
POST-OPERATIVE INSTRUCTIONS

Procedure:

Wound Care:

- You may remove the dressing in 2-3 days and apply clean 4x4 gauze bandages and ACE wrap to wounds. You may shower after 2-3 days. No soaking, bathtub / swim until 4 weeks post-operative.

Sutures:

- Absorbable skin sutures were used. No suture removal is necessary.
- Nonabsorbable skin sutures were used. Suture removal will be at first post-operative visit (1-2 wks).

Ice:

- A Cold therapy pad/wrap has been applied. Use it frequently (20 minutes on and 20 minutes off) during the first 2-3 days after surgery for compression and cold therapy. Use as needed after this.
- Apply ice packs frequently to the area during the first 2-3 days (20 minutes on and 20 minutes off) after surgery and then as needed.

Weight-Bearing

- Weight bearing as tolerated in brace. Use crutches as needed for pain or limp. When pain and limp are improved, then you may walk as tolerated without crutches.
- Non - Weight Bearing for _____ weeks.
- Touch-Down (Toe-touch/Heel-touch) weight bearing in brace. Use crutches and bear minimal weight for _____ weeks.

Follow-Up Appointment:

- Follow-up with Dr. Schlechter in _____ week(s). If you do not already have an appointment, call the office at (949) 600-8800 extension 205 to schedule one.
- Follow-up with Dr. Schlechter in _____ week(s). If you do not already have an appointment, call the clinic at (714) 509-8402 to schedule one.

Brace

- Knee Immobilizer. Use full-time, as much as possible, until post-operative visit. May remove for showering and use of cryocuff.
- Range of Motion Brace. Use full-time including sleep. Brace locked straight at all times. May remove for showering/CPM use/Physical Therapy/Home Exercise.
- Shoulder Immobilizer. Use full-time including sleep x 4 weeks. May remove for showering/CPM use/Physical Therapy/Home Exercise including elbow motion several times daily.

Continuous Passive Motion Machine (CPM) Home CPM will be arranged for you.

- CPM machine for 3-4 weeks. Use for 6 hours daily (can be broken up into 1-2 hour intervals) at a comfortable speed. Start at a comfortable range (0-30) with a goal to achieve -
Motion: 0-45° week 1, then 0-60° week 2, 0-90° week 3 then advance as tolerated

Medications:

- A prescription _____ for pain has been provided. *Use as prescribed.* Do not drive, operate machinery, or drink alcohol while on the medication. Add a non-steroidal anti-inflammatory medication (ibuprofen (advil, motrin), naprosyn (alleve), etc) for additional pain control. You may alternate the prescription pain medication with the anti-inflammatory every 3 hours.
- Please take Aspirin 325mg twice daily x 3 weeks
- Please take _____ antibiotic as prescribed.

Swelling:

Maximal swelling occurs during the first 24-48 hours after surgery. Elevate area to minimize.

Driving:

You may resume driving when you have full control of your limbs and pain free motion.

Contact Information:

Contact the office (Call 714-633-2111) for problems or concerns, such as persistent fever over 101°F, marked wound redness, excessive wound drainage, pus, numbness or tingling, or severe pain unrelieved by pain medication. A physician is available at all times.

Therapy

- No formal physical therapy will be necessary.
- Formal physical therapy will be arranged, with specific therapist instructions, at the first post-operative visit. You may wish to set up an appt with physical therapy in advance (2-3 sessions/wk).
- Until formal physical therapy, you may do the following home exercises:
 - Ankle pumps: Move ankle up and down. 30 reps, 3 times daily.
 - Straight Leg Raise: On your back with knee straight, lift leg up. 30 reps, 3 times daily.
 - Quad Sets: On your back push your knee back straightening it as much as possible. 10-20 reps, 12 times daily.
 - Assisted ROM: Over the side of a table, let the operated knee go through a range of motion as tolerated by pain from full extension to 90° flexion. Use the unoperated side to assist by placing that foot under the heel of the operated leg. 30 reps, 3 times daily.
 - Passive Extension: Lying on your belly, let your knee hang over the bed and let it straighten out. 10 minutes, 3 times daily.
 - Patellar Mobilization: Grasp the kneecap and move it up, down, and to both sides as tolerated by pain. 30 reps, 3 times daily.
 - Stationary Bike: Raise the seat up to minimize knee flexion to less than 45°. No resistance. 15-20 minutes per day.
 - Heel Slides: On your back with the foot of your operated leg on the table and a towel around the front of your ankle, slide your foot backward towards your buttock, using the towel. 5 reps, 3 times daily.
 - Shoulder Pendulum: From standing position bend from waist, let arm hang straight down, gently move arm in circular motion clockwise and counterclockwise x 10, 3 times daily.
 - Hip Pendulum: Stand on step supported by non operative leg, allow operative leg to hang off edge, gently move leg in circular motion clockwise and counterclockwise x 10, 3 times daily.
 - Hip flexion/extension 0-90 degrees: Same positioning as hip pendulum, move leg forward and backward not exceeding 90° x 10, 3 times daily.

-No weight lifting or water therapy during first two weeks.

- If an exercise is very painful, stop doing it or do it within the limits of motion that is not painful.

-Major therapy gains are not achieved during the first two weeks. This is mainly a recuperative period. Formal physical therapy will commence after your first post-operative visit.