

John Palsis, MD

(321) 361-5550

(321) 728-7553 (fax)

info@beyondthescopeortho.com

www.beyondthescopeortho.com



Knee Arthroscopy – Postoperative Instructions

Dressing: After surgery, the wound is covered with gauze and ACE wraps. These should be left in place for **3 days**. Due to the large amount of fluid used during arthroscopy, it is normal to see some bloody drainage on the dressings. If bright red blood soaks through the dressings, please call Dr. Palsis's office. After 3 days, the dressing can be removed and wounds covered with dry gauze or waterproof Band-Aids. **Do not remove the paper tapes/strips or cut any of the visible sutures.** You can reapply the ACE wrap to control swelling.

Showering: Unless otherwise instructed, you may shower 2 days after surgery, but you must keep the dressing/wounds dry. **Do not soak the operative leg (no baths, hot-tubs, or pools)** for 4 weeks or until allowed by Dr. Palsis to avoid risk of infection.

Ice Therapy: Icing is very important for the first 5-7 postoperative days to decrease swelling and pain. While the postoperative dressing is in place, icing can be continuous. Once the dressing is removed on the third operative day, ice can be applied for 15-20 minute periods, 3-4 times per day. Care must be taken with icing to avoid frostbite to the skin.

Elevation: Rest and elevate your leg for the first 48-72 hours. **Do not place a pillow under your knee.** Instead, elevate with a pillow under your calf and ankle with your knee kept straight.

Activity: Unless otherwise instructed, you should begin range-of-motion, straight leg raises, and ankle pump exercises on the first day after surgery. Do not engage in activities that increase knee pain/swelling (prolonged periods of standing or walking) over the first 7-10 days after surgery. While exercise is important, don't overdo it. Common sense is the rule.

Weight Bearing:

- Full weight bearing — use crutches only if needed
- Toe-touch (restricted) weight bearing — use crutches to keep weight off the leg
- Other:

Medications:

- **Pain Control:** For most patients, a nerve block is provided by the anesthesia team before surgery to help with postoperative pain control – while every patient is different, this will typically wear off within 12-24 hours. Most patients will require some narcotic pain medication (e.g., Vicodin, Norco, Percocet, or other codeine-derivative) for 1-3 days after surgery – please take as instructed. It is important not to drink alcohol or drive while taking narcotic medication. If your pain is minimal, you may discontinue the use of narcotics. Ibuprofen (Advil) 400-800 mg can be taken as needed in between doses of narcotic pain medication for additional pain control.
- **Blood Clot Prevention:** Unless otherwise instructed, take a **baby aspirin (81 mg) daily for 2 weeks** following surgery. This may lower the risk of a blood clot developing after surgery. Should severe calf pain occur or significant swelling of calf and ankle, please call the doctor.
- **Nausea:** The anesthetic drugs used during your surgery may cause nausea for the first 24 hours. Some patient will require anti-nausea medication (e.g., Zofran, Phenergan) for 1-3 days after surgery—please take as instructed. If nausea and vomiting become severe, or if you show signs of dehydration (lack of urination), please call Dr. Palsis’s office.
- **Constipation:** The use of narcotics can lead to constipation. Adequate hydration and over-the-counter stool softeners (e.g., docusate) can minimize constipation problems.
- **Normal Medications:** Resume the day after surgery unless otherwise instructed.

Diet: Following surgery, begin with clear liquids and light foods. You can progress to your normal diet if not nauseated.

Postoperative Appointment: Dr. Palsis will need to reexamine you 10-14 days after your procedure. Please call the office at (321) 361-5550 to schedule a follow-up appointment if not already scheduled.

Driving: No driving until permitted by Dr. Palsis.

Work/School: May return to sedentary work or school 3-4 days after surgery, if pain is tolerable.

Phone Numbers and Other Helpful Information:

- A low-grade fever (up to 100.5 degrees) is not uncommon in the first 48 hours. Please call Dr. Palsis’s office with any temperature over 101.3 degrees.
- Please call Dr. Palsis’s office if you have severe pain that your pain medication does not relieve, persistent numbness of the hand, fever over 101.3 degrees, redness/warmth around the incision(s), persistent drainage/bleeding from the incision(s), difficulty breathing, chest pain, excessive nausea/vomiting, or if you experience redness or swelling in your thigh or calf.
- If unexpected problems occur and you need to speak to someone, please call the doctor. If calling after office hours or on the weekend, call (321) 361-5550.
- If you have an emergency that requires immediate attention, proceed to the nearest emergency room.