



HEALTH
UNIVERSITY OF UTAH

Travis G. Maak, MD
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590 Wakara Way
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Arthroscopic Partial Meniscectomy Post-Operative Instructions

• PAIN

- Most patients require some narcotic medication after surgery, if only at night to help themselves sleep. You will be given a prescription(s) with instructions for its use. *Do not take more than prescribed.* If your pain is not adequately controlled, contact the surgeon on call. Phone numbers are provided.
- Common side effects of the narcotics include nausea, vomiting, drowsiness, constipation, and difficulty urinating. If you experience constipation, use an over the counter stool softener such as Colace. Minimize the risk of constipation by staying well hydrated and including fiber in your diet. If you have difficulty urinating, try spending a little time out of bed on the crutches. If it is not possible for you to urinate and you become uncomfortable, it is best if you go to the Emergency Room to get catheterized.
- Contact the office if you have nausea and vomiting. This is usually caused by the anesthesia or narcotics. We will either give you a medication for nausea at time of surgery or we will call it in to a pharmacy if you experience these symptoms.
- Do not drive or make important business decisions while using narcotics.
- Anti-inflammatories (advil, naprosyn, aleve, etc) may be taken in conjunction with the pain medication to help reduce the amount of narcotics needed. Do not take extra Tylenol if the pain medication given to you already has Tylenol in it.

• WOUND CARE

- You may remove the Operative Dressing 2 days after surgery.
- KEEP THE INCISIONS CLEAN AND DRY.
- Apply the Op-Site bandage found in your red folder to the incisions. Keep these in place until your post-op appointment. Please do not use Bacitracin or other ointments under the bandage. The center of the bandage should be placed over the incision. There will be overlap, just don't get the adhesive portion on the incision.
- An ACE wrap may be used to help control swelling. Do not wrap the ACE too tight. You may be given a stockinette to place over your wound and under the brace – this is to help alleviate sweating under the brace.
- There may be a small amount of bleeding and/or fluid leaking at the surgical site. This is normal. The knee is filled with fluid during surgery, sometimes causing leakage for 24-36 hours. You may change or reinforce the bandage as needed. Please contact our clinic if you need more Op-Site bandages.
- Use Ice or the Cryocuff for 20-30 minutes every hour for the first 3-4 days, then as needed for pain relief. Do not ice for more than 30 minutes every



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hour. Do not wrap the Ace too thickly or the Cryocuff cold may not penetrate.

- There will actually be more swelling on days 1-3 than you had the day of surgery. This is normal. The swelling is decreased by using elevation, gentle motion and compression. The swelling will make it more difficult to bend your knee, but once the swelling goes down, it will become easier to bend your knee.
 - You may shower on Post-Op Day #3 using a water-tight plastic bag or Saran wrap over your knee. **DO NOT GET THE WOUND WET**. You may gently wash around the incision with a washcloth, then gently pat the area dry. Do not soak the knee in water.
 - A low-grade temperature is very common within the first few days of surgery. This can often be treated with getting out of bed in a sitting or standing position, deep breathing and coughing to clear the lungs. If fevers, pain or swelling continue, please call.
- **DIET**
 - Begin with clear fluids and light foods (jello, clear broths). Progress to a regular diet as tolerated.
 - **ICE**
 - Use either the ice machine or ice packs every for 20-30 minutes every hour or as needed as your pain improves until your post-operative visit. This is intended for pain relief. Do no ice more than 30 minutes every hour.
 - **ACTIVITY**
 - Elevate the operative leg above the level of your heart as much as possible during the first week. This will help with pain and swelling. Elevate leg with a couple of pillows placed under your ankle/foot (to keep the knee from sitting in a flexed position).
 - You can place your full weight as tolerated (WBAT) immediately following your surgery. (WBAT = may put as much weight on the extremity as tolerated).
 - You will be given crutches to assist with ambulation immediately following surgery, but feel free to stop using the crutches when they are no longer needed. In fact, if you are pain free or not walking with a limp, you do not need crutches at all.
 - Avoid prolonged sitting or long distance traveling for 2-3 weeks. This is considered more than 2 consecutive hours of sitting.
 - May return to sedentary work or school the day after surgery if tolerated. Most people take the rest of the week off (Surgery either Tuesday or Wednesday) and return to office work the following Monday. Manual labor jobs may require more time off based on specific job requirements.



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- **EXERCISE**

- Begin the Home Exercise Program (HEP for short) as soon as your pain allows. These exercises can be found in the red folder you received after surgery. For any questions regarding the exercises or when you can return to activity, call Mark at 801-587-1473.
- Move ankle up and down throughout the day to help blood flow and decrease the chance of a blood clot. Also, when standing, lift your heels off the ground and come onto the ball of your foot. You can then rock back on your heels and lift your toes off the ground. Pumping your ankle while standing is a more effective exercise.
- Do exercises 3-4 times a day until your first post-operative visit. Do exercises unless instructed to stay immobilized.
- If therapy is needed, it will usually begin after the first post-operative visit.

- **CONCERNS/QUESTIONS**

- If you feel unrelenting pain, notice incision redness, continuous drainage or bleeding from wounds, continued fevers greater than 101°, difficulty breathing or excessive nausea/vomiting, please call **(801) 587-7040** during regular office hours or **(801) 587-7100** (physicians' answering service) after 4:00 pm or on weekends.
- If you have an emergency that requires immediate attention, proceed to the nearest Emergency Room.

- **FOLLOW UP APPOINTMENTS**

- If you do not already have a follow up appointment scheduled, please call (801) 587-7109 during normal office hours and ask to schedule a "post- op appointment". I would like to see you back 10-14 days after surgery. However, if there are any post-operative surgical concerns, please call and we will get you in sooner.

- **STUDY PATIENTS**

- We thank you for participating in clinical studies. Our intention is to improve your care and the care of future patients.
- If you have any questions regarding the study, please call the numbers provided on the study documents or you may contact the office numbers provided below.

- **IMPORTANT NUMBERS**

- Questions
 - During Office Hours (8:00-4:00)
 - Cassidy (Medical Assistant) 801-587-7040
 - Tiffany (Surgery Scheduling) 801-587-7187
 - Nikki Cooper (Practice Coordinator) 801-587-0989
 - Mark Beese (Athletic Training Cord) 801-587-1473
 - After Hours (Tell the hospital operator your surgeon's name and they will contact the appropriate on call physician)



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- 801-581-2121
- Office Appointment Scheduling
 - 801-587-0989
- Physical Therapy
 - 801-587-7005
- Toll Free
 - 1-800-824-2073
- Dr. Maak Fax
 - 801-587-3990