



Post-Operative Instructions: Knee Arthroscopy

Prescription Medications

Colace (Docusate Sodium):

- This medication is to help with constipation, a common side effect after taking narcotic pain medications (like Norco) and general anesthesia.
- Take 1 pill in the morning and 1 in the evening to prevent constipation.
- It is normal to take several days to make a bowel movement after surgery
- Drink plenty of clear liquids as the anesthesia can cause dehydration/constipation as well

Hydrocodone/Acetaminophen (Norco):

- This is a narcotic medication for pain, to be taken **AS NEEDED**.
- Plan to stay on a scheduled dose of 1-2 tablets every 4-6 hrs for the first 1-3 days.
 - Can then begin to space out / discontinue the medication, transitioning to Acetaminophen (Tylenol) only
 - **DO NOT** exceed 4,000 mg of Acetaminophen in a 24-hour period.
- Do not drive, drink alcohol, or take Acetaminophen (Tylenol) or additional narcotics/pain medications **WHILE** taking this medication
- **Common side effects:** nausea, drowsiness, and constipation
 - To decrease the side effects, take with food
 - If constipation occurs, take the stool softener as directed

Scopolamine patch:

- For some patients, the anesthesia team will put on a scopolamine patch behind your ear to prevent nausea.
- If you are prescribed one, you can leave this in place for 72 hours.
- When you take it off, wash your hands thoroughly or it can make your vision blurry.

Zofran (Ondansetron):

- This is an anti-nausea medication.
- It is a dissolving tablet that is to be placed on your tongue – allow it to dissolve, and swallow.
- Take 1 tablet as needed every 4-6 hours for the first 2 days after surgery.

Aspirin

- This medication thins the blood in order to prevent blot clots – take as directed
- Please contact the office should severe calf pain or significant swelling of the calf or ankle occurs

Wound Care

- Leave the bulky surgical bandage on and **DO NOT** shower for 48 hours
 - Can loosen bandage if swelling of foot/ankle occurs
- After 48 hours, remove bandages and gauze, but **LEAVE STERI-STRIPS** (white tape) **IN PLACE**.
 - You may shower at this point.



- Cover incision sites with waterproof bandage prior to getting into the shower.
 - Should the incisions accidentally get wet, pat them dry with a clean towel – **DO NOT SCRUB**
- It is normal to see a lot of blood-tinged (may be pinkish-yellow) soaked fluid on the bandages
 - If bandages become soaked, okay to reinforce with additional dressing
- In between showers, leave the incision sites open to air
 - **DO NOT APPLY LOTIONS OR OINTMENTS TO THE INCISION SITES**
- Your stitches will be removed at your first post op visit
 - You may shower at this point without waterproof bandages over the incision sites.
 - **DO NOT** scrub the incision sites – you may let soap and water run down the incisions and pat dry with a towel once you're done.
- **DO NOT** soak in any pool/bath water until 4 weeks after surgery

Weight Bearing

- **MENISCECTOMY / SUBCHONDROPLASTY:** You may bear weight as tolerated onto your operative extremity.
 - This means that you may put as much weight onto your operative extremity as you can tolerate the pain, unless otherwise instructed by the surgical team.
 - Allow pain to be your guide
 - If a certain percentage of weight put onto the extremity is painful, decrease the amount until you can tolerate it. If you do not have pain, feel free to put your full weight onto the extremity.
- **MENISCUS REPAIR:** You may partially bear weight on the knee for 4-6 weeks; your therapist will progress you to full weight bearing when cleared
- **LYSIS OF ADHESIONS:** weight bearing as tolerated (post splint removal)

Crutches

- You will be provided with crutches on the day of your surgery
- You may use the crutches as needed
- **EXCEPTION: meniscus repairs** require crutches until 4-6 weeks post-op
 - You should not need the crutches for more than a few days if you are weightbearing as tolerated.

Icing

- Icing is very important in the initial post-operative period and should begin immediately after surgery
- Use ice machine (or ice packs) continuously for 20 minutes every 2 hours, daily until your first post-operative visit
 - Remember to keep leg elevated to level of chest while icing.
 - Care should be taken with icing to avoid frostbite to the skin

Physical Therapy (PT)

- PT should ideally start within 1-3 days post-op, 2x per week – an order will be provided on the day of surgery
 - If surgery is on a Thursday/Friday, okay to begin PT early the following week
 - **LYSIS OF ADHESIONS:** PT 3-5 times per week with aggressive ROM
- Perform ankle pumps continuously throughout the day to reduce the risk of blood clot formation in the lower leg
- Please bring your PT prescription / PT protocol (provided on surgery day; also on the website) to your first appointment
- At your first PT visit, your therapist should instruct you regarding your gait (walking pattern) with crutches
- Choose a PT clinic close to your home so you can be compliant with your program.



- If you do not have a therapist in mind, or wish to be provided information for a therapist, we can provide you with a list of physical therapist recommendations that we commonly refer our patients to, depending on your location

Follow-Up

- You will need to follow up for your 1st post-operative between 2-3 weeks from surgery – this will be a PA visit
- A new physical therapy prescription will be given to you at that time and any sutures will be removed
- Please call central scheduling or use the link below to make an appointment (contact information below)

When Should I Contact the Office?

- If you have a fever >100.4° F.
 - A low-grade temperature (up to 100° F) is expected after surgery but let us know if it gets this high!
- If you develop chills, sweats, excessive nausea/vomiting, difficulty breathing, chest pain
- If you develop calf pain or color changes in foot or ankle,
- If you have pus, significant pain, warmth or redness surrounding the incision sites.
- If you are unable to urinate >1-2 days after surgery
- If you are unable to pass a bowel movement >6-7 days after surgery

Important Information

- *Office Hours:* Monday – Friday; 7:30am –4:30pm
- *After Hours/Emergency Contact:* Resident/Fellow – 708.236.2600
- *Central Scheduling:* 708.236.2701 | <https://rushortho.radixhealth.com/dash/self/#/schedule/29>
- *Administration:* Jeannie Taylor – 312.432.2525
- *Physician Assistants:* Sara, Delaney, & Erica – 312.432.2388 | nhopa@rushortho.com

We are in clinic or surgery and not answering calls in real time – we will return all voicemails within 24-48 hours.