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**Post-Operative Instructions**

**Manipulation Under Anesthesia +/- Knee Arthroscopy**

1. Remove the **dressing** on post-op day 3, or at your first Physical Therapy appointment. Leave the white strips (SteriStrips) intact at that time. Replace with clean Band-Aids or similar dressings to keep wounds clean and protect from friction/irritation.

2. Please do not use any ointments under the bandage. If Band-Aid / dressing gets soiled or wet: gently remove, pat area dry, then redress site(s).

3. Use **ice** as much as possible for the first 7 days and then as needed for pain.  **Ice should not be applied directly to the skin as it can cause burns.** Ice can be used in a 20 minutes on, 20 minutes off fashion. If you have a large bulky dressing in place, you may leave an ice pack on longer than 20 minutes. An ace wrap may be used to help control swelling. Do not wrap the ace too thickly or the ice will not penetrate.

4. You may **shower** on postoperative day 3 (72 hours after surgery); however do not soak/scrub or submerge the wound/dressing. Cover the area with tape and plastic wrap and pat dry after shower. Do not soak the knee in water or go swimming in the pool or ocean until wounds are fully healed, steri-strips are off and no more scabbing is present (usually around 4 weeks after surgery).

5. Keep your **leg elevated** with a pillow under your calf, NOT under the knee. Elevation only

helps to reduce swelling if your knee is above the level of your heart. It is normal to have some swelling in your calf and foot in the first few days after surgery, but calf pain should improve in a few days, not worsen.

6. **Crutches** are to be used as needed only for pain. Wean off crutches and bear weight as much as comfortable to improve muscle strength and range of motion after surgery.

7. You should already have a **post-operative visit** scheduled 1-3 days and 2 weeks after surgery. If not, call the office after surgery to make an appointment.

8. **You should be scheduled to see a Physical Therapist within 24 hours after surgery. If not already scheduled, please call ASAP. Start knee range of motion exercises as soon as possible after surgery to prevent recurrence of stiffness.**

9. If you develop a **fever** (101.5), redness or drainage from the surgical incision site,

 please call our office to arrange for an evaluation.

10. You will receive **prescriptions** for medication to be used after surgery: these may include a

narcotic pain medication, an anti-inflammatory, and/or an anti-nausea medication.

* Tylenol (acetaminophen)
	+ Take up to 975mg every 8 hours as baseline pain control. Can take on scheduled basis then as needed as pain control improves. Do NOT exceed 3000mg total in a 24 hour period, as this can cause damage to your liver. This is your baseline pain control.
* Narcotic Pain Medication: Oxycodone or Percocet
	+ Initially after surgery, you can take 1-2 tablets of the narcotic pain medication every 4-6 hours depending on your pain level. Once your pain is well controlled, you can taper off the medication.
	+ Generally used for 1-2 weeks after surgery
	+ May cause constipation and/or nausea
* Medrol dosepak
	+ Some patients will be prescribed a methylprednisolone (steroid) taper. This should be started on the day of surgery and completed as instructed on the package over 6 days
	+ Take with food; if significant side effects develop, stop taking medication
* Anti-inflammatory Medication: Meloxicam or Motrin/Ibuprofen
	+ Take scheduled for 30 days after surgery to decreased inflammation
	+ If you have any difficulty using anti-inflammatory medications or aspirin, or have a history of ulcer disease, do not use.
	+ You may use over the counter ibuprofen (Advil) or Naprosyn (Aleve) instead of the prescription we give you.
* Anti-nausea Medication: Zofran
	+ If you have nausea after surgery, call the office so that we can provide appropriate medication.

**Every patient is different: If Dr. Zogby gives you individual instructions (even if they are different from this handout), please follow them.**

**Phone: (760) 943-6700**

**\*\*If you have any questions, please feel free to call our office.\*\***