



## Sheena Black, M.D.

Orthopaedic Surgery, Sports Medicine

469-800-7200

### Knee – Post Surgery Instructions

Please read this entire handout before calling the office with questions.

Follow-Up Appointment: Date: \_\_\_\_\_ Time: \_\_\_\_\_ Provider: \_\_\_\_\_

Office Location: Dallas (3900 Junius St. Ste 500) Frisco (3800 Gaylord Pkwy, Ste 810) McKinney (5220 W University Dr, Ste 300)

#### Weight-Bearing

- Weight-bear as tolerated (put full weight)** on the operative leg with 2 crutches/ walker x \_\_\_\_\_ week(s) for balance
- Partial weight-bearing (20% of your body weight)** on the operative leg with crutches/walker at all times. You may place operative leg down on the floor for **balance only**; as if you are “walking on eggshells.”
- Non-weight-bearing (Do NOT put any weight)** on the operative leg. Use crutches/walker at all times for ambulation.

#### Brace

- Not applicable
- Hinged knee brace:**
  - The brace should be worn **AT ALL TIMES** after surgery (Except for with physical therapy and CPM)
  - Keep brace locked in full extension while ambulating and sleeping (push 2 orange tabs on side of brace **DOWN** to lock the brace straight)
  - You may bend the knee to from 0 - \_\_\_\_\_ degrees when seated (pull 2 orange tabs on side of brace **UP** to unlock brace)
  - For more information about application/adjustments of brace see QR code



#### Dressing: (per checked box(s) below)

- Keep your dressing clean and dry. You may remove your dressing on **DAY 3** after surgery.
  - Steri-Strips:** Leave the small white tape strips in place until they fall off. Do not try to peel them off.
  - Nylon sutures:** Keep clean and dry. These will be removed at your first post-operative visit.
  - Dermabond (skin glue):** purplish skin glue placed over large incisions. This will wash off gradually with time. Do not try to peel this off.
  - Zip skin closure device:** see attached handout if applicable. **Do NOT remove** until you return for your 1<sup>st</sup> post-surgery visit
- **Some bleeding on the post-operative dressing is normal and expected.**

#### Showering/ Bathing:

- After day 3 you may shower and let water run over your incisions. Do not scrub directly over incision sites. Gently pat your incisions dry after and cover with a clean, dry bandage.
- It is best to sit while showering using a shower chair to prevent falls.
- Showering with a brace (if applicable): You may remove your brace in a seated position. Shower, gently pat your incisions dry, cover incision sites with a clean, dry bandage, and then reapply brace.
- Do not submerge your incisions under water (bath, hot tub, pool) until incisions have completely healed.



### Physical Therapy:

- Please arrange for an appointment 3-5 days after surgery to begin physical therapy.
- **Take your physical therapy prescription, protocol, and surgery pictures with you at that visit.**

### Medication Instructions

- You may resume your usual medications (unless otherwise instructed).

**Prescription medications:** You have been prescribed one or more of the following medications (per boxes checked below):

- Norco 5mg (hydrocodone)/ 325mg (Tylenol/acetaminophen) 1-2 tabs every 4-6 hours **as needed** for pain
  - Norco 10mg (hydrocodone)/ 325mg (Tylenol/acetaminophen) 1-2 tabs every 4-6 hours **as needed** for pain
  - Zofran 4 mg tabs – 1 tab q8h **as needed** for nausea.
  - Naproxen 500 mg tab – 1 tab twice daily for 30 days for swelling and inflammation. Take with food.
  - Aspirin Enteric Coated 81 mg - 1 tab by mouth **daily** for **30 days** to **prevent blood clots.**
  - Colace (Docusate) stool softener- 100mg twice as day for constipation while using narcotic pain medicine
  - \_\_\_\_\_
- **Medication Refills: BE PROACTIVE!** Please contact the office at 469-800-7200 during office hours at least **48-72 hours before** you run out of medication. **Narcotic pain medication refills must be sent by Dr. Black electronically to the pharmacy.**
    - o **\*\*\*Please note\*\*\*The on-call staff will NOT refill pain medications, under any circumstance!**

### Activity/Exercise:

- Always hold on to rail when going up/downstairs.
- Elevate your leg as much as possible when sitting to reduce swelling and pain
- DO NOT walk long distances, run, squat or jump during the first week after surgery.

### Home Exercises: (perform exercises per boxes checked below)

- Isometric Quadriceps Sets:** Sit or lie on your back with your leg and brace LOCKED OUT STRAIGHT. Tighten your quadriceps muscle on the front of your thigh. Hold 3 seconds, relax. Repeat x 10-15 reps twice a day.
- Straight Leg Raises:** Lie on your back with your leg and brace LOCKED OUT STRAIGHT flat on the bed. Start by tightening your quads. Then lift your leg off the bed until your heel isn't touching. Lower your leg back down. Repeat as tolerated, working up to 10-15 reps twice a day. **(This is a difficult exercise.)**
- Heel Pumps:** Using a sheet or towel looped around your foot, pump down against resistance (like pushing on an accelerator pedal). Do this 20-30 times three times daily.

### Driving

- **You are prohibited from driving while taking narcotics.**
- Driving reflexes and coordination can be impaired for several weeks after surgery. Most patients DO NOT drive prior to their first post-surgery appointment.
- The decision regarding when you can return to driving is different for every patient and depends on the surgery side, surgery type, weight bearing status, coordination, narcotic pain medication usage, and comfort returning to driving.

### Icing/ Cold Therapy:

- Use ice or your cold therapy machine three times a day for 30 minutes (or as directed) to minimize swelling and pain.
- Do NOT apply ice/cold therapy pad directly to skin to avoid skin burns. Check your skin regularly for blisters or a whitish blanching color.



Most orthopedic surgical procedures are uneventful. However, medical complications can occur, and we want all surgical patients to have an awareness of the things to look for and actions to take in the event of a postoperative complication. This can help to prevent an adverse outcome.

*PLEASE BE ADVISED OF THE FOLLOWING:*

1. **FEVER** – Low grade fever is common after bone and joint surgery, particularly in the first two days. A little fever during this time is not of concern. If your temperature rises above 101.5° F please call the doctor on call for advice.
2. **INFECTION**- Please have a member of Dr. Black's orthopedic surgery team evaluate you if there is concern for infection after surgery (*Not your PCP or local emergency room physician unless it is an emergency*).
  - Fever, chills, redness, increased drainage, elevated blood sugars, or increasing pain may be signs of an infection.
  - If you have any of these symptoms or questions, call 469-800-7200 during office hours.
3. **BLEEDING** – It is common to get a minor amount of bleeding that can soak through the bandages or surgical dressing. This is not of concern. Please call regarding excessive bleeding. Notify your surgeon if the wound drains any fluid later than five days after surgery.
4. **CARDIOVASCULAR** – If you develop chest pain, shortness of breath, or fainting spells, then you need to go to the emergency room for evaluation. If your symptoms are severe then call 911 rather than going in a private vehicle. Someone should notify the Orthopaedic Associates of Dallas doctor on-call and your family doctor as well.
5. **BLOOD CLOTS** – Orthopaedic surgery patients are at risk for blood clots, especially after lower extremity surgery. Please be sure to notify your surgeon if you or someone in your family has a history of such clots or any type of clotting disorder.

Obesity or use of oral contraceptives can increase the risk of blood clots. Women should consider not taking oral contraceptives while unable to walk normally without crutches, brace or cast on the leg.

Traveling after surgery - Realize that long air flights or car trips may also increase the chance of blood clots. You can lessen the risk of DVT by taking short breaks to either walk around or pump your foot against resistance (like stepping on the gas).

Signs of blood clots may include calf pain or cramping, diffuse swelling in the leg and foot, as well as chest pain, coughing, or shortness of breath. Please call if you recognize any of these symptoms.

6. **CONSTIPATION** – It is common to become constipated from taking narcotic based pain medications so you may need a stool softener / laxative. It is recommended that you take Dulcolax 100mg twice per day as needed, and this is available over the counter at any pharmacy. Increase your fiber and water intake after surgery to help avoid this.

***The main number of Orthopaedic Associates of Dallas is 469-800-7200 is answered 24/7, but should not be used for emergency situations. It is best to use 911 first in a true emergency, then call and notify us of the situation.***