

# Mark D. Scholl, M.D., P.C.

# **Arthroscopic Knee Surgery**

## **Discharge Information**

The following information relates to after your discharge for arthroscopic knee surgery.

### **Medication**

After your surgery, you will be given medication for pain, and/or other therapeutic goals. Take only as directed.

## **Bandages**

Bandages should be removed on the third day after surgery, unless otherwise instructed. Leave stern-strips in place. If dry, the wounds do not need to be covered, but a clean bandage if perfectly fine if you prefer. If you have sutures on the outside of the skin (some are dissolving under the skin, some are outside the skin) you may want to cover the ends with an adhesive bandage so they do not catch on clothing.

## **Showering**

If the wounds are dry (no bleeding or draining) you may shower the third postoperative day, after bandage removal. Take a brief shower, it is ok to let the water run over the wounds, but do not scrub them. Pat dry with a clean towel. Do not soak the wounds in a bath, hot tub, pool or other immersion, until they have been checked by your doctor and cleared for such.

#### Ice

You may ice the knee as needed. A schedule of 20 minutes with ice on, then 20 minutes with ice off, is most appropriate to maximize benefit and minimize risk of thermal injury such as frostbite. Keep a layer between you skin and the ice. A regular icing schedule, particularly in the first week, often helps with pain control.

#### **Crutches**

Initially, after surgery, you may need to use crutches either for comfort, or because you have been instructed to do so. With crutches, the majority of your weight should be on your hands (not the armpit). Use extra caution around slippery or uneven surfaces. If you have been given crutches with the instruction "as needed for comfort," you may want to progress to a single crutch as you improve. For single crutch use, place the crutch on the opposite side from your surgery to keep your weight balanced and centered.

#### T.E.D. Hose

You should wear the T.E.D. Hose for 2-3 weeks after surgery to help control swelling, and reduce the risk of blood clot. The best influence to reduce risk of blood clot is motion and activity in the operated limb — so regularly moving the ankle and foot, bending and straightening the knee (unless restrictions given), and getting up to move around often, are very important.

### **Follow-up Appointment**

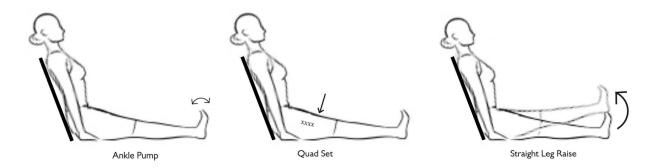
Call for your follow-up appointment 6-11 days after surgery.

### **Return to Work**

Light duty/desk work may be resumed 3-10 days after surgery, depending on comfort. Individual response varies greatly. You should consider starting back with half days to "test the waters" before resumption of full-time. Any other work related activities which require physical exertion, should be cleared with Dr. Scholl.

## **Activity Level**

After surgery, begin ankle pumps, quad sets and straight leg raises the evening after surgery (see below). Knee range of motion (bending and straightening) within comfort is encouraged unless specific restrictions given.



## **Physical Therapy**

If you have been given a prescription for physical therapy, begin within 3-5 days after surgery. If no formal therapy has been prescribed, work on the above activities within any limitations given. If you or your therapist have questions about the instructions, please call the office for clarification.

## Please call the office if you experience any of the following:

Temperature above 101.5 (low-grade temperature elevations are common for a few days following surgery). Increasing pain, not relieved by medication.

Increasing drainage from the wound.

Increasing redness, not related to bruising.

Significant, tight swelling and/or severe pain in the calf.

For emergencies, such as difficulty breathing, go to the nearest emergency department or dial 9-1-1.