

POSTOPERATIVE INSTRUCTIONS MULTILIGAMENT KNEE RECONSTRUCTION

ACTIVITY AND BRACE USE

- Your brace should be locked in full extension and worn at all times, including sleep
- Your weightbearing allowance is “Touchdown weightbearing”. You may rest your operative leg and foot on the ground, without putting any of your bodyweight on it
- Using crutches and with your brace on, you may walk by placing all of your weight on your non-operative leg
- No driving until instructed otherwise by physician
- May return to sedentary work 3-4 days after surgery, if pain is tolerable

WOUND CARE

- Remove surgical dressing on the second day after surgery - Apply band-aids or dry gauze over incisions. Change any time they become damp or dirty, keep clean and dry at all times
- If steri-strips are present, they are to remain in place until first post op visit. If they fall off on their own, they do not need to be replaced
- It is OK to shower starting on the second day after surgery. Let water and soap run over your incisions, gently pat dry afterwards and apply new, clean gauze/band-aids. DO NOT scrub incisions, apply any soap/products directly to them, or aim water directly at incisions
- DO NOT submerge incisions in water (bath, pool, hot tubs, etc) for at least 6 weeks after surgery
- DO NOT apply any cream/oil/lotion etc on or near your incision at any time
- It is normal for the incisions to have some bleeding/drainage and swelling following surgery

MEDICATIONS

- Please follow the attached medication tracking sheet provided
- Most patients will require some narcotic pain medication for a short period of time
- You are also given prescriptions for extra-strength Tylenol and an anti-inflammatory (Celebrex). Use these first to reduce the amount of narcotic medication needed
- In most cases you will also be provided with prescriptions for Aspirin (to prevent blood clots), Omeprazole (to protect stomach while taking NSAIDs), Zofran (if needed for nausea), Colace (recommended to prevent constipation), and a Vitamin D/Calcium supplement (to enhance healing)
- Common side effects of the pain medication are nausea, drowsiness, and constipation – to decrease the side effects, take medication with food
- DO NOT drive or operate heavy machinery while taking narcotic medication. Do not consume alcohol or other recreational drugs while taking narcotic medication.

ICE THERAPY

- Use an icing machine or ice packs for 20 minutes every hour to help reduce pain and swelling

EXERCISE

- Begin quadricep strengthening 24 hours after surgery. Perform these 2-3 times per day
- Formal physical therapy (PT) typically begins after you are seen at your first post-operative appointment. A prescription and protocol will be provided at that time if not before

PAIN MANAGEMENT STRATEGIES

- Getting adequate rest, using your sling and icing your shoulder are essential
- Using all medications as prescribed will provide ‘multi-modal’ pain control pathways
- CBD (without THC) is helpful for some patients (oral intake only, DO NOT apply topically)
- Meditation is proven to reduce surgical pain (Headspace app has many relevant sessions)

FOLLOW-UP CARE/QUESTIONS

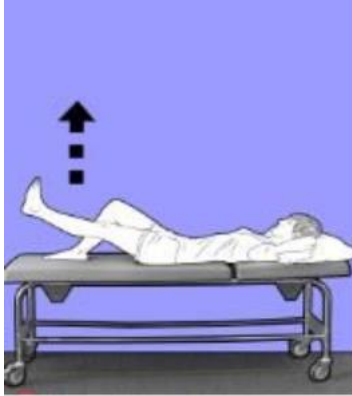
- Your first post operative visit will be 10-14 days after surgery
- Dr. Reynolds’ office can be reached at 336-716-0077, M-F, 8am – 4pm. Patient portal messages will also be answered during these hours
- Outside of the above hours, you may call the same phone number if you have an emergency to reach the physician on call via an answering service

EMERGENCIES

- Contact Dr. Reynolds’ office at 336-716-0077 if any of the following are present:
 - Painful swelling or numbness (note that some swelling and numbness is normal)
 - Unrelenting pain
 - Fever (over 101° it is normal to have a low-grade fever the first day or two after surgery)
 - Redness around incisions
 - Color change in arm and/or hand
 - Continuous drainage or bleeding from incision (a small amount of drainage is expected)
 - Difficulty breathing
 - Excessive nausea/vomiting

If you have an emergency that requires immediate attention, proceed to the emergency room

Straight leg raise



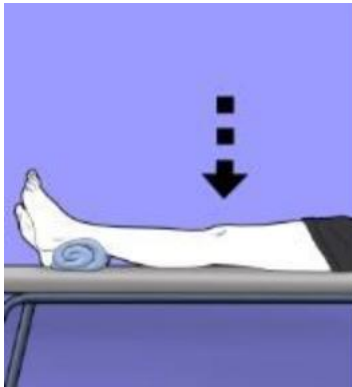
Goal:

To strengthen the quadriceps.

Instructions:

Position yourself on your back with your affected knee straight and their other knee bent. Tighten the muscles in your thigh and lift your leg off the bed. Ensure that you keep your knee straight. Initially, you may need a “spotter” supporting the leg’s weight at the ankle. This exercise must be completed in your brace.

Quadriceps setting



Goal:

To activate the quadriceps and stretch the muscles behind your knee.

Instructions:

Position yourself sitting with your legs straight. Place a rolled up towel under your ankle. Squeeze your quadriceps and allow gravity to assist straightening your knee. Ensure your toes remain pointing up. You will feel a stretch behind our knee.