

# PATIENT INSTRUCTIONS POST KNEE ARTHROSCOPY / ARTHROTOMY: MENISCAL REPAIR, OCD OR O.C.#

## 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.
- You will **may not** be allowed to bear weight on the operated side until at least 6 weeks post surgery. You will be allowed to mobilize with crutches touching the ground for balance.
- Keep your knee elevated when not mobilizing, above the level of your heart. It may be easier to recline or lye down.
- Take the analgesia as prescribed by your anesthetist
- 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.

Hold: 5 seconds.

Repeat: 10 times



### 3. Co-contraction

Contract your hamstrings by pushing your heel into the bed and then co-contract 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.



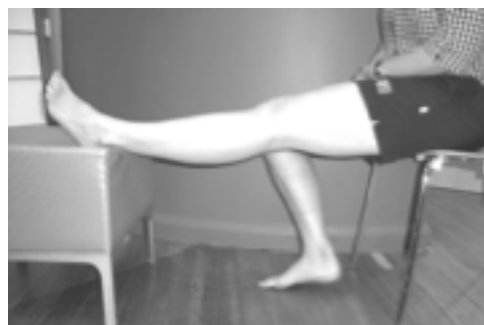
Hold: 5-10 seconds.

Repeat: 10 times

### 4. Passive Knee Extension

Place heel up on a chair while sitting. Allow your leg to straighten out completely.

Hold: 1-5 minutes



## 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 steristrips (“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.

**PHONE TO CONFIRM APPOINTMENT TIME ON \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_**

### Physiotherapy / rehabilitation guidelines

- Non-weight bearing ROM is progressed as tolerable towards full range
- Co-contractions are also permitted while non-weight bearing, with the full ROM
- Stationary cycling is allowed, spinning against a light resistance only, when there is sufficient ROM and following the first post-operative review
- Swimming is usually possible within 3-4 weeks, as long as wounds have healed and you are able to get in and out of the water without putting weight through the knee
- Partial weight bearing is introduced at 6-8 weeks post surgery, with or without a check x-ray (if appropriate). Weight bearing is increased as long as pain free and under physiotherapy supervision.