Dr. Paul Grutter, MD Johns Hopkins Fellowship Trained Shoulder Surgery-Sports Medicine-Joint Replacement

lcing: Cryotherapy (icing an injury) has been shown to decrease pain, improve sleep and decrease the need for pain medications. There are many different methods for icing. These can be as simple as putting a bag of ice on the injured area to as complex as using state of the art cold therapy compression devices. If you elected to get a cold therapy device, please refer to the device handout for instructions on proper usage. Ice the knee for 20-30 minutes each hour as needed. This is especially important for the first 48 hours after surgery. Be sure to protect your skin by placing a T-Shirt or cloth between your skin and the cooling unit or icepack.

Warning: any type of cryotherapy can be cold enough to seriously injure the skin. When using cold therapy, inspect the skin at least every 10 minutes. Stop using cold therapy if you experience any adverse reactions, such as: increased pain, burning, blisters, increased redness, discoloration, welts, or skin changes.

Swelling: Keep your leg elevated as much as possible for the first few days after surgery.

Bathing/ Showering: Keep the incisions dry for at least 5 days after surgery. If the incisions are dry, you may shower 5 days after your surgery. Avoid water directly hitting the knee. Do not soak in a tub, hot tub or swim.

Dressing Care: You will leave the hospital with a TED hose on your leg and a dressing covering your knee. You may remove the dressing 72 hours after surgery. You may find some small pieces of tape over the incisions. These are "steri-strips" and must stay in place. Place regular Band-Aids over the incisions and put the TED hose back on. Keep the incisions clean and dry. If the incisions are dry, you may shower, but should yold water directly hitting the knee. Do not soak in a tub or swim. If you are uncomfortable removing

avoid water directly hitting the knee. Do not soak in a tub or swim. If you are uncomfortable removing your dressing, you may leave it in place until your first follow-up appointment.

TED Hose: It is common to have swelling in the legs, ankles and feet after surgery. It is beneficial to wear TED hose until your follow up appointment to decrease swelling. It is ok to remove the stockings if they are uncomfortable or to wash them. It is best to wear them as much as possible.

<u>Bearing Weight:</u> After most arthroscopic surgeries, you can walk unassisted but your orthopaedic surgeon may advise you to use crutches, a cane, or a walker for a period of time after surgery. You can gradually put more weight on your leg as your discomfort subsides and you regain strength in your knee.

<u>Driving</u>: It is illegal for you to drive if you have any disability or if you are taking narcotic pain medication. You may drive when your leg is pain free and you are not taking narcotic pain medications. This is usually after a one to two weeks.



<u>Medications:</u> Generally you will be prescribed a narcotic pain medication to help relieve discomfort following surgery. Narcotic pain medications are constipating, so it is important that you eat a high fiber diet and drink plenty of water while you are taking them. You can not drive or operate any kind of machinery while taking pain medications. Do not drink alcohol while taking pain medications. It is important to take these medications as directed and only take them as necessary for pain.

Warning Signs: Call your orthopaedic surgeon immediately if you experience any of the following:

• Fever of 101.5° F or higher.

Contact Us: (615)-675-2000

• Persistent warmth or redness around the knee.

· Chills.

Persistent or increased pain.

Unusual bleeding (some surgical wound drainage is normal)

Contact Us: (615)-675-2000

• Numbness or tingling in the leg.

Go to the Emergency Room immediately if you experience any CHEST PAIN or SHORTNESS OF BREATH, as these symptoms can be a sign of a life threatening condition.

<u>Follow-up Appointment:</u> You should have a follow-up appointment to see Dr. Grutter 10-14 days following surgery. If your follow-up appointment was not previously scheduled please call the office when you get home.

Knee Arthroscopy Exercise Guide: Regular exercise to restore your knee mobility and strength is important. This can be carried out at home or with formal physical therapy. You should exercise 20 to 30 minutes 2 to 3 times a day. As you increase the intensity of your exercise program, you may experience temporary set-backs. If your knee swells or hurts after a particular exercise activity, you should lessen or stop the activity. You should Rest, Ice, Compress (with an elastic bandage), and Elevate your knee (R.I.C.E.). Contact your surgeon if the symptoms persist.

Initial Exercise Program	
Hamstring Contraction: 10 Repetitions - No movement should occur in this exercise. Lie or sit with your knees bent to about 10 degrees. Pull your heel into the floor, tightening the muscles on the back of your thigh. Hold 5 seconds, then relax. Repeat 10 times.	
Quadriceps Contraction: 10 Repetitions - Lie on stomach with a towel roll under the ankle of your operated knee. Push ankle down into the towel roll. Your leg should straighten as much as possible. Hold for 5 seconds. Relax. Repeat 10 times.	
Straight Leg Raises: 10 Repetitions - Lie on your back, with uninvolved knee bent, straighten your involved knee. Slowly lift about 6 inches and hold for 5 seconds. Continue lifting in 6-inch increments, hold each time. Reverse the procedure, and return to the starting position. Repeat 10 times. Advanced: Before starting, add weights to your ankle, starting with 1 pound of weight and building up to a maximum of 5 pounds of weight over 4 weeks.	
Buttock Tucks: 10 Repetitions - While lying down on your back, tighten your buttock muscles. Hold tightly for seconds. Repeat 10 times.	
Straight Leg Raises, Standing, 10 Repetitions - Support yourself, if necessary, and slowly lift your leg forward keeping your knee straight. Return to the starting position. Repeat 10 times Advanced: Before starting, add weights to your ankle, starting with 1 pound of weight and building	

Intermediate Exercise Program

Terminal Knee Extension, Supine, 10 Repetitions - Lie on your back with a towel roll under your knee. Straighten your knee (still supported by the roll) and hold 5 seconds. Slowly return to the starting position. Repeat 10 times. Advanced: Before starting, add weights to your ankle, starting with 1 pound of weight and building up to a maximum of 5 pounds of weight over 4 weeks.



Straight Leg Raises, 5 Sets, 10 Repetitions - Lie on your back, with your uninvolved knee bent. Straighten your other knee with a quadriceps muscle contraction. Now, slowly raise your leg until your foot is about 12 inches from the floor. Slowly lower it to the floor and relax. Perform 5 sets of 10 repetitions. Advanced: Before starting, add weights to your ankle, starting with 1 pound of weight and building up to a maximum of 5 pounds of weight over 4 weeks.



Partial Squat, with Chair, 10 Repetitions - Hold onto a sturdy chair or counter with your feet 6-12 inches from the chair or counter. Do not bend all the way down. DO NOT go any lower than 90 degrees. Keep back straight. Hold for 5-10 seconds. Slowly come back up. Relax. Repeat 10 times.



Quadricep Stretch - Standing, 10 Repetitions - Standing with the involved knee bent, gently pull heel toward buttocks, feeling a stretch in the front of the leg. Hold for 5 sconds. Repeat 10 times.

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