

MENISCAL ROOT REPAIR POST-OP INSTRUCTIONS

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Initial Activity Precautions:

- You have been instructed to remain **NON-WEIGHT BEARING** for 6 weeks. Please use your crutches at all times and do not put any pressure on the operative leg.
- When you are seated and not putting any pressure on your operative leg, you can begin working on your range of motion but **avoid bending your knee past 90 degrees**.
- Please refer to your CU sports medicine black folder for instructions on when to begin formal physical therapy as well as information for the therapist on goals and precautions.
- If you have previously scheduled a PT appointment and it is prior to the time frame written in the black folder, please re-schedule that PT visit.

*****Please bring your CU Sports Medicine black folder, given to you in the recovery room, to your first physical therapy visit and first post-operative visit.*****

What to Expect After Surgery

- **Surgical Site Care:**
 - Wash your hands before touching your dressing or incision to help prevent the spread of microorganisms to your incision.
 - May remove dressing in 48 hours but please DO NOT remove the steri-strips, which are like Band-Aids, from the incision.
 - Ok to shower after 48 hours getting incisions wet with soap and water, but avoid scrubbing or submerging the wounds (pools, baths, hot tubs).
 - Pat the wound dry and overwrap with an Ace Bandage.
 - Do not apply ointments or creams to incision sites.
- **Positioning and Elevation to reduce swelling:** Swelling occurs after any surgery and can be treated with ice and elevation. Your extremity should be elevated above the level of your heart (i.e., toes above the nose). Elevate as much as possible for the first 7 days after your surgery. Use ice packs intermittently (20 minutes on, 20 minutes off) to reduce pain & swelling. Make sure to have a barrier between your skin and the ice pack to avoid frost bite.

Pain Management

- **IT IS VERY IMPORTANT TO STAY AHEAD OF YOUR PAIN!**
 - You have been provided a prescription for a narcotic pain reliever called Oxycodone. Please take this medication for your post-surgical pain as it has been prescribed. You may also take Tylenol (no more than 1,000mg 3 times a day) in conjunction with the Oxycodone for any breakthrough pain. After several days, you should be able to slowly wean off of the Oxycodone, but you may continue to take Tylenol regularly until you have no more pain.
 - Remember it takes about 30-45 minutes for your pain medication to take effect.
 - If you have never used pain medications, take half or one tablet at first to make sure you tolerate it. Half or one tab is a sufficient dose in many patients. If half or one tab is tolerated but there is still pain, the second tablet can be taken as directed.
 - DO NOT drink alcoholic beverages, use recreational drugs, or use prescription sedative medications when taking pain medication.

- **Narcotic pain medications commonly cause side effects such as itching, nausea, and constipation.**
 - For **constipation**: It is important to drink plenty of water to stay well hydrated and we recommend you increase your fiber intake and take some form of over the counter stool softener such as Colace(Docusate Sodium)100mg 1-2 times daily to prevent constipation.
 - For **itching**: Over the counter Benadryl 25mg up to 3 times daily can help with itching. If you are over the age of 65 discuss taking Benadryl with your primary care provider if you have not taken it in the past.
 - For **nausea**: Try to avoid taking your pain medications on an empty stomach or along with multiple other medications at one time. If you are having severe nausea and still requiring opioid pain medications, please call the clinic as a prescription for an anti-nausea medication may be helpful. Please remember that prescriptions can only be provided through the clinic Monday – Friday: 8 AM – 4 PM

****Please be aware that some pain medication requires a paper prescription and cannot be called into the pharmacy. These scripts will need to be picked up at our office with a picture ID. A minimum of 48 hours is required in order to process your medication refill request so please plan in advance if you know you will be running out of your prescription.****

When to Call Your Physician

- Common or Normal Post-Operative Reactions:
 - Low grade fever (approximately 100.5 degrees) for up to one week.
 - Small amount of blood or fluid leaking from the surgical site or dressing
 - Bruising along the surgical extremity
 - Swelling around the surgical site and surrounding area

The reactions listed above are NORMAL, but call your surgeon if any of these persist.

- Symptoms to Report:
 - Please report any of the following signs of infection to your surgeon:
 - Redness or pain around your incision (if you cannot see your incision, red streaking up your extremity should be reported)
 - Thick, dark yellow or foul smelling drainage at the incision site or from your dressing
 - Temperature over 101.5 degrees for more than 24 hours.
- Blood Clots: Although rare, please be aware and utilize the recommendations below to avoid getting a blood clot.
 - Get up 4-5 times during the daytime and walk across the room to keep the blood circulating in your legs.
 - Notify your physician if you are a nicotine user, on hormone replacement therapy medications, are taking birth control, or have a history of blood clots as these can increase your risk of developing a blood clot.
 - Notify your provider if you develop pain or tenderness in your calf muscle

****IF YOU HAVE AN EMERGENCY, (EX: SHORTNESS OF BREATH, CHEST PAIN, OR SYMPTOMS LISTED ABOVE IN SEVERE NATURE), PLEASE CALL 911 OR VISIT YOUR LOCAL ER****

Post-Op Office Appointment:

- If you have not previously scheduled your first post-op visit, please call the front desk at the clinic you were seen to make your appointment for the next week following surgery.

-If you have any questions, please call the CU Sports Medicine Clinic at **(720) 848-8200**

-After office hours, weekends and holidays, call the hospital operator at **(720) 848-0000** and ask for the Orthopedic Resident on call.