

Patient Discharge  
Instructions #1



## Arthroscopic Knee Surgery

Physician: Dr. Berasi

OrthoNeuro

Phone: (614) 890-6555

### Arthroscopic Knee Surgery: Meniscectomy And/Or Chondroplasty

Arthroscopy has become the standard way of operating on meniscal tears, chondromalacia, and many other knee disorders. This is done on an outpatient basis (you go home the same day) and may be done under general anesthesia, spinal anesthesia, or local anesthesia. Small shavers and cutting instruments are used to remove and contour tissue that is not repairable. You will have several small incisions made around the knee. Your knee will be filled with fluid, and the sensation of fluid in your knee after surgery is normal. You should expect your knee to be stiff, swollen and uncomfortable for the first few weeks after surgery.

Please view our website at [www.OrthoNeuro1.com](http://www.OrthoNeuro1.com) for more information. Click on Patient Education, then click on Knee. The Viewmedica window has information on anatomy, conditions, and surgical techniques. There is also an option to print the information.

*Patients having a meniscus repaired will be given special instructions.*

### Before Surgery

- ◆ Please read all of your instructions and follow them carefully.
- ◆ Dr. Berasi tries to speak with every patient immediately before surgery. On rare occasions, he may not be able to do so, if your case is moved to a different OR in order to expedite your treatment.
- ◆ Your surgery time is an estimate that depends upon coordinating patients, personnel, doctors, OR rooms, and equipment. We apologize if you must wait, but rest assured that we will take all the time needed to do your surgery.
- ◆ Dr. Berasi will call your family immediately upon completing your surgery. If your family is not available at that time, please call the office the following day.

- ◆ Arthroscopic pictures will be taken and explained to you at your first office visit. You will also receive a copy of the pictures.

### Diet

- ◆ Return to your normal diet slowly. Start with liquids. Progress to a regular diet if you are not nauseated.
- ◆ Do not drink any alcoholic beverages for 24 hours or while you are taking narcotic pain medication.
- ◆ You will need a diet high in fiber until you return to your usual activities.
- ◆ If you are diabetic, check with your family physician about diet and medication.

### Safety and Activity

- ◆ Arrange for an adult to drive you home from the hospital and stay with you for the first 24 hours after surgery.
- ◆ Limit your activity for 24 hours. You may feel dizzy; take care as you walk or climb stairs.
- ◆ Do not drive or operate machinery for 24 hours or while you are taking narcotic pain medication.
- ◆ Do not make important personal decisions or sign legal papers for 24 hours.
- ◆ You may put as much weight on the operative leg as comfortable. You will be given crutches for safety. Use the crutches until you can walk safely and comfortably. Most patients are able to walk without crutches in a few days.
- ◆ Return to sports depends on the type of sport and the position played. It may take 3-6 weeks before sports can be resumed after meniscectomy or chondroplasty. Full knee motion and strength are necessary before sports can be resumed.
- ◆ Return to work depends on the type of employment. Seated work can usually be performed in a few days, while heavy labor jobs require up to 6 weeks. Please discuss with Dr. Berasi if you have any questions.
- ◆ Postoperative rehabilitation and exercises are very important to regain motion and then strength. Begin the exercises on page 4 on the 1st day after surgery.

## Pain Management

- ◆ Rest and take your pain medication as needed.
- ◆ You will be given prescription pain medication by your physician. Some patients do well taking ibuprofen, 600mg-800mg every 8 hours with food, if they have no contraindications.
- ◆ If you have no contraindications, also take one 325mg. aspirin daily with food for the first two weeks.
- ◆ Icing the knee 15-20 minutes each hour will help reduce swelling. Do not apply ice directly to the skin. Use a towel to wrap the ice. If you are given a cold device, follow the instructions carefully.

## Wound Care

- ◆ You may change the dressing and shower in 1-2 days. Apply band-aids to the incisions.
- ◆ Cut your ace bandage in half and continue to wrap your knee until all swelling has resolved.
- ◆ Keep the foot and ankle elevated above heart level as much as possible for the first 1-2 weeks after surgery. Continue to do so if you have swelling.
- ◆ Swelling and the sensation of fluid within the joint are normal for the first few weeks.

## Post Anesthesia Instructions

- ◆ If you received general anesthesia, you may have a dry, raspy sore throat. Throat lozenges may relieve this. You may also have 1-2 days of muscle soreness.
- ◆ If you received spinal or epidural anesthesia, you may have pain at the injection site. Rarely patients may have a headache. If you do, stay in bed (getting up to go to the bathroom only), drink plenty of fluids and take Tylenol (Acetaminophen) 650 mg. every 4 hours. Do not exceed 4000 mg. in a 24 hour period. Call us at (614) 775-6600 if you have not urinated within 6 hours, your headache persists after 2 days, you develop new leg weakness or numbness, or you experience an inability to control your bowels or bladder.
- ◆ After a regional nerve block, you may not have return of movement or feeling to the operative leg for up to 24 hours after the block is placed. Protect the affected leg until normal movement and feeling return. No weight bearing on any blocked (numbed) leg until weakness and numbness is completely gone. Some pain at the injection site is normal. If you have severe pain at the injection site, contact the Anesthesia Department at (614) 775-6600.

## Follow Up Appointment

- ◆ Make an appointment to see Dr. Berasi in 6-10 days.

*Contact your doctor immediately if you have any of the following:*

- ◆ Heavy or persistent bleeding.
- ◆ Difficulty breathing or swallowing.
- ◆ Fever over 101°F.
- ◆ Changes in the color or temperature of your foot or toes.
- ◆ Sudden onset of numbness after nerve block resolved.
- ◆ Sudden, severe pain or pain not relieved by medication.
- ◆ Redness, swelling or pus around the incision.
- ◆ Inability to urinate within 6 hours of leaving the hospital.

*For after hour emergencies, contact the doctor at (614) 890-6555. If symptoms are severe, go to the nearest emergency room or call 911.*

### Range of Motion and Stretching Exercises

#### Meniscus Tear, Surgery For: Phase 1

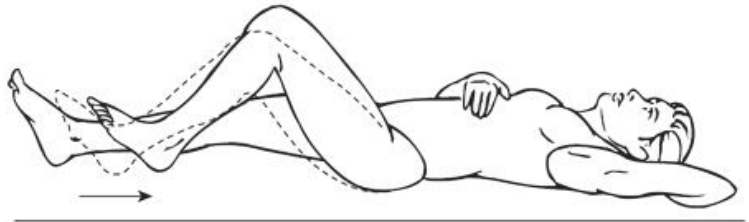
These are some of the initial exercises you should perform, beginning the day after surgery, and continue until you see your physician, physical therapist, or athletic trainer. Please remember:

- ◆ Flexible tissue is more tolerant of the stresses placed on it during activities.
- ◆ Each stretch should be held for 5-10 seconds.
- ◆ A *gentle* stretching sensation should be felt.

*Repeat Each Exercise 10 Times, 4 Times Per Day*

#### Range of Motion \* Knee Flexion

1. Lie on your back with your legs out straight.
2. Slowly slide your heel toward your buttocks. Bend your knee as far as is comfortable to get a stretching sensation.
3. Hold for 5 seconds.
4. Return your leg to the starting position.



## Strengthening Exercises

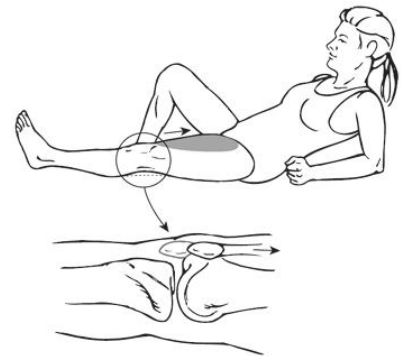
### Meniscus Tear, Surgery for: Phase 1

These are some of the *initial* exercises you may start on your first day after surgery and continue until you see your physician, physical therapist, or athletic trainer again or until your symptoms are resolved. Please remember:

- ◆ Strong muscles with good endurance tolerate stress better.
- ◆ Do the exercises as *initially* prescribed by your physician, physical therapist, or athletic trainer. Progress slowly with each exercise, gradually increasing the number of repetitions and weight used under their guidance.

#### Strength \* Quadriceps, Isometrics

1. Lie flat or sit with your leg straight.
2. Tighten the muscle in the front of your thigh as much as you can, pushing the back of your knee flat against the floor. This will pull your kneecap up your thigh, toward your hip.
3. Hold the muscle tight for 5 seconds.



#### Strength \* Quadriceps, Short Arcs

1. Lie flat or sit with your leg straight
2. Place a 1 inch roll under your knee, allowing it to bend.
3. Tighten the muscle in the front of your knee as much as you can, and lift your heel off the floor.
4. Hold this position for 5 seconds.



#### Range of Motion \* Active Dorsi/Plantar Flexion

1. Pull your toes and foot toward your body as far as possible, then point the foot and toes away from your body as far as possible.
2. Hold this position for 3 seconds. Perform this exercise with the knee straight and then with the knee bent.

