

Chris R. Mellano, MD

Office Phone: (310) 257-1500

Email: Mellano.orthopedics@gmail.com

Website: www.ossmd.com

Postoperative Instructions:

Knee Arthroscopy and Patellar Tendon Debridement

DIET

- Begin with clear liquids and light foods (jellos, soups, etc.)
- o Progress to your normal diet if you are not nauseated

WOUND CARE

- Maintain your operative dressing, loosen bandage if swelling of the foot and ankle occurs
- It is normal for the knee to bleed and swell following surgery if blood soaks through the ACE bandage, do not become alarmed – reinforce with additional dressing
- Remove surgical dressing on the third post-operative day if minimal drainage is
 present, apply dry gauze over incisions and change daily you may then shave around
 the wound as long as the wounds remain sealed with the band-aid
 - REMOVE THE ACE WRAP, GAUZE WRAP AND GAUZE. DO NOT REMOVE THE WHITE BANDAIDS (STERISTRIPS) ACROSS THE SKIN OR ANY SUTURE MATERIAL YOU NOTICE
- If you note increasing drainage on the gauze, increased redness around the wound (spreading), or milky drainage from the wound, please call the office
- To avoid infection, keep surgical incisions clean and dry you may shower by placing a large garbage bag over your brace starting the day after surgery – NO immersion of operative leg (i.e.bath)
- If you are not using a brace, keep the incisions dry for 3 days and when you shower on day 3, keep the incisions covered with gauze to avoid direct impact of water with the wound, and change this after the shower

MEDICATIONS

- The incisions are injected with a medication that makes the area numb; however, this
 will wear off in 8-12 hours. We recommend that you start pain medications when you
 get home so that they are on board before this wears off.
- Most patients will require some narcotic pain medication for a short period of time –
 this can be taken as per directions on the bottle and is given for a maximum of 6 weeks.
- Common side effects of the pain medication are nausea, drowsiness, and constipation to decrease the side effects, take medication with food – if constipation occurs, consider taking an over-the-counter laxative
- If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed (310-257-1500)
- o Do not drive a car or operate machinery while taking the narcotic medication
- Ibuprofen 200-400mg (i.e. Advil) may be taken in between the narcotic pain medication to provide baseline relief, reducing the overall amount of pain medication required, and increase the time intervals between narcotic pain medication usage
- We recommend all patients take 81mg of Aspirin daily starting the day after surgery for
 3 weeks to help prevent blood clots.



Chris R. Mellano, MD

Office Phone: (310) 257-1500

Email: Mellano.orthopedics@gmail.com

Website: www.ossmd.com

ACTIVITY

- Elevate the operative leg ABOVE chest level whenever possible to decrease swelling.
 This involves lying completely flat with the leg elevated. The first 48 hours is a balance between mobilization (which is encourage) and elevation (to be done whenever possible).
- DO NOT PLACE A PILLOW UNDER THE BACK OF YOUR KNEE (i.e. do not maintain knee in a flexed or bent position). Pillows should be under the ankle which will keep the knee straight when elevating. You will feel a pull at the back of the knee when you perform this, this is normal.
- Crutches are only for support the first 24-28 hours after surgery, feel free to walk without crutches as soon as you believe you can safely do so.
- Do not engage in activities which increase knee pain/swelling (prolonged periods of standing or walking) over the first 7-10 days following surgery
- o Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks
- NO driving until instructed otherwise by physician and no driving while taking narcotics
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable
- BRACE (Note: Dr. Mellano or his staff will alert you if a brace is necessary)
 - Your brace should be worn at all times (day and night except for exercises)
 - Keep brace locked in extension while weight bearing with crutches until your first postoperative visit unless otherwise instructed by the physician
 - Unlock brace for flexion (bending) and other exercises done in a non-weight bearing position (i.e.lying or sitting)

ICE THERAPY

- Begin immediately after surgery
- Use icing machine or ice (if machine not prescribed) every 2 hours for 20 minutes daily until your first post-operative visit. Icing is a perfect time to also perform elevation.

EXERCISE

- IMMEDIATELY AFTER SURGERY: Perform straight leg raise and ankle pumps directly after surgery. Try to do 100 of each, each day. This can be broken down into 10 sets of 10 reps
- You cannot do too many ankle pumps (another good reminder is to do them during commercials on TV)
- Discomfort and knee stiffness is normal for a few days following surgery
- Formal physical therapy (PT) will begin after your first post-operative visit and the script is provided to you the day of surgery.

• EMERGENCIES**

- Contact Dr. Mellano at 310-257-1500 if any of the following are present:
 - Painful swelling or numbness
 - Unrelenting pain
 - o Fever greater than 101.5° at least 48 hours after surgery surgery) or chills
 - Redness that is spreading around incisions



Chris R. Mellano, MD

Office Phone: (310) 257-1500

Email: Mellano.orthopedics@gmail.com

Website: www.ossmd.com

- Continuous drainage or bleeding from incision (a small amount of drainage is expected)
- o Excessive nausea/vomiting
- Difficulty breathing/chest pain Consider going directly to the emergency room if this is persistent
- **If you have an emergency after office hours or on the weekend, contact the same office number (310-257-1500) and you will be connected to our page service – they will contact Dr. Mellano
- *Do NOT call the hospital or surgery center.
- **If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

FOLLOW-UP CARE/QUESTIONS

- You will receive a call within 48 hours of surgery to check on your status. Typically this will be the night of surgery
- If you have additional questions that arise at any time, feel free to email Mellano.orthopedics@gmail.com
- If you do not already have a postoperative appointment scheduled, please contact the office during normal office hours (310-257-1500) and ask for appointment scheduling.