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Knee Surgery – Postoperative Instructions

- **Dressing:** After surgery, the wound is covered with gauze and ace wraps. These should be left in place for **3 days**. It can be normal to see some bloody drainage on the dressings. If bright red blood persists despite elevation and icing, please call Dr. Frank’s office. After 3 days, the dressing can be removed and wounds covered with dry gauze or waterproof Band-Aids. **Do not remove the paper tapes/strips or cut any of the visible sutures.** You can reapply the ace wrap to control swelling.
- **Showering:** Unless otherwise instructed, you may shower 2 days after surgery, but you must keep the dressings/wounds dry. **Do not soak the operative leg (no baths, hot-tubs, or pools)** until allowed by Dr. Frank to avoid risk of infection.
- **Ice Therapy:** Icing is very important for the first 5-7 postoperative days to decrease swelling and pain. While the post-op dressing is in place, icing can be continuous. Once the dressing is removed on the third operative day, ice can be applied for 15-20 minute periods, 3-4 times per day. Care must be taken with icing to avoid frostbite to the skin.
- **Elevation:** Rest and elevate your leg for the first 48-72 hours. **Do not place a pillow under your knee.** Instead, elevate with a pillow under your calf and ankle, with your knee kept straight.
- **Activity:** Unless otherwise instructed, you should begin range-of-motion, straight leg raises, and ankle pump exercises as demonstrated on the exercise handout on the first day after surgery. Do not engage in activities which increase knee pain/swelling (prolonged periods of standing or walking) over the first 7-10 days after surgery. While exercise is important, don’t over-do it. Common sense is the rule.
- **Weight-Bearing:** Unless otherwise instructed, full weight bearing is advised. 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.

- **Medications:**
 - **Pain Control:** Local pain medication is injected into the knee during surgery – this will wear off within 4-6 hours. Most patients will require some narcotic pain medication (i.e. vicodin, norco, percocet, or other codeine-derivative) for 1-2 days after surgery – please take as instructed. It is important not to drink alcohol or drive while taking narcotic medication. If your pain is minimal, you may discontinue the use of narcotics. Ibuprofen 200-400 mg (i.e. Advil) can be taken as needed in between doses of narcotic pain medication for additional pain control.
 - **Blood Clot Prevention:** Unless otherwise instructed, take a **baby aspirin (81 mg) daily for 2 weeks following surgery**. 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.
 - **Constipation:** The use of narcotics can lead to constipation. Adequate hydration and over-the-counter stool softeners can minimize constipation problems.
 - **Normal medications:** Resume the day after surgery unless otherwise instructed.
- **Diet:** The anesthetic drugs used during your surgery may cause nausea for the first 24 hours. Following surgery, begin with clear liquids and light foods. You can progress to your normal diet if not nauseated. If nausea and vomiting become severe, or if you show signs of dehydration (lack of urination), please call Dr. Frank's office.
- **Post-Operative Appointment:** Dr. Frank will need to reexamine you 7-10 days after routine knee surgery. Please call the office (numbers on first page) to schedule a follow-up appointment.
- **Driving:** No driving until permitted by Dr. Frank.
- **Work/School:** May return to sedentary work or school 3-4 days after surgery, if pain is tolerable.
- **Phone Numbers and Other Helpful Information:**
 - A low-grade fever (up to 100.5 degrees) is not uncommon in the first 48 hours. Please call Dr. Frank's office with any temperature over 101 degrees.
 - Please call Dr. Frank's office if you have severe pain that your pain medication does not relieve, persistent numbness of the leg, fever over 101 degrees, redness/warmth around the incisions, persistent drainage/bleeding from the incision(s), difficulty breathing, chest pain, excessive nausea/vomiting, or if you experience redness or swelling in your thigh or calf.
 - If unexpected problems occur and you need to speak to someone, please call the doctor. If calling after office hours or on the weekend, you may reach the resident or fellow on call. The resident or fellow on call may not be on Dr. Frank's service and may not be familiar with your case, but will be able to direct any questions/concerns directly to Dr. Frank.
 - a. If you had surgery at Lone Tree, AOP, or Broomfield, call 720-848-8200
 - b. If you had surgery in Boulder, call 303-315-9900
 - If you have an emergency that requires immediate attention, proceed to the nearest emergency room.