

Surgery Instructions – Knee

Before Surgery

*** All instructions & protocols can be found on my website ***

<http://www.patrickmcgahanmd.com/physical-therapy-pdfs.html>

- **Medical Clearance**
 - If necessary, please see your primary care physician, cardiologist, and/or specialist
 - Have your doctor(s) send, fax, or email my office a letter declaring that you are ready and safe for surgery

- **EKG & Blood work**
 - If necessary, please make sure this is done **well in advance** of your surgery date and that our office has received the result
 - EKG's must be within 3–6 months of your surgery depending on the facility where your surgery is scheduled
 - Any abnormality requires clearance by a cardiologist
 - Blood work needs to be recent, within one week of your surgery date
 - If older than 30 days, it must be repeated

- **Medications**
 - Stop all blood thinners, aspirin, and anti-inflammatories (i.e. motrin, ibuprofen, advil, naprosyn, aleve, excedrin, etc.) at least seven days before surgery
 - Please consult your primary care physician if you are unsure of your medications
 - Celebrex, tylenol, and narcotics are generally ok prior to surgery
 - Ensure my office has a **current** list of your medications, including dosage & frequency

- **Food & Drink**
 - *Nothing to eat or drink after midnight prior to surgery*
 - If necessary, normal daily medications may be taken with a sip of water

- **Pre-Operative Appointment**
 - Pre-operative appointments are 1-2 weeks prior to surgery

 - We will discuss your surgery and answer all of your questions
 - You are welcome to bring a family member with you
 - We will call in a prescription for narcotic and anti-inflammatory medications
 - This should be picked up prior to surgery
 - We will schedule your post-operative appointment for 1-2 weeks following surgery
 - We will schedule your physical therapy appointment for 1-2 weeks following surgery

- **Physical Therapy**

- Kyle Yamashiro of Results Physical Therapy
 - Results PT has 3 locations
 - Rancho Cordova – (916) 362-7962
 - Murieta – (916) 354-0719
 - Carmichael – (916) 562-9130
 - Any questions regarding your therapy should be directed to Kyle and his staff
- If you already have a physical therapist, Kyle or his staff will be instructing you regarding the specific therapy protocol that I want you to do with your therapist
- Physical therapy protocols may be downloaded from my website at
 - <http://www.patrickmcgahanmd.com/physical-therapy-pdfs.html>

- **Optional Items**

This is strictly optional. I generally recommended patients simply use ice as needed on top of a towel to protect the skin.

- Cold Therapy Unit
 - Any questions or problems must be addressed to Pacific Medical Inc.
 - Chris Haas – (916) 295-3688 / Main Office – (916) 706-1520
 - Pacific Medical Inc. will contact you the week prior to surgery
 - Your insurance company may or may not authorize this product
 - My office and staff does **NOT** provide or support this item
 - You are **NOT** required to purchase this optional product
- Sling or Braces
 - Any questions or problems must be addressed to Pacific Medical Inc.
 - Chris Haas – (916) 295-3688 / Main Office – (916) 706-1520

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Day of Surgery

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- **Preparation**
 - *Nothing to eat or drink after midnight prior to surgery*
 - If necessary, normal daily medications can be taken with a sip of water
 - Bring your insurance card to your surgery

- **Be Available**
 - Arrive to the hospital 3 hours prior to the time of scheduled surgery
 - If you are the first case, you will arrive 1.5 – 2 hours prior
 - Scheduled surgery times are only guaranteed for the first case
 - All other cases are based on how long the earlier surgeries take and will begin immediately following the end of an earlier case
 - We often run ahead of schedule, be available by telephone if we have to call you in early
 - Ensure we have a current and working contact number for you
 - If we cannot get a hold of you, you may miss your surgery, which will then need to be rescheduled

- **Illness**
 - If you are feeling ill for ANY reason, you must let us know as soon as possible
 - Your surgery may need to be rescheduled

- **Discussion**
 - If a family member or significant other is available immediately after surgery and if you wish, I will talk to them regarding your surgery and answer any questions they might have
 - Most patients have difficulty remembering information after anesthesia so I do **NOT** discuss the surgery with you immediately after surgery
 - I will talk to you, answer questions, and show you the pictures during our first post-operative appointment, which will take place on 1-2 weeks after surgery

- **Going Home**
 - Someone must be available to take you home
 - Taking a taxi alone is **NOT** allowed

Surgery Instructions – Knee

After Surgery

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- **Post-operative Appointment**
 - If you have not already made one, call my office to schedule your first appointment 1-2 weeks after surgery

- **Pain Control**
 - Pain medication will be called in at your pre-operative appointment
 - Narcotics are used as needed
 - Anti-inflammatories should be started directly after surgery, must be taken regularly, and must continue for four weeks after surgery
 - For medication refills or changes,
 - For refills of medications, call your pharmacy or my office during office hours
 - For changes to medications, call my office during office hours
 - On-call physicians can **NOT** prescribe for patients they have not seen
 - Ice the knee 20 minutes per hour for the first 72 hours while awake
 - Be very careful when applying cold directly to the skin in limiting how much time it is used to avoid cold burns
 - If a cold therapy unit has been supplied, it is for home use. It will not be placed on you at the time of surgery. If there are any problems or questions with the unit, please contact Pacific Medical, Inc.
 - After the first 72 hours, ice the knee at least 3 times a day and especially after physical therapy sessions
 - It will work through the dressings

- **Dressings**
 - Dressings can be taken off 72 hours after surgery
 - The incisions will have small pieces of tape over them called “steri-strips.”
 - Do not remove the steri-strips covering the small incisions
 - The steri-strips fall off after one week or can be removed ten days after surgery
 - You can replace the dressings with band-aids, if desired
 - There may be drainage for the first 48 – 72 hours from the incisions. This is normal
 - You may take a shower immediately but do **NOT** get the dressings wet
 - Once the dressings are removed, you can use soap and water on the wounds
 - Do **NOT** take a bath or swim as the incisions should not be soaked in water
 - Keep the incisions clean and dry

- **Swelling & Tingling**
 - It is normal to have some mild swelling, tingling, or numbness after surgery
 - Keep the leg elevated above the heart on several pillows when sitting or laying down
 - Sometimes the dressing might be too tight and can be re-wrapped, if necessary

- **Physical Therapy**

- Physical therapy usually begins one week after surgery
- If you have not already been given an appointment for physical therapy after surgery, please contact my office for a referral
 - My office will supply you with a prescription for your therapist
 - My physical therapy protocol can be downloaded from my website
 - If you see a therapist besides Results Physical Therapy, please obtain my written protocol for your therapist
- The type of surgery you have will determine what you can do after surgery
- If a brace is placed on your leg following surgery,
 - You will use crutches and **NOT** put any weight on the leg until you talk to me at your first appointment, unless otherwise directed
 - You will **NOT** take off the brace (including when you sleep)
 - Except to shower or bathe, change clothes, or do your therapy

- **What to Expect**

- Surgery to reconstruct an ACL or remove a torn meniscus (meniscectomy) or clean out (debridement):
 - Crutches as necessary
 - Usually for 4-7 days
 - You can walk as tolerated and when you feel ready
 - Physical therapy to start by 1st week after surgery
 - First goal is motion
 - Once full range of motion is achieved, strengthening is started
 - After meniscectomy or debridement, full sports and activities by 1-3 months
 - Swimming & stationary bicycle allowed by 2 weeks
 - After ACL reconstruction, full sports and activities with an ACL brace by 9 months
 - Stationary bicycle **and swimming** allowed according to progress
- Surgery to repair a meniscus:
 - Brace immobilization locked in extension for 6 weeks
 - Weight bearing allowed with leg in extension
 - Physical therapy to start by 1st week after surgery
 - Begin range of motion exercises to prevent stiffness but no weight bearing on bent knee
 - Range only 0 – 90 degrees allowed
 - Remove brace by 6th week
 - Range of motion as tolerated
 - AVOID squatting
 - No weight bearing on bent knee greater than 90 degrees
 - Begin full sports and activities by 6 months depending on progress
- Surgery to reconstruct ACL & repair meniscus:
 - Brace immobilization with ROM as tolerated for 6 weeks
 - No weight bearing with crutches for 6 weeks
 - Begin physical therapy by 1st week (after surgery)
 - First goal is motion
 - Once full range of motion is achieved, strengthening is started
 - Full sports and activities with an ACL brace by 9 months
 - Stationary bicycle **and swimming** allowed by 10-12 weeks according to progress