

Post-op Knee Instructions

The following is an outline of instructions and information for post-operative knee surgery. Follow these instructions and if you have any questions, contact Dr. Gudeman or his staff. These instructions pertain to most knee procedures. Occasionally your specific procedure may require slightly different instructions. If that is the case, Dr. Gudeman or his staff will inform you.

Pain, Swelling, Nausea and Low-grade Fever

It is completely normal to experience some post-operative pain and discomfort. The severity of the pain depends on the extent of the surgery and your individual pain tolerance.

1. The surgical knee was injected with a long-lasting local anesthetic which will wear off after 4-8 hours. An increase in pain can be expected at that time. The pain may increase during the course of 2-5 days after surgery. Do not hesitate to use the pain medication as prescribed to control pain while at home.
2. It is not uncommon to have some mild temperate elevations after surgery (less than 101 degrees) due to incomplete lung expansion. To resolve this, take 10 deep breaths and forcefully exhale every hour while awake for the first 3 days after surgery. You may take Tylenol to improve comfort during temperate elevation.
3. The pain medications prescribed may cause itching or nausea. Do not take them on an empty stomach. Benadryl may help decrease the itching. If you experience any significant nausea or vomiting, you may take the anti-nausea medication prescribed by Dr. Gudeman.
4. It is normal to experience a fair amount of swelling in your knee immediately after surgery. It may take up to 3-4 days for the swelling to decrease. Keep your knee, leg and foot/ankle elevated at or above heart level during the early post-op course. This may require you to be flat on your back with 3-4 pillows under the ankle to elevate the knee. This will also help obtain full knee extension. Compression hose will also help to minimize lower extremity swelling.

Ice

Use the cold wrap provided and place over your knee during the first 7 to 10 days (usually 20 to 30 minutes on and 20 to 30 minutes off). Do this as often as possible but at least every 2 hours while awake for the first 3-4 days. Do not place the ice pack directly on the skin, always have the cover on.

Dressing Care

It is normal for the dressing to have some bloody seepage after surgery. This does not represent ongoing bleeding. Do not attempt to change the dressing yourself. This will be changed in the office during the first post-op visit following surgery. If the blood seems excessive or seeps continuously, please call the office.

Unless instructed by us, do not attempt to remove the steri-strips or sutures on your own. These will be removed during one of the early post-op visits.

The compression hose helps secure the dressings and help control swelling. During your early post-op visits, instructions will be given when you can remove the compression hose.

Bathing

Keep your dressing clean and dry. Do not get the post-op dressing wet. You may shower if you adequately cover the surgery site with cling wrap or plastic bag. Do not submerge the surgical site while bathing and/or in a pool.

Activity

Utilize crutches or other assistive device (walker) until limp has resolved. For a routine knee scope, typically 2 crutches are used for the first week after surgery, followed by 1 crutch for an additional week. Dr. Gudeman will inform you if your weight bearing status or duration of crutch use varies. You may flex/extend the knee and weight bear on the surgical extremity as pain dictates. You may move the knee and sleep in any position, but not vigorously bend the knee in any directions as this may increase swelling and pain. *Post-operative exercises: See sheet included in the material given by Dr. Gudeman.*

Driving

Left Knee Surgery: You may drive an automatic if you are no longer taking narcotics

Right Knee Surgery: You may not drive until full control of the extremity is regained and you are off all narcotic medication

Medications

1. Dr. Gudeman usually prescribes pain and anti-medication after surgery. The prescriptions will be given to the family by Dr. Gudeman immediately after surgery and recommended usage will be explained. Please follow the instructions on the medication bottle. Any changes in those instructions will be discussed by Dr. Gudeman or his staff.
2. Pain medications/narcotics can be habit-forming and therefore life-threatening. It will be important to wean off narcotics as soon as possible after surgery.
3. **Begin taking baby aspirin (81mg) once a day by mouth for 4 weeks.** (Unless there is a reason why you cannot take aspirin, such as an allergy to aspirin or stomach/kidney problems that aspirin may make worse). Taking aspirin also may reduce your need for post-op medicine and may decrease the chance of developing blood clots (DVT, deep venous thrombosis) in your extremities.

Warnings

Immediately call Dr. Gudeman/his staff at **317.884.5161** if any of the other following occur:

- Excessive bleeding
- Excessive non-bloody wound drainage beyond the first 3-4 days
- Poor pain control
- Fever over 101 degrees Fahrenheit after post-operative day 3
- Increased redness along incision
- Severe shortness of breath
- Any other urgent concerns/questions

For urgent questions after office hours, you may still contact the office at **317.884.5161**. Your call will be transferred to our answering service, which will contact the on-call physician or physician assistant.

For emergencies or if there are any delays after calling the answering service or office about an emergency situation, going to a local hospital emergency room is recommended. If you cannot get to an emergency department for emergency issue, call 911.