

Preparing for your Knee Arthroscopy

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Preparations for the days and weeks prior to your procedure

- **Obtain preoperative labs, xrays, EKGs, and medical clearance** as advised by your surgeon or other physician. These diagnostic tests are typically performed at Sage West Lander or Riverton.
- **Discontinue use of aspirin and NSAIDs** (ibuprofen, Advil, Motrin, naproxen, Aleve) 10 days prior to your planned surgery. These medications may cause increased bleeding during the operation or postoperative period. If aspirin, Plavix, Coumadin or another blood-thinning drug is prescribed for a specific health condition, please discuss with your physician. There are exceptions to this guideline, so please ask if you are unsure. Often, you may resume taking these medications the first day following surgery.
- **Decrease smoking/nicotine use.** Smoking and nicotine use impair postoperative healing and increase risks of various complications related to surgery and anesthesia.

Arrangements for the day of surgery

- Discontinue herbal supplements ten days prior to surgery, as these may interact unpredictably with anesthesia medications.
- **Nothing to eat or drink past midnight the evening prior to surgery**, unless advised otherwise. You may take daily medications with sips of water only.
- **Diabetic patients:** please do not take insulin or oral hypoglycemic meds the day of surgery.
- Take a **shower** the evening before and/or the morning of your surgery. Wash your operative leg with gentle soap. Avoid harsh scrubbing. You will be advised to avoid getting your incisions wet for 48-72 hours following surgery.
- **DO NOT SHAVE** the operative leg.
- Wear glasses rather than contacts; leave jewelry and valuables at home.
- Most patients will be discharged home the day of their procedure. You will have the chance to discuss your surgery with the surgeon both before and after your procedure. **You will NOT be allowed to drive after surgery. A responsible adult must be able to drive you home and accompany you through the night after surgery.** It is preferable that the adult who will be your primary caregiver accompany you to the hospital the day of surgery so that the surgeon can communicate the plan for followup care effectively. This person will also need to participate in discharge teaching by the surgery staff. Most patients have impaired memory of the postoperative period, which necessitates the presence and supervision of a responsible adult.
- Although your actual surgical time may be less than an hour, preoperative preparations, postoperative recovery and discharge teaching will take multiple hours.
- You will likely receive a prescription for medication the day of surgery. This prescription can be filled by the adult accompanying you while you are in the operating room.

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- After surgery your leg will be wrapped in a bulky dressing from ankle to mid thigh. For some procedures you may also be fitted with a knee brace. This dressing is to remain on the leg for 48-72 hours following your procedure. **Bring loose fitting pants**, such as sweatpants or athletic shorts to dress in after surgery. Wear **supportive shoes; we do not recommend flip-flops or heels.**



water machines are extremely helpful, but may be costly. Some patients are able to borrow one from a friend or family member.

Anticipating your rehabilitation needs after surgery

- **Obtain and adjust crutches prior to surgery.** Ensure that all screws and grips are tightened. Practice using crutches (see additional handout regarding crutch fitting and use) and move potentially hazardous items such as throw rugs and piles of laundry off of the floor of your home. Typically, patients will use crutches to assist with weightbearing for 2-6 weeks following surgery. You will be given specific instructions after your procedure.
- You will be able to eat and drink what you feel like after surgery. We recommend that you start “little and light” with foods such as broth, crackers, toast, Jello, juice, and soda, as the anesthesia medications may cause your stomach to be upset. If you are tolerating light foods well you may progress to eating whatever feels good.
- **For the first 3-5 days following surgery, we will want you to minimize activity and to spend several 30-40 minute sessions a day icing and elevating your surgical leg.** Use several pillows to support your leg 6-20 inches above the level of your heart. Use ice in a form that will mold to your knee, i.e. gel ice packs or bags of crushed ice. Never apply ice to bare skin. Circulating cold
- Return to work and school following these procedures is patient specific. However, you should **anticipate requiring 3-5 days of minimal planned activities after surgery.** During the entire time you are taking narcotic medication you should not drive, drink alcohol or be responsible for tasks that require judgment, coordination, insight, or short term memory, i.e. operating heavy power machinery, childcare, legal/financial decision making.
- Some procedures will require you to wear a knee brace for 6 or more weeks following the surgery. Your surgeon will be able to tell you if a knee brace is anticipated following your procedure.
- You will see the surgeon for **your first postoperative appointment 1.5-2 weeks following surgery** at which time your stitches are usually removed from your incisions. Fremont Orthopaedics will schedule your followup appointment prior to your surgery.
- **Physical therapy is typically prescribed following knee surgery.** The frequency and duration may vary among patients, but in general, you should expect to begin PT within 1-2 weeks following surgery and to attend

therapy sessions 1-2 times a week for at least 4-6 weeks. **Attendance at therapy sessions and participation in your home rehabilitation program is key to a successful recovery!** Your therapist will provide you with instructions.

Postoperative Exercises

- Postoperative exercises should begin within 24 hours of surgery for all patients, it is helpful to practice them prior to surgery:
 - **CALF EXERCISES:** pump the foot up and down for 3-5 minutes, 3 times a day
 - **QUAD SETS:** tighten the muscles on the front of your thigh for 5-10 seconds, repeat 10 times, 3 times a day.
 - **STRAIGHT LEG RAISES:** in a lying position, raise the straightened operative leg so that the heel is 24 inches off the ground, then lower. Keep the motion slow and controlled. Repeat 15-20 times, 3 times a day.
 - **FULL KNEE EXTENSION:** with your leg stretched out in front you, place a rolled towel beneath the ankle of your operative leg for 5-20 minutes, three times a day, until your knee can be comfortable fully straightened (full extension). **Achieving full extension after surgery is vital to your rehabilitation.**

Questions or Concerns:

Should you develop any new health issues prior to your surgery or if you have further questions or concerns, please call Fremont Orthopaedics at (307)332-9720.

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