

Knee Arthroscopy Home Instructions Michael Higgins, M.D.

1. Weight Bearing:

- Unless instructed otherwise, you may walk on your leg immediately after surgery as tolerated. Crutches or a cane are provided to be used as needed.
- Too much walking in the first 3-4 days after surgery may cause increased swelling in the knee.

2. Pain Control:

- Icing your knee will help to minimize swelling and help relieve pain or discomfort. Ice wraps, a bag of ice, or frozen vegetables wrapped in a towel work well. Apply ice to the knee and replace it as needed. If your knee is too cold, take a break.
- Pain Medication/Prescriptions
 - Tylenol (Acetaminophen) Take 1000mg every 8 hours. This is a mild pain reliever that works in two ways. First, it relieves pain on its own. Second, it makes other pain medications work better because it is synergistic.
 - o Oxycodone (Roxicodone) Take 1/2, 1, or 2 pills every Six hours as needed. This is a strong narcotic pain medication. These pills are meant for pain relief after major surgery. You may not need to take this medication for pain control after your knee arthroscopy. This is the pain medication you should cut back on first.
 - Mobic (Meloxicam) Take once daily for 30-60 days as prescribed.
 This is an anti-inflammatory medication that some patients are given after surgery to help decrease pain and inflammation.
- Blood Thinner You will be placed on a blood thinner after surgery to decrease the risk of blood clots and pulmonary embolism associated with surgery. Aspirin, Lovenox, or Xarelto may be prescribed depending on your risk factors and you should take that medication as instructed. Blood thinners are usually prescribed for 2-4 weeks after surgery.
- Nausea: Pain medication can cause nausea and a prescription for nausea medication, either **Phenergan** or **Zofran** will be provided to be taken as needed.



3. Constipation

The pain medication taken after surgery can cause constipation. To avoid constipation, adhere to the following protocol until your bowel habits normalize:

- Drink lots of fluids
- Stool softeners, like **Colace** or a similar medication, will be prescribed. They can be purchased over the counter as well.
- Milk of Magnesia (30 ml) may be taken once or twice a day and is available over the counter.
- Prune Juice or Prunes can be helpful
- Magnesium Citrate is a powerful laxative that is available over the counter if the above has not provided relief within 48 hours.

4. Knee Dressing

- If the dressing is too tight, you can remove the ace wrap and reapply.
- The dressing in your knee should be changed two days after surgery
- The ace wrap may be reused with gauze beneath, or the incisions can be left open to air.
- The incisions can be cleaned gently with antibacterial soap and water or hydrogen peroxide. If you wish, you can apply a small amount of Neosporin or its generic equivalent to the incisions daily, but this is not necessary.
- The incisions may be kept open to air if they are dry (no drainage).
- There will likely be some drainage on the dressing when it is changed.
- A small amount of drainage for a day or two after the first dressing change is normal. If the incisions are draining beyond five days after surgery, call the office to have your incisions evaluated.

5. Bruising and Swelling

- Bruising on the thigh, calf, or ankle may develop after surgery. Ice these areas as needed.
- Your knee will swell after surgery. Typically, the swelling begins two to three days after surgery. Your calf, ankle, and foot may also swell along with the knee. For patients with swelling that does not fluctuate up and down with activity but only increases for 48 hours or more call Dr. Higgins's office to have your leg evaluated.



6. Showering

 You may shower on the second day after surgery if the incisions are dry (no drainage). The incisions should be covered/kept dry while in the shower. Waterproof Band-Aids work well for this. Do not submerge your knee under water until being evaluated at your post-op visit.

7. Fevers

 Low-grade fevers (less than 101 degrees Fahrenheit) are common after surgery and generally last only a short period of time. These fevers are most often caused by mucus in your lungs. Deep breaths, coughing, and moving around a bit are helpful for resolving these low-grade fevers.

8. Driving

Most patients are ready to drive a few days after surgery. To drive you
need to be able to operate the vehicle safely. That means you should
not take narcotic pain medicine and drive. You need to be comfortable
and confident so you can control your vehicle. If you are not sure you
are ready to drive, go to an empty parking lot and practice first.

9. Exercises

- While seated, bend and straighten your knee as much as comfort will allow – 20 repetitions 3 times daily. This helps to reawaken the thigh muscles which may be a little weak right after surgery.
- Physical therapy will be ordered for you following surgery.