



Knee Arthroscopy With Debridement/Partial Meniscectomy Postoperative Instructions

- 1. May use crutches/ walker but weight bearing is as tolerated immediately after surgery**
 1. Crutches or walker may be used immediately after surgery for support, balance and safety. You are allowed to weight-bear as tolerated on the lower extremity after hip arthroplasty without restrictions or precautions immediately after surgery.
- 2. Icing and elevation of operative extremity**
 1. Consider intermittent icing and elevation of the joint for half an hour every 3 hours for the first couple of days after surgery. This will help prevent swelling and pain related to swelling of the lower extremity. For proper elevation, insure that that affected heel is higher than the shoulder or the chest.
- 3. Avoiding deep vein thrombosis and pulmonary embolisms**
 1. Light activity, muscle contraction, and gentle uninjured joint range of motion after major surgery may help you avoid complications such as deep vein thrombosis or pulmonary embolism. Staying reasonably active after surgery may help you avoid complications like venous thrombosis and pulmonary embolisms. Sitting up, standing, and short walks at regular intervals while concurrently avoiding strenuous activity is advisable.
- 4. Dressing care**
 1. There will be no stitches or staples requiring removal. There are 2 or 3 layers of dressings covering the incision. The deepest layer includes skin glue or Steri-Strips that will fall off or resolve on its own and no dressing changes or manipulation is required. The watertight Silverr Mepilex superficial dressings can be removed at 1 week without replacement.
- 5. Postoperative rehabilitation**
 1. It is recommended that you start formal physical therapy and a home exercise program within 10-14 days after surgery. The physical therapist will assist in regaining range of motion, strength and function according to appropriate protocols based on surgical interventions performed. We used the Brigham and Women's Hospital Harvard physical therapy program for all of our postoperative surgical protocols that are available online for reference and review.
- 6. Pain medication regimen**
 1. 1- Tylenol 1 g (two of the 500 mg tabs by mouth after food) every 8 hours start immediately after surgery
 2. 2- Naprosyn 500 mg (one 500 mg tab by mouth after food) morning and evening (twice daily) start immediately after surgery
 3. 3- Aspirin 81 mg (one 81 mg tab by mouth after food) morning and evening (twice daily) start the evening after surgery
 4. 4- Oxycodone (5 mg tab) -this can be taken as needed for residual pain or discomfort despite taking the schedule Tylenol, Naprosyn and Aspirin. Please make sure you are taking the other three medications as scheduled and described above then take the oxycodone as needed every 4-8 hours. You can wean off the oxycodone by taking half tabs every 8-12 hours after the first week. Take one tab 1 hour before physical therapy appointments as well if that helps.
 5. If you have any concern regarding allergy or gastrointestinal intolerance to naproxen or Naprosyn, Celebrex 100 mg or Celebrex 200 mg tabs can be used instead of Naprosyn.