

PATIENT INSTRUCTIONS POST KNEE ARTHROSCOPY AND PATELLAR STABILIZATION (MPFL REPAIR OR RECONSTRUCTION)

Instructions

- Do only those exercises prescribed by your surgeon or physiotherapist.
- The exercises should not cause any sharp pain - if they do, please discuss it with your physiotherapist and or surgeon at your next visit.
- Exercises are to be performed 4-6 times a day for the first 2 weeks.

Following surgery you should

- Rest and ice your knee for the first 48 hrs. Apply ice for 20 minutes at a time every 3-4 hours. Or use the “ice-man” if given one.
- Keep your knee elevated when not walking around, above the level of your heart. It may be easier to recline or lye down.
- Use the crutches for walking initially, but put as much weight through the operated knee as tolerable, **WHILE WEARING THE BRACE LOCKED STRAIGHT** (if placed in one)
- Make an appointment to see your physiotherapist within a few days of surgery. Prior to seeing the physiotherapist you can begin with the exercises demonstrated below.

1. Calf Pumps

Pull toes & ankle up, then push toes and ankle down.

Repeat: 20 times



2. Heel Slides

While sitting slide your heel back towards your bottom **UNTIL THE KNEE IS FLEXED TO 45 DEGREES ONLY.**

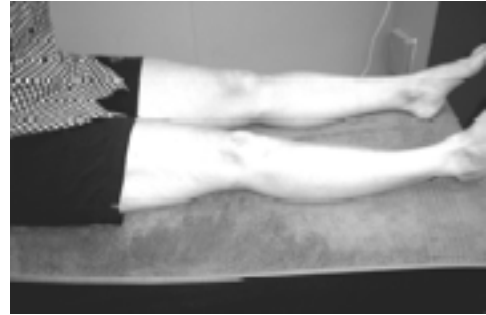
Hold: 5 seconds.

Repeat: 10 times



3. Co-contraction

Contract your hamstrings by pushing your heel into the bed and then co-contrast your quadriceps while holding the hamstring contraction. This exercise may also be performed with a rolled towel behind the knee and attempt to squash the towel while keeping your heel on the bed.



Hold: 5-10 seconds.

Repeat: 10 times

4. Heel Raises

Keeping both feet on the ground. Rise up onto your toes using a wall/Bench to stabilise if needed.

Repeat: 15 times x 3



INSTRUCTIONS ABOUT THE DRESSINGS (unless told otherwise, the following will apply)

Under your bandage there will be a layer of “soft band” – cotton wool bandage, and under that the dressings covering the wounds. The wounds will be closed with “dissolvable” sutures and often reinforced with steri-strips (“butterfly sutures”).

If you are seeing the surgeon for your post-operative review within 6 days, leave all the bandages intact until then. If your appointment is 7 days or more later, you can “de-bulk” the bandages after 5 days. This involves taking off the bandage and the cotton wool, and either, leaving them both off if you feel comfortable, or re-apply only the bandage (without the cotton wool). It is common for there to be some blood visible under the bandage, which has soaked through the dressings covering each of the wounds, so this should not cause alarm. Leave the dressings covering the wounds until you attend your follow up appointment.

THE BRACE IS TO BE WORN AT ALL TIMES WHILE WEIGHT-BEARING, UNTIL YOU ARE TOLD BY YOUR SURGEON THAT YOU NO LONGER REQUIRE IT.

Follow the rehabilitation guidelines given to you by your surgeon, and bring these with you to show the physiotherapist who will be supervising your rehabilitation.

The date of your first post-operative review will be: ___/___/___

PHYSIOTHERAPY REFERRAL

Physiotherapist:

Patient name:

Surgery performed and date:

Right / left knee
MPFL repair / reconstruction
With/ without lateral release
With/ without VMO advancement

Other procedures performed

Thank you for supervising this patient's rehabilitation following surgery

Signed, Mark Porter

REHABILITATION GUIDELINES FOLLOWING MPFL RECONSTRUCTION & SOFT TISSUE STABILIZATION OF THE PATELLOFEMORAL JOINT

- Post-operatively the patient will be placed in a knee immobiliser or ROM brace in extension
- The patient can commence quadriceps setting exercises as soon as possible post-operatively, with the emphasis on VMO recruitment
- Full WBAT is permitted immediately post-operatively with the knee in the brace, and with or without the use of crutches, as long as the brace is locked in full extension
- The brace is removed or the settings changed to allow active ROM exercises from full extension to 45dg flexion for the first 3 weeks. The patient is not allowed to walk with the brace unlocked until there is sufficient quadriceps control
- The patient should also perform hip exercises and calf raises during this period
- The patient will be reviewed by the surgeon within 2 weeks post-operatively to check the wound and monitor progress
- Active ROM is also increased over the following weeks, with ROM being limited to 45dg flexion until 3 weeks post surgery, then to 90dg until 6 weeks post surgery, and then to 120 dg after that
- Quadriceps strengthening is also increased with CKC exercises, working within the permitted ROM
- Patients are reviewed by the surgeon at 6 weeks
- The patient can be weaned off use of the brace following the 6 week review, as long as quadriceps control is sufficient for weight bearing without the brace. This usually takes another 2 weeks
- After 6 weeks, strengthening and balance are progressed as tolerable
- Patients should only return to sport when the knee is fully rehabilitated in terms of ROM, strength and balance, and after complete of sport-specific drills.
- The patient will be reviewed again at 3-4 months and/or prior to return to full activity