

Arthroscopy Knee Surgery

CALL YOUR SURGEON AT **(815) 398-9491** IF YOU DEVELOP ANY OF THE FOLLOWING SYMPTOMS. AFTER 5PM OR ON WEEKENDS, PLEASE REMAIN ON THE LINE UNTIL A REPRESENTATIVE ANSWERS YOUR CALL.

- **Temperature of 101 degrees or above**
- **Persistent nausea or vomiting**
- **Severe pain not relieved by your pain medicine**
- **Unexpected redness, excessive bleeding, cloudy drainage**
- **Coldness or paleness of the operative extremity**
- **Prolonged numbness, tingling that lasts more than 24 hours**

Pain: You will be given a prescription for pain medication. Take the medication as needed; most patients require pain medication for only a few days. Oral medications take at least 20-30 minutes to take effect. Common side effects include upset stomach and constipation. Drinking lots of fluids and eating foods high in fiber, such as fruits and vegetables, can help. You may use over the counter stool softeners to prevent constipation.

Diet: You may advance your diet as tolerated, starting with liquids or soup. Next, try semi-solid food such as mashed potatoes, applesauce, or jello. Slowly move to solid foods, avoiding fatty, rich, or spicy foods. Do not force yourself to eat large meals.

Nausea: Nausea and or vomiting after surgery is common and can last up to 72 hours. It is important to follow diet suggestions and take prescribed medication (antibiotics, narcotics, and or anti-inflammatories) with food. Some suggestions to help nausea include keeping pain under control, drinking plenty of fluids, aromatherapy (avoid strong scents), and ginger candy or ginger ale. You will also be given medication to help with nausea and vomiting.

Ice/Elevation: Apply plastic covered ice bag or ice machine to your affected extremity as much as possible for the first 3 days. After 3 days apply ice for 30 minutes 4-5 times per day or whenever you experience pain. **DO NOT USE HEAT.** Elevate the affected extremity on two pillows under the ankle.

Activity: Weight bearing as tolerated with crutches (if needed), unless otherwise instructed. Walk as normally as possible, do not walk on your heels or toes.

Blood Clot Prevention: To prevent blood clots, change position frequently and keep your legs active by flexing your thigh muscles and pumping/rotating your ankles 3-4 times daily. Call your doctor if you see any unusual swelling, redness, or tenderness in calves. You will also be taking medication to help prevent blood clots.

Healthy Lungs: Use your incentive spirometer as instructed by the post-operative nurse. This will help prevent pneumonia. Take deep breaths and cough throughout the day. Call 911 if sudden or persistent shortness of breath occurs.

Shower and Bathing: You may shower after 72 hours. Keep the portals clean and dry. Do not soak the dressing or portal area. No swimming or use of a bathtub until cleared by Dr. Pflederer.

Dressing: Dressings can be removed after 72 hours. Do not remove sutures. If you have drainage from the incision sites, you may cover them with band aids or dry gauze and change them daily.

Due to the anesthetic, you have had today, we recommend the following:

1. Have a responsible adult drive you home and remain with you overnight.
2. Expect to be tired for the first 24 hours. Listen to your body and rest as needed.
3. Follow a light diet and drink plenty of fluids.
4. Dizziness is not an unusual side effect the first day 5. Do not drive.

Post-Operative Medications

You may not be prescribed all of the medications listed below. Please contact the office with any questions regarding your post-operative medications.

Pain Control

- **Acetaminophen (Tylenol)**
 - o Take 650 mg three times a day (every 8 hours) for pain control. This is your first option for pain control.
- **Oxycodone**
 - o Take 5 mg as prescribed. This is prescribed for extreme pain.
- **Norco (hydrocodone and acetaminophen)**
 - o Take 5/325 as prescribed. This is for extreme pain and may be prescribed in place of oxycodone. This medication contains acetaminophen. Do NOT take more than 4,000mg of acetaminophen in a 24 hour period.
- **Tramadol**
 - o Take 50mg as prescribed. This medication may be additive or take the place of other pain medications but may not be necessary.

- **Celebrex (celecoxib)**
 - o Take 100mg or 200mg twice a day as prescribed. This medication should be taken with food. You may not receive this medication if you have a history of gastrointestinal bleeding or kidney dysfunction. If prescribed this medication, you will take it for two weeks after you finish your Toradol prescription. You will NOT take it at the same time as Toradol.
- **Meloxicam**
 - o Take 7.5 mg or 15 mg daily as prescribed. This medication may be given in place of Celebrex. It should be taken with food. You may not receive this medication if you have a history of gastrointestinal bleeding or kidney dysfunction
- **Omeprazole**
 - o Take 20 mg daily as prescribed. This medication is to prevent stomach upset and ulcers which can occur after surgery while taking other anti-inflammatory medicines.

Blood Clot Prevention

- **Aspirin**
 - o Take 81 mg twice a day as prescribed. You will take this medication to help prevent blood clots. You will take this medication for 6 weeks following surgery
- **Eliquis (apixaban)**
 - o Take 2.5mg or 5mg twice a day as prescribed. This medication may take the place of aspirin. We will advise you on how long to take this medication. Your anticoagulation plan may include different medications or dosages from listed above. If so, you will be instructed by Dr. Pflederer.

Constipation

- **Senna-S**
 - o Take two pills, 8.6-50mg, twice a day as prescribed. This will help prevent constipation. You will only need to take this medication if you are taking narcotics for pain control (oxycodone, Norco, tramadol, etc.).

Post Operative Medications: Please note that if you are in need of a medication refill, per Orthollinois policy it can take up to 3 business days for our office to refill. **Please plan accordingly.**

Please review your current and new medications listed on the following page. Instructions will be included if any medication should be held or discontinued and for how long.

Medications to Stop Before Surgery

This is a list of medications that have an effect on the blood clotting process. These medications must be avoided 5-14 days prior to surgery. Please contact your prescribing physician for instructions on discontinuing these medications.

Herbal supplements (including tea) and vitamins should also be discontinued 14 days prior to surgery as some of these contain natural blood thinners.

For headaches and other pains, you MAY take Tylenol, according to package directions.

Cilostazol – Pletal	Ketolorac - Toradol
Dabigatran – Pradaxa	Meloxicam
Diclofenac – Arthrotec, Voltaren	Nabumetone - Relafen
Diflunisal - Dolobid	Naproxen – Aleve, Anaprox, Naprosyn
Dipyridamole – Aggrenox	Ocyprozin - Daypro
Etodolac – Lodine	Pentoxifylline - Trental
Fish Oil	Piroxicam - Feldene
Fondaparinux - Arixtra	Soma Compound
Ibuprofen – Advil, Motrin, Midol	Sulindac - Clinoril
Indometacin - Indocin	Vitamin E
Ketoprofen - Orudis	

**If you are currently taking a blood thinner (I.E. Coumadin, Xarelto, Eliquis, Plavix, aspirin) as prescribed by your primary care physician, cardiologist, or hematologist, please contact them for instructions on holding these medications prior to surgery.
DO NOT STOP THESE MEDICATIONS ON YOUR OWN.**

**Getting Your Skin Ready for Surgery with Hibiclens®
(5 Days Prior to Surgery)**

1. Shower or bath like usual. Do not shave.
2. Turn off or step out of the stream of water.
3. Wet the clean washcloth
 - a. Do not apply the soap directly to your face, head, or genital area.
 - b. Apply Hibiclens® soap to the washcloth and wash from neck to toes.
 - c. Repeat
4. Wait 60 seconds and then rinse your skin. Do not scrub. **Minimal contact to genital area during rinsing is fine.**
5. Blot the skin dry with a clean towel.
6. Do not use lotions, creams, powder, perfume or makeup after the shower or bath.
7. After the night shower- use clean pajamas and clean sheets. **You will do this for 5 days prior to surgery and the morning of surgery.**

Special considerations:

- ⊘ Do not use if you are allergic to chlorhexidine gluconate
- ⊘ If you notice a rash, redness, or itching after using Hibiclens®. Do not use it again. When you arrive for surgery, tell your health care team about your reaction.
- ⊘ If you have an ostomy, do not use Hibiclens® soap on the skin under your pouching system.