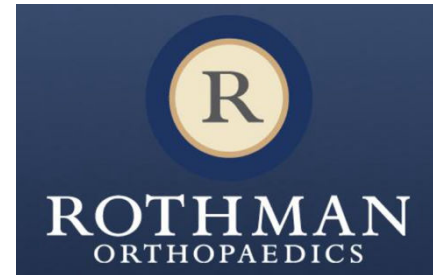


Brandon J. Erickson, MD
Montanna Casey, ATC
Mackenzie Lindeman, ATC
Terry Lin, PA-C
645 Madison Ave New York, NY
200 White Plains Rd 4th Floor Tarrytown, NY
450 Mamaroneck Ave Suite 200 Harrison, NY
Phone: 914-580-9624
Montanna.Casey@rothmanortho.com
Mackenzie.Lindeman@rothmanortho.com
Terry.Lin@rothmanortho.com
www.brandonericksonmd.com



Partial Meniscectomy Discharge Instructions

What is the recovery period like?

- Brace: None required, but you will have an ace wrap on the leg and crutches.
- Weight bearing precautions
 - o You will be able to put as much weight on the leg as comfortable while using an ambulation assistive device (walker, crutches, cane).
- Physical Therapy
 - o Prior to starting, and in addition to formal PT, do the following home exercises:
 - Quad sets: 3 sets performed four times a daily.
 - Sit or lie on your back with leg straight. Tighten your quadriceps muscle on the front of the thigh. Hold for 3 seconds, relax. Repeat x 10.
 - Heel pumps: 3 sets preformed four times daily.
 - Sit or lie on your back with leg straight. Bend your foot up and down at your ankle joint, pumping the foot. Complete 10 pumps.
 - Straight Leg Raises: 3 sets preformed four times daily.
 - Lie on your back with leg straight, flat on the bed. Start by tightening your quads, lift your leg off the bed until your heel isn't touching it anymore. Lower your leg down. Repeat as tolerated, work up to 10.
 - o You will **start formal PT as soon as you feel comfortable**, typically within the first week of surgery, just prior to your first post-op visit. You will go 2x/week for about 3 months.
 - For recommended PT offices, please contact the office
 - Dedication and attendance to your sessions are critical to your recovery.
- Driving
 - o You may not drive while taking pain medication. In addition, if it is your right knee that had surgery, you will not be able to drive for approximately 1-2 weeks after surgery

INSTRUCTIONS FOR IMMEDIATELY AFTER SURGERY:

- Activity
 - o Apply ice to your knee but keep the bandages dry
 - o Elevate your leg on 2-3 pillows or rolled up towels placed under the **heel** so that the heel is elevated higher than your knee. This will help reduce swelling and achieve full extension of the knee. **Avoid pillows under the knee.**

- For the first 1-2 weeks after surgery, the **most important goal is to regain the ability to fully straighten the knee**. It is much more important initially than being able to bend the knee.
- Follow the weight bearing precaution guidelines above.
- Start your home exercise program
- Bandage and Incision Care
 - Please keep the ace wrap on for the first 3 days. You may then remove the ace wrap. Underneath will be two incisions closed with sutures. These will remain in until your postoperative appointment. After you shower, simply cover these bandages with bandaids. These should be replaced daily.
 - You may re-apply the ace wrap as this helps to decrease swelling.
 - Do not apply creams, ointment or lotions to your incisions for at least 3 weeks.
- Showering
 - You may shower after you have removed the ace wrap. If you want to shower beforehand, place saran wrap over the bandage or a bag over your leg.
- Pain Management and Cold Therapy
 - See POST-OP PAIN MANAGEMENT handout. Within days of surgery, you should only be taking the pain medication at night and after strenuous activity as needed.
- Normal sensations after surgery
 - Pain
 - Swelling and warmth up to 2 weeks
 - Small amounts of bloody drainage for first few days
 - Numbness around the incision area
 - Bruising
 - Low grade temperature less than 101.0 for up to a week after surgery.
 - Small amount of redness to the area where the sutures insert in the skin
- **IF ANY OF THE FOLLOWING OCCUR, CONTACT THE OFFICE IMMEDIATELY**
 - Calf pain or ankle swelling in either leg
 - Change is noted to your incision (i.e. increased redness or drainage)
 - Temperature greater than 101.0
 - Fever, chills, nausea, vomiting or diarrhea
 - Sutures become loose or fall out and incision becomes open
 - Drainage becomes yellow, puss like or foul smelling
 - Increased pain unrelieved by medication or measures mentioned above.
- Post-op visit
 - Please ensure that you have a post-op visit scheduled for 10-14 days after surgery.

PAIN MANAGEMENT

- **ORAL PAIN MEDICATIONS**
 - Tylenol 325 mg
 - Start by taking one tablet every four to six hours when you arrive home after surgery so you have some medication on board when the block wears off. You should take this on a regular schedule for the first few days after surgery
 - Naproxen 500 mg
 - Take 1 tablet twice per day to help with pain and inflammation. You will take this for 2 weeks.
 - Tramadol 50 mg

- This is a non-narcotic pain medication used in conjunction with the Norco. You should take this medication every evening 4-6 hours as needed for pain, beginning tonight.
- Oxycodone 5 mg
 - This is a narcotic medication. Start by taking one tablet every four to six hours if the Tylenol and tramadol are not controlling your pain. You may take one to two tablets every four to six hours as needed for pain.

SIDE EFFECTS OF THESE MEDICATIONS INCLUDE DROWSINESS AND CONSTIPATION. YOU SHOULD NOT DRIVE OR DRINK ALCOHOL WHILE TAKING THESE PAIN MEDICATIONS.

- **OTHER MEDICATIONS**

- Aspirin 81mg
 - This medication is used to prevent blood clots. It should be taken daily for 4 weeks.
- Zofran (ondansetron) 4mg
 - This is a nausea medication that is only taken if you feel nauseous.
- Prilosec/Omeprazole 40mg
 - This medication is to protect your stomach while you are on the Naproxen

- **ICE MACHINE**

- Recommend using **1 hour on, 1 hour off for the first 2 days after surgery** *while awake*
- Do not place pad directly on skin – make sure there is a barrier such as a t-shirt or towel
- After the first 2 days you may use the ice machine as needed for comfort
- If you did not opt for the ice machine, you may use ice packs on the surgical area for 20-30 minutes every 1-2 hours

Meniscectomy Exercise Guide

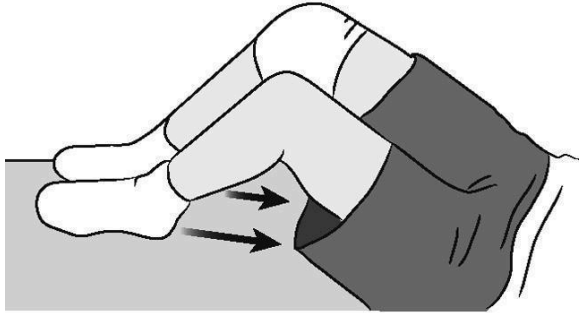
Regular exercise to restore strength and mobility to your knee is important for your full recovery after arthroscopic surgery. Your orthopaedic surgeon or physical therapist may recommend that you exercise for approximately 20 to 30 minutes, 2 or 3 times a day. They may suggest some of the exercises shown below. They may also advise you to engage in a walking program.

This guide can help you better understand your exercise or activity program, supervised by your orthopaedic surgeon or physical therapist. To ensure your safe recovery, be sure to check with your therapist or surgeon before performing any of the exercises or activities shown.

Initial Exercise Program

Hamstring Contraction

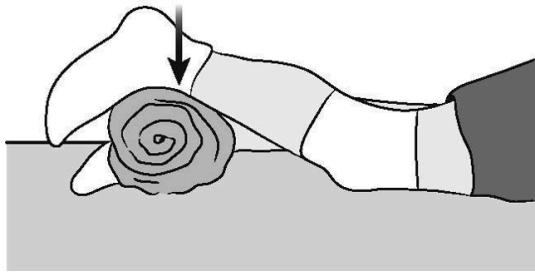
No movement should occur in this exercise. Lie or sit with your knees bent to about 10 degrees. Pull your heels into the floor, tightening the muscles on the back of your thigh. Hold for 5 seconds, then relax. Repeat 10 times.



Hamstring contraction

Quadriceps Contraction

Lie on stomach with a towel roll under the ankle of your involved knee. Push ankle down into the towel roll. Your leg should straighten as much as possible. Hold for 5 seconds, then relax. Repeat 10 times.

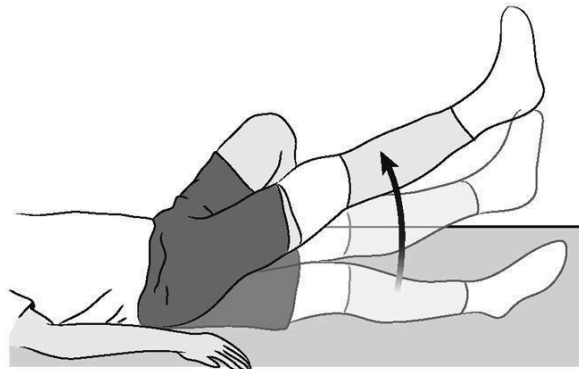


Quadriceps contraction

Straight Leg Raises

Lie on your back, with your uninvolved knee bent. Straighten your involved knee. Slowly lift leg about 6 inches, then hold for 5 seconds. Continue lifting in 6-inch increments, holding each time. Reverse the procedure, and return to the starting position. Repeat 10 times.

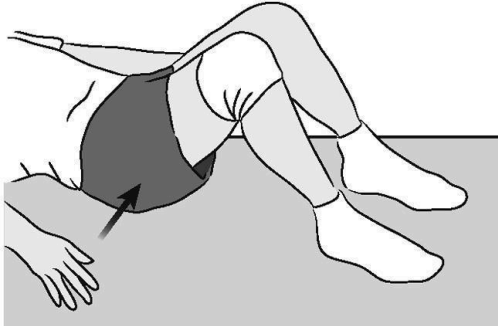
Advanced: Before starting, add weights to your ankle, starting with 1 pound of weight and building up to a maximum of 5 pounds of weight over 4 weeks.



Straight leg raises

Buttock Tucks

While lying down on your back, tighten your buttock muscles. Hold tightly for 5 seconds, then relax. Repeat 10 times.

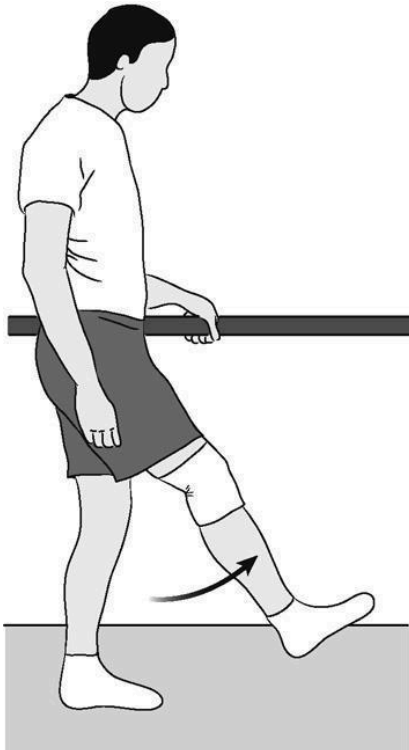


Buttock tucks

Straight Leg Raises, Standing

Support yourself, if necessary, and slowly lift your involved 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 up to a maximum of 5 pounds of weight over 4 weeks.

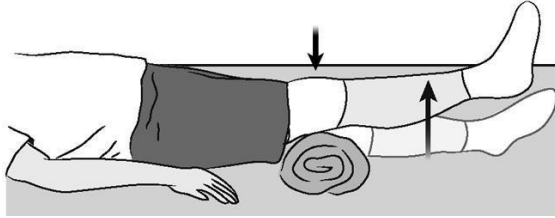


Straight leg raises, standing
Intermediate Exercise Program

Terminal Knee Extension, Supine

Lie on your back with a towel roll under your knee.
Straighten your knee (still supported by the roll) and hold for 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.

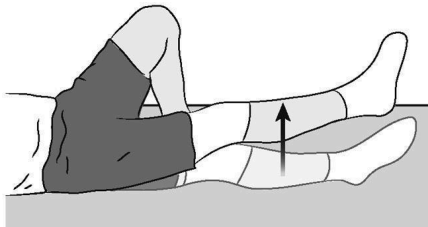


Terminal knee extension, supine

Straight Leg Raises

Lie on your back, with your uninvolvement 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.



Straight leg raises

Partial Squat, with Chair

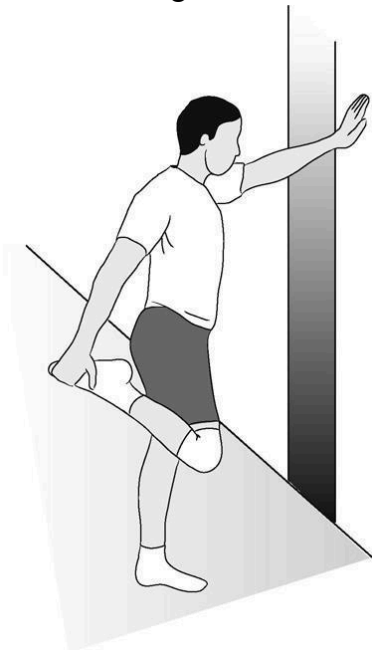
Hold onto a sturdy chair or counter with your feet 6-12 inches from the chair or counter. While keeping your back straight, slowly bend your knees. DO NOT go any lower than 90 degrees. Hold for 5-10 seconds. Slowly come back up. Relax. Repeat 10 times.



Partial squat, with chair

Quadriceps Stretch, Standing

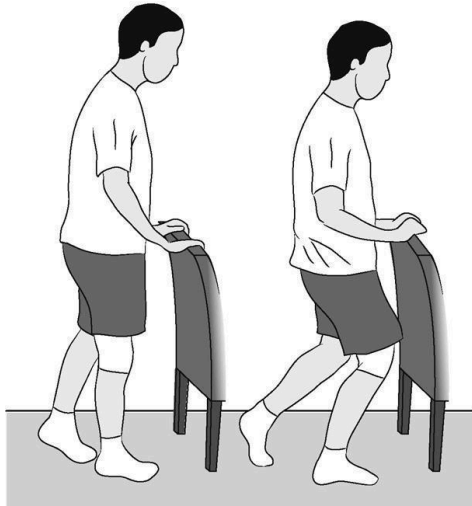
Standing with your involved knee bent, gently pull heel toward buttocks, feeling a stretch in the front of the leg. Hold for 5 seconds. Repeat 10 times.



Quadriceps stretch, standing
Advanced Exercise Program

Knee Bend, Partial, Single Leg

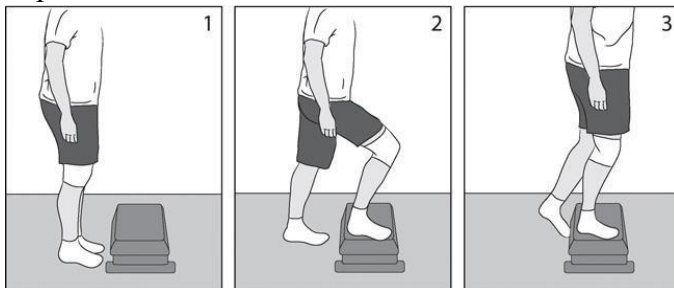
Stand supporting yourself with the back of a chair. Bend your uninvolved leg with your toe touching for balance as necessary. Slowly lower yourself, keeping your foot flat. Do not overdo this exercise. Straighten up to the starting position. Relax. Repeat 10 times.



Knee bend, partial, single leg

Step-ups, Forward

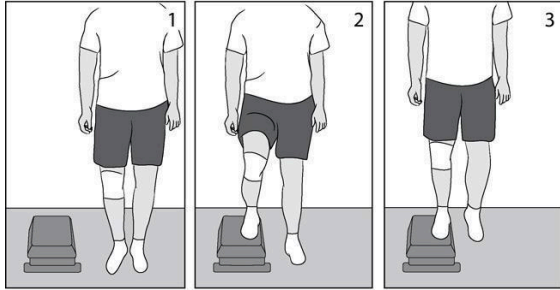
Step forward up onto a 6-inch high footstool or platform, leading with your involved leg. Step down, returning to the starting position. Increase the height of the platform as strength increases. Repeat 10 times.



Step-ups, forward

Step-ups, Lateral

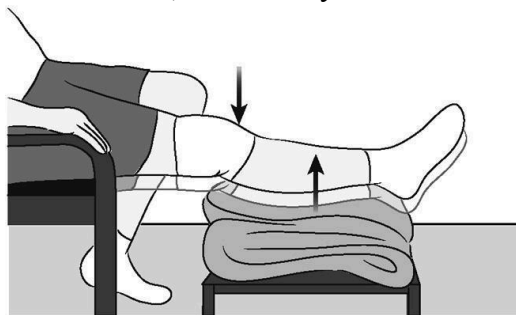
Step up onto a 6-inch high footstool or platform, leading with your involved leg. Step down, returning to the starting position. Increase the height of the platform as strength increases. Repeat 10 times.



Step-ups, lateral

Terminal Knee Extension, Sitting

While sitting in a chair, support your involved heel on a stool. Now straighten your knee, hold for 5 seconds, then slowly return to the starting position. Repeat 10 times.



Terminal knee extension, sitting

Hamstring Stretch, Supine

Lie on your back. Bend your hip, grasping your thigh just above the knee. Slowly straighten your knee until you feel the tightness behind your knee. Hold for 5 seconds, then relax. Repeat 10 times. Repeat with the other leg. If you do not feel this stretch, bend your hip a little more, and repeat. No bouncing! Maintain a steady, prolonged stretch for the maximum benefit.



Hamstring stretch, supine

Hamstring Stretch, Supine at Wall

Lie next to a doorway with one leg extended. Place your heel against the wall. The closer you are to the wall, the more intense the stretch.

With your knee bent, move your hips toward the wall. Now begin to straighten your knee. When you feel the tightness behind your knee, hold for 5 seconds, then relax. Repeat 10 times. Repeat with the other leg.



Hamstring stretch, supine at wall

Exercise Bike

If you have access to an exercise bike, adjust the seat height so that the bottom of your foot just touches the pedal and complete a full revolution. As you become stronger, slowly increase the tension on the bike.



Start pedaling for 10 minutes a day. Increase the duration by one minute a day until you are pedaling for 20 minutes a day.

Walking

Walking is an excellent physical exercise activity for the middle stages of your recovery from surgery (after 2 weeks).

Running

Your doctor may recommend that you avoid running activities for a period of time after surgery in order to protect your knee. The length of the restriction will depend upon what type of procedure you had. For example, if you had an ACL reconstruction or meniscal repair, your running restriction will be different than if you had torn cartilage removed. Your doctor will talk with you about when it is safe to gradually resume your running activities.

Pain or Swelling after Exercise

As you increase the intensity of your exercise program, you may experience temporary setbacks. If your knee swells or hurts after a particular exercise activity, you should lessen or stop the activity until you feel better.

You should then Rest, Ice, Compress (with an elastic bandage), and Elevate your knee (R.I.C.E.). Contact your orthopaedic surgeon if your symptoms persist.