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## **KNEE ARTHROSCOPY DISCHARGE INSTRUCTIONS**

**Diet** • Resume regular diet as tolerated.

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**Medication** •

- Follow medication instructions in your pre op binder for multimodal pain control
- Oxycodone  Tylenol #3  Norco
- Aspirin 81 mg: Take 1 tablet for 2 weeks.
- You have been given a prescription for Phenergan. Fill this prescription **ONLY IF** you have severe nausea.
  - If you had a block, begin taking pain medicine at the first sign of return of sensation. Take medicine prior to onset of pain.
  - \* Restart your daily medication unless you are instructed to do otherwise

You will be given a prescription for pain medicine at your preoperative appointment. Take the medicine as needed according to the directions on the bottle. Possible side effects include nausea, dizziness, headache, vomiting, constipation and urinary retention. If you experience these side effects please call our office for assistance. Discontinue the medication if you develop a rash, shortness of breath, itching, or difficulty swallowing. If these symptoms become severe you should seek immediate medical attention.

**Refills on pain medication are authorized during office hours only (8am-5pm; Mon-Fri). Meds will not be refilled on weekends.**

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### **Activity**

- You have been given a cooling unit to ice your knee. This can be used all at times for the first 1-2 weeks, and then as needed. Do not let the ice pad directly touch your skin. **DO NOT** use heat.
- Apply ice, even though bandages are thick and you may not feel the cold. Apply ice to the 3 times per day for 30 minutes for the first 1 week until your knee is feeling comfortable again. **DO NOT** use heat.
- Pump your foot up and down 20 times per hour, every hour you are awake.
- Place a rolled towel under the ankle of your operative leg 3 times per day for 20-30 minutes for the first week to encourage full knee extension.
- **DO NOT** place a pillow underneath the knee for comfort. To elevate your leg, it must be straight with pillows under your ankle.
- You may begin straight leg raising exercises (if you have a brace with it on). While lying down, pull your foot all the way up, tighten your quadriceps muscle and lift your heel off of the ground. Hold this position for 2 seconds, and then let the leg back down. Repeat the exercise 10 times, at least 3 times a day.

## Page 2 Knee Arthroscopy

- You have been given a portable sequential compression device. Wear on both legs when you are not walking including while sleeping until follow up appointment.

### Walking

- Bear weight as tolerated on the operative leg. Use crutches to assist with weight bearing.
- DO NOT** bear weight. You may stand but **DO NOT** walk with full weight on the operative leg.
- You may put 30% partial weight on your leg with your crutches

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### Dressing/Showering

- Keep the dressing dry.
- You can expect some light wound seepage through the bandage. **DO NOT BE ALARMED**. Fluid seepage is normal. If the dressing does get soaked: Remove and replace with dry gauze and an ace wrap. **NEVER** remove paper tapes (steri-strips) or your sutures.
- If the ace wrap is uncomfortable, you may remove it and rewrap it. Re-apply your brace if you have one.
- Remove brace and all dressings 72 hours after surgery. **NEVER** remove paper tapes (steristrips) or your sutures. Apply fresh gauze and ace wrap. Wrap lightly over the wound. Re-apply the brace.
- If you begin physical therapy, the dressing may be removed by the therapist.
- DO NOT** remove the dressings until you are seen in our office.
- You may shower 3 days after surgery unless told otherwise. **DO NOT** immerse the knee under water and **DO NOT** rub the incision. Reapply new gauze pads, your ace wrap, and your brace after showering. If the wounds are dry, you can use bandaids.
- You may **NOT** shower or get the dressings wet until after your doctor visit. Cover the bandages appropriately when washing to keep them from getting wet. Dressing Care

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### Arthroscopic Findings

- Torn ligament  ACL  PCL  Other \_\_\_\_\_
- Torn meniscus (cartilage)  medial (inside)  lateral (outside)
- Joint lining irritation (synovitis)
- Focal articular cartilage injury
- Arthritis:  Mild  Moderate  Advanced
- Loose body or bodies
- Other: \_\_\_\_\_

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### Procedure

- Partial meniscectomy (cartilage removal)
- Meniscus repair: limit bending your knee to 90° for 4-6 weeks.
- Joint surfacing smoothing (chondroplasty)
- Cartilage Biopsy (MACI Biopsy)
- Articular cartilage (joint surface) repair
- Removal of loose body
- Other \_\_\_\_\_

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### Physical Therapy

- You will be given a physical therapy prescription to begin in 1 to 2 days.
- You will be given a physical therapy prescription when you are seen in the office for follow-up.
- You will not need physical therapy

Your Follow-up appointment is \_\_\_\_\_.

**Specific Instructions:**

If any of the following signs and symptoms occur, you should contact your doctor. If the problem occurs out of office hours, please call 949-491-9991 and ask for the Doctor on-call.

Signs and symptoms to watch for include:

1. A sudden increase in swelling and redness or warm at the area the surgery was performed **which is not relieved by rest, ice, and elevation.**
  2. Oral temperature greater then 101.5 degrees that is not relieved by taking 2 Tylenol every 4-6 hours. **Do not exceed 3.5 grams of Tylenol over 24 hours. Note your pain medicine contains Tylenol or acetaminophen.**
  3. Excessive drainage from the incision or dressing which has not stopped 72 hours after surgery which is not relieved by applying a compressive dressing, ice and elevation.
  4. Fever, chills, shortness of breath, chest pain, nausea, vomiting or other signs and symptoms that concern you
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I have seen and understand these instructions.

\_\_\_\_\_  
Discharge Nurse

\_\_\_\_\_  
Patient or guardian

date \_\_\_\_\_

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