

INSTRUCTIONS FOR PATIENTS AFTER ROUTINE KNEE ARTHROSCOPY

1. Wound Care

Remove the entire dressing the day following surgery. Place regular Band-Aids over the incisions. It is normal to have some blood on the original dressing. There may be some spotting from the incisions for a few days. Be prepared to experience some swelling for the first few weeks. This is normal and a reflection of the fluid in your knee at the time of arthroscopy. You may continue to use the ACE wrap to help with the swelling and any possible drainage. You may take a shower the day following the surgery. After showering, dry the incisions with a clean towel and replace the Band-Aids. The incisions will have a little redness around them while they heal. If they get redder each day or if you notice excessive drainage after the first 72 hours following surgery, call the office.

2. Cold Therapy

Keep your operated leg elevated with some pillows under your ankle. Ice the knee 3 to 4 times a day at 30 minute intervals. It is important to remember to always ice your knee after exercise.

3. Pain Medicine

You will receive a prescription for pain medicine on or before the day of surgery. Do not mix the pain medicine with alcohol. As the knee becomes more comfortable you may substitute acetaminophen (Tylenol). Avoid Aspirin or Ibuprofen (Motrin, Advil) or other anti-inflammatory medication for about one week. These medicines can cause a bleeding tendency after surgery.

4. Physical Therapy and Exercises

No impact activities, especially running, are acceptable. Keep your leg elevated as much as possible when seated to help reduce the swelling. Begin range of motion exercises immediately. This includes attempting to straighten and bend the knee as much as possible. Continue the exercises 5-6 times daily until full range of motion is restored. Use a stationary bicycle with the seat elevated and the tension minimal the day following the surgery for about 30 minutes. Increase the tension by about 5-10 pounds every day. If you have access to a pool, swim for about 30 minutes a day 24 hours after the surgery.

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5. Work

If you have a desk job (minimal walking, standing or lifting), you may return to work as early as the next day, pain permitting. However, you can expect to be completely back at work within a week remembering to keep your leg elevated when seated. If your job involves more physical labor your return to work date will be determined during your follow-up appointments.

6. Follow-up

If a post-operative appointment has not been made prior to surgery, call the office within 48 hours following surgery to schedule an appointment for suture removal and examination two weeks from the date of surgery.

7. Possible Reactions

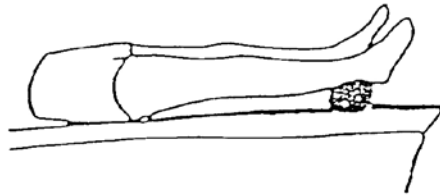
- i) *Fever* – a temperature of up to 101° is expected for the first two weeks following surgery. If this should occur, take Tylenol every four hours as needed. Call the office for fevers in excess of 102° that do not respond to Tylenol.
- ii) *Drainage* – a small amount of clear or blood-tinged drainage is expected for the first 72 hours following surgery. If you have excessive drainage following this period, or any thick or foul smelling drainage from the wound, call the office.
- iii) *Wound* – if the wound should open, notify the office immediately.
- iv) *Swelling* – you may experience swelling for many weeks after the surgery, this is normal. During the first two weeks after surgery, the swelling from the knee may gradually travel down to the calf and ankle. This is to be expected, as it is an effect of gravity.

If you have any further questions, feel free to call the office any time at (805) 495-3687. At nights or on weekends you may contact our answering service and ask for the on call.

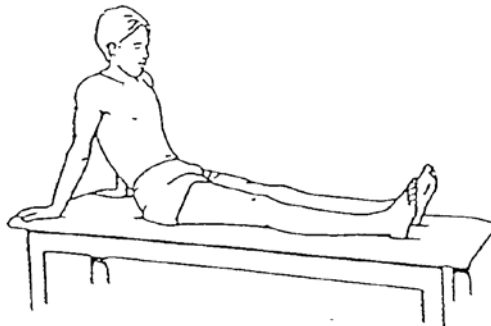
HOME EXERCISE PROGRAM AFTER KNEE ARTHROSCOPY

Perform 3 sets of 10 Repetitions of EACH exercise 3 times a day
(unless otherwise instructed). Ice after each session.

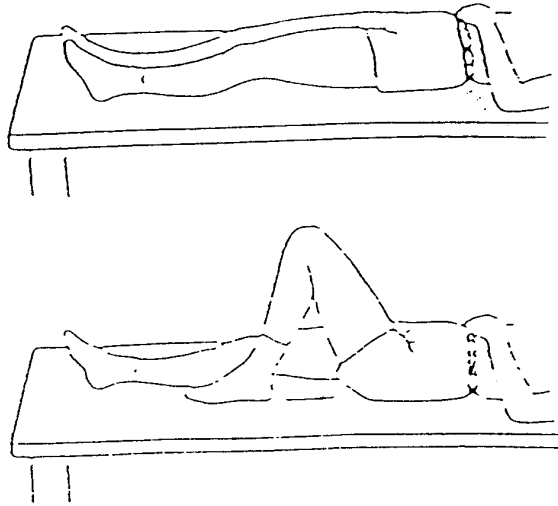
- 1 - Passive knee extension:
Lay with pillow or blanket roll
under your ankle for 10 minutes
4-5 times a day.



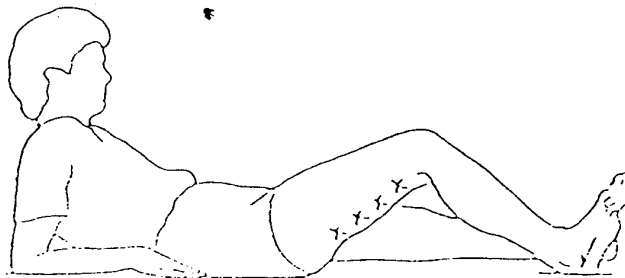
- 2 - Quad sets:
Lie on back with knee straight,
tighten thigh muscle, pushing
your knee into the supporting
surface - hold 5 seconds then
relax.



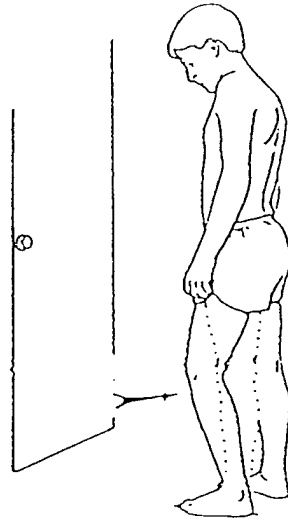
- 3 - Heel slides:
Lie on back, slide your heel
towards your buttocks.



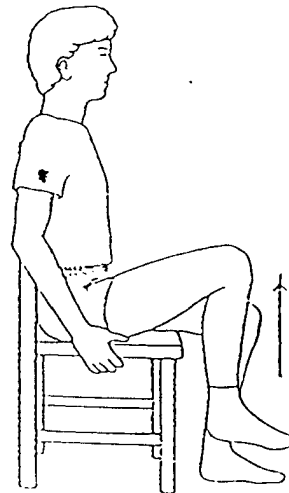
- 4 - Hamstring sets:
Recline on your back, supported
on your elbows. Slide your heel
towards buttocks so knee is
bent at a height of 6 inches.
Dig heel backwards into surface,
hold 5 seconds then relax.



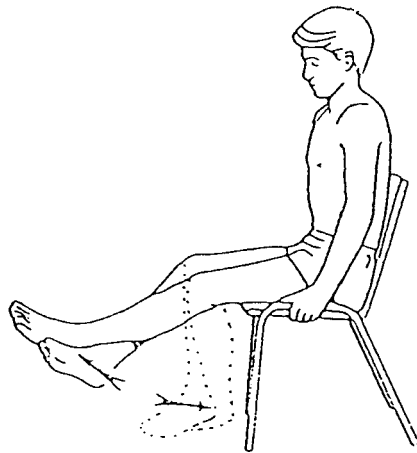
- 5 - Terminal Knee Extension:
Starting with knee slightly bent,
gently pull back knee by tightening
thigh muscles, straightening knee.
Do not overextend knee.



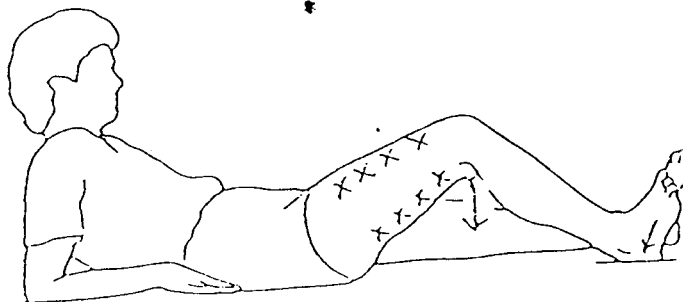
- 6 - Hip Flexion:
Sitting, lift operated knee to
chest. Keep back against chair.
Movement should be slow and
controlled.



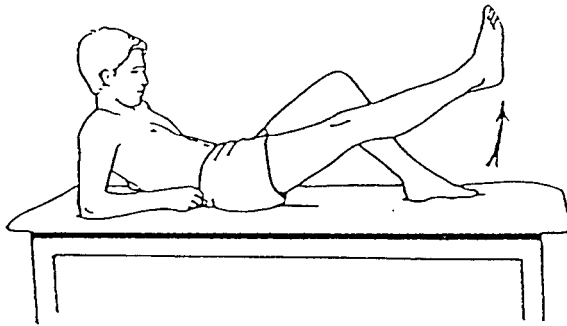
- 7 - Passive Knee Extension:
With unoperated leg underneath
operated leg, slowly straighten
leg out. Hold in straightened
position 1 second.



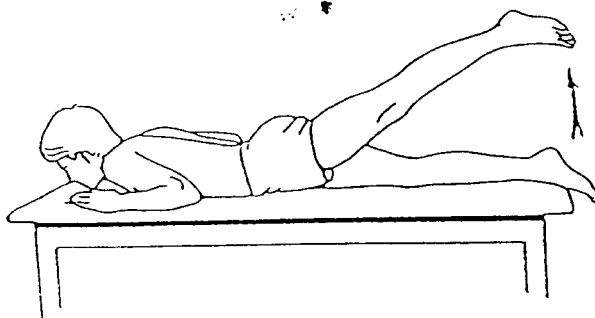
- 8 - Hamstring/Quad Co-Contraction:
Bend knee to height of 6 inches.
Dig heel back and down-hold.
While still digging heel back,
press the back of knee down.
Hold for 5 seconds then relax.



- 9 - Straight leg raise:
Rest on forearms, tighten muscle on front of thigh, then lift 8 inches, keeping knee locked but not hyperextended.

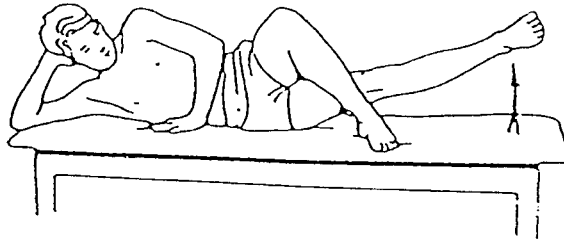


- 10- Prone Hip Extension:
Lying on stomach, tighten muscle on front of thigh, then lift leg 8 inches, keeping knee locked but not hyperextended.



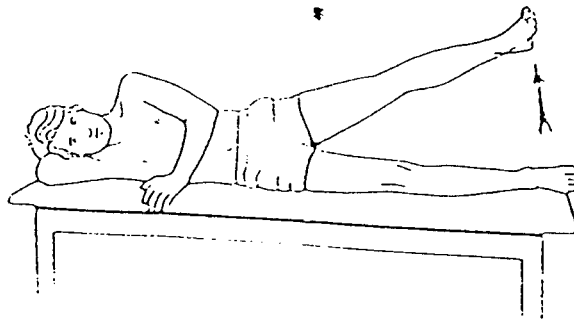
11- Hip Adduction:

Lying on side, tighten muscle
on front of thigh, then lift leg
8 inches away from floor.
Make sure knee cap faces forward.
Do not let it turn upwards.



12- Hip Abduction:

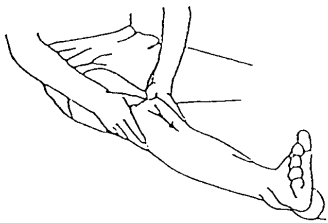
Lying on side, tighten muscle
on front of thigh, then lift leg
8 inches away from floor.



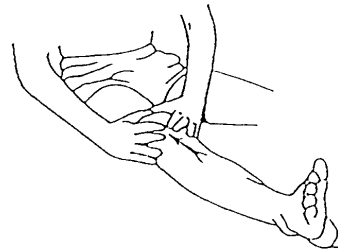
PATELLA (KNEE CAP) MOBILIZATION

Perform each of these mobilizations 5 times, 3 times a day

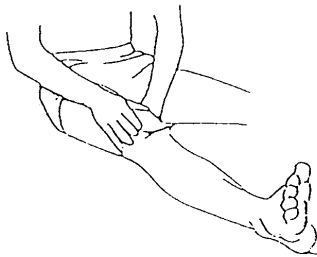
1 - Downward knee cap push.



2 - Upward knee cap pull.



3 - Inward knee cap push.



4 - Outward knee cap pull.

