

POSTOPERATIVE INSTRUCTIONS KNEE ARTHROSCOPY

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1. After arthroscopy the wound is covered with gauze or ace wraps. These should generally be left in place for 24 hours. Due to the large amount of fluid used during the arthroscopy, it is normal to see some bloody drainage on the dressings. If bright red blood persists despite elevation and icing, please call the doctor. The dressing should be removed and wounds covered with Band-Aids on the first or second day after surgery. Do not remove the paper strips or cut any of the visible suture. Reapply the ace wrap for 5-7 days to control swelling. Wounds should be kept dry for 48 hours. Showering is allowed with plastic covering the wounds. Unless otherwise instructed, after the post-op day 4, the wound may be exposed in the shower without scrubbing the area. The wound should not be submerged in a bathtub or pool until the sutures are removed.
2. Icing is very important for the first 5-7 days postoperative. While the post-op dressing is in place, icing should be continuous. Once the dressing is removed on the first or second day, ice is applied for 20-minute periods 3-4 times per day. Care must be taken with icing to avoid frostbite to the skin.
3. Full weight bearing is advised unless otherwise instructed at the time of surgery. Crutches or a cane may be necessary to assist walking. These aids are used to help with balance but not to remove weight off the leg. Leg elevation for the first 72 hours is also encouraged to minimize swelling. Range of motion, straight leg raises, and ankle pumps are encouraged for the first 7 days after surgery and are to be started the evening of surgery. While exercise is important, don't over-do it. Common sense is the rule.
4. The anesthetic drugs used during your surgery may cause nausea for the first 24 hours. If nausea is encountered, drink only clear liquids (i.e. Sprite or 7-up). The only solids should be dry crackers or toast. If nausea and vomiting become severe or the patient shows sign of dehydration (lack of urination) please call the doctor or the surgicenter. A low-grade fever (100.5) is not uncommon in the first 24 hours but unusual beyond. Please call the doctor with any temperature over 101.0 degrees. If a spinal anesthetic was used, patients may suffer a spinal headache. Please call the Surgicenter should this occur and it does not resolve with ibuprofen or your pain medication.
5. You may take a baby aspirin (81 mg) daily until the sutures are removed in the office. This may lower the risk of a blood clot developing after surgery. Should severe calf pain occur or significant swelling of calf and ankle, please call the doctor.

6. Local anesthetics (i.e. Novocaine) are put into the joint during surgery. It is not uncommon for patients to encounter more pain on the first or second day after surgery. This is the time when swelling peaks. Using the pain medication as directed will help control pain with little risk of complication. Taking pain medication before bedtime will assist in sleeping. It is important not to drink or drive while taking narcotic medication. If you were prescribed narcotic medication (i.e. vicodin, hydrocodone, darvocet) you can supplement those medications with 200 mg or 400 mg of ibuprofen every 4-6 hours. You should resume your normal medications for other conditions the day after surgery. We have no specific diet restrictions after surgery but extensive use of narcotics can lead to constipation. High fiber diet, lots of fluids, and muscle activity can prevent this occurrence.
7. The doctor will need to reexamine you 7-10 days after routine knee arthroscopy and within 48 hours for patients undergoing ACL surgery. Please call the office to schedule a follow-up appointment.
8. Most patients are able to drive if surgery does not involve their right leg as soon as they stop taking narcotic pain medications. Driving while under the influence of narcotic medications is extremely dangerous and discouraged in all patients. Returning to school or work also depends on the degree of postoperative pain and the demands of your job. Pain is generally an appropriate guide.
9. If unexpected problems occur and you need to speak to the doctor, call the office.
 - Dr. Bach can be reached at 312-432-2353.
 - Dr. Bush-Joseph can be reached at 312-432-2345.
 - John Bojchuk, their athletic trainer, can be reached at 312-432-2359.
 - Sue Gilpin, their Physician Assistant, can be reached at 312-432-2372.The answering service will answer after business hours. If you are unable to reach the doctor, you can always reach the Rush Orthopedic resident on call at 312-942-5000.