/> Patella Tendon Repair | <input type="checkbox"/> Quad Tendon Repair | <input type="checkbox"/> Quad |
| <input type="checkbox"/> Medial Patellofemoral Ligament Reconstruction | | <input type="checkbox"/> Allograft |
| <input type="checkbox"/> Other: | | |

Brace

- ☐ You do not require a brace.
- ☐ You have been placed in a hinged knee brace. Your brace should be locked in full extension except when in physical therapy. Dr. Remy and/or PT will instruct you regarding the discontinuation of the brace.
- ☐ You have been placed in a splint. This must stay clean, dry, and intact until your follow-up appointment.

Physical therapy

- ☐ Begin physical therapy within 7 days. You will be given a protocol to give to your therapist instructing him/her regarding the appropriate mobilization and limitations.
- ☐ Do not begin physical therapy until your first postoperative visit. You will then be instructed when you may begin therapy.

Activity

Weight bearing:

- ☐ **YOU MAY BEAR WEIGHT AS TOLERATED** on operative leg. Use crutches to assist with walking. Further discussion of the length of time crutches are necessary and brace use are included in your physical therapy instructions. If you had a nerve block, you should not attempt weight-bearing until the block has fully worn off.
- ☐ **DO NOT BEAR ANY WEIGHT ON YOUR OPERATIVE LEG.** Progression to increase weight-bearing status will be done at the instruction of Dr. Remy during your recovery from surgery.

Post Op Care

Ice: Apply an ice bag to the knee in a waterproof bag for 20 minutes on, 20 minutes off. Do not place ice directly on the skin. Direct contact for a prolonged period may cause a burn to the skin. If you have a cryotherapy unit, this is just cold water and can safely be run continuously. I recommend still avoiding direct contact with your skin and checking your skin every few hours and taking a break if very red or irritated.

Elevation: Elevate the operative leg above chest level whenever possible to decrease swelling.

Pillows: Do not place pillows under knees (i.e., do not maintain knee in a flexed or bent position), but rather place pillows under foot/ankle. This keeps the knee completely straight.

Sleeping: Keep your leg elevated even while sleeping if possible. Be sure to **sleep in the brace** if you have been given one after surgery.

Activities: Do not engage in prolonged periods of standing or walking over the first 7-10 days following surgery. Avoid long periods of sitting without the leg elevated. Avoid long distance traveling for 2 weeks.

Driving: **NO driving** until you are no longer taking narcotic pain medicine and adequate range of motion has been gained. You can speak with Dr. Remy and your physical therapist about when you can safely resume driving.

Dressing changes and incision care

Unless you are in a hard splint, you may change your dressing on **post-op day 3**. (Only patients in a splint need to keep the dressing on until follow-up). For example, if you had surgery on Thursday, you would change your dressings on Sunday. At this point you can take off the Ace wrap and remove the cotton padding underneath. Leave the Steri-strips in place. You may find some minor leakage, this is normal, before wrapping the leg with the Ace, place some gauze over the area. Change your dressings daily afterwards. Keep your incisions covered until you return for your post – op visit.

Keep your incisions dry for 1 week after surgery. You may shower after post-op day 3 with either waterproof band-aids over the incisions, a bag, or Saran wrap to keep the incisions dry. After 1 week, you may shower normally. Avoid being under water (baths, pools, etc) for the first 4 weeks.

Do NOT use *any* ointments/creams/lotions on your incisions for the first 4 weeks following surgery. If the incisions have healed with no scabs at that time, you can begin to apply some vitamin E cream if you are concerned about scar formation. You should keep your incisions protected from direct sunlight for the first year with clothing or band-aids to prevent the scars from becoming dark and thickened.

Medication

Pain medications: Generally, a short-acting narcotic pain medication is prescribed following surgery. Narcotic medicines may make you drowsy and/or dizzy, therefore driving a car or operating machinery is NOT ALLOWED UNDER ANY CIRCUMSTANCE. **Narcotic medicines are addictive and should be taken in the lowest dose and shortest duration needed to control your pain.** Tennessee law now severely limits the amount of pain medications that can be prescribed at surgery. Refills are rarely needed but according to new TN law, you now must be seen in person before a refill can be prescribed. You also must be seen in person in order for the type of prescription medicine to be changed.

Aspirin: It is recommended that you take a low dose aspirin daily (81mg) twice daily for 2 weeks if weight bearing and for 4 weeks if non-weight bearing to minimize the risk of blood clots. If you have ever had a blood clot (DVT or PE) or have a family history that puts you at high risk, please notify Dr. Remy as she may choose to prescribe a different blood thinner.

Follow-up care

First Physical Therapy Appointment:

Post Op Appointment:

When to call your surgeon

Call the office for any concern, especially those below. If after hours, the office number will connect you to an on-call provider. For emergent symptoms, please call 911 or go directly to the nearest ER.

- Fever > 101.5°F
- Increasing leg or calf pain
- Increasing swelling in calf or foot
- Hives, itching, rashes
- Shortness of breath or chest pain
- Vomiting that lasts more than 8 to 12 hours following surgery
- Drainage from incision sites that continues for more than 5 days follow surgery.

SPECIAL INSTRUCTIONS

☐ Please follow these instructions: