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POST-OPERATIVE EDUCATION: MPFL RECONSTRUCTION

WEIGHT BEARING & BRACE:

You will use a knee brace following surgery. Your knee should be kept in this brace at all times. Keep the brace locked out straight every time you walk. You should be toe-touch weight bearing until you follow up in clinic. This means you will place your foot on the ground to “hold your place,” but will not put any weight on the foot. If you are doing this correctly, all muscles in your hip and leg will be relaxed. Use your walker or crutches EVERY time you are out of bed or chair. You will be instructed on how to progress your weight bearing status at your first clinic visit.

MOVING YOUR KNEE:

You should keep your knee in extension at all times when you are walking. You can unlock the brace (starting the day after surgery) anytime you are seated or lying down. DO NOT bend your knee more than 90 degrees until instructed otherwise by your surgeon. You should elevate your foot when seated and in bed to your heart level or above to help reduce swelling.

LEG EXERCISES:

It is OK for you to start bending your knee IN THE BRACE the day after surgery (unless otherwise directed by your surgeon). At first, sit at the edge of your bed and let gravity help you bend your knee. You may use your other leg to help support your operative leg. DO NOT bend your knee more than 90 degrees. We also recommend that you spend 30-60 minutes four times a day with your knee straight. Place a small pillow under your ankle so you really feel the stretch behind your knee. You should also elevate your foot 30 minutes four times a day to your heart level or above to help reduce swelling.

ICE:

Please note that with the dressings placed during surgery, you may notice decreased benefit from the ice. Use as needed and if you notice benefit. Ice is most helpful in the first 3 days after surgery, but can help up to 2 weeks after surgery. We do not recommend that you use heat, as this can increase swelling.

If you chose to purchase a commercial ice machine, please use it according to manufacturer’s recommendations.

If you chose not to purchase an ice machine, you may use a commercially available ice bag or fill a large plastic bag with ice and water. (Do not place a plastic bag directly on your skin, but place a towel on your knee in

between your skin and the ice bag.) You can ice your knee 20 minutes on and 20 minutes off throughout the day. Do not ice an area longer than 30 minutes at a time, as this can cause frost bite.

BANDAGES:

You may remove your bandages and shower three days after surgery. If you have white Steri Strips, DO NOT remove them. It is OK to get your incisions wet after the bandage is removed, but it is very important not to soak the incision underwater (no bath, pool, hot tub etc...) for 3 weeks. It is OK to wash the incisions gently with soap and gently pat dry with a towel. Do not place any lotion or other ointment on your incisions. Cover them with Band-Aids for comfort and put the ACE wrap back on just tight enough so that it does not fall off.

MEDICATIONS:

Narcotic pain medicine (such as Oxycontin – long-acting oxycodone, Percocet – oxycodone, Norco – hydrocodone, or Tylenol#3 - Codeine): We will prescribe a different medication if you cannot take these. Take this AS NEEDED only. Do not take additional Tylenol (also called acetaminophen) with these medicines, as they already have Tylenol in them. You may SUBSTITUTE Tylenol for a narcotic pill if you choose to. Be certain that you do not exceed the maximum Tylenol dose as noted on the Tylenol bottle.

Zofran (ondansetron): You may take this medication if you are having nausea or vomiting.

Robaxin (methocarbamol): This muscle relaxer may help with spasms experienced commonly after knee surgery.

Stool softener: Pain medicines often cause constipation. It is best to take most of this medicine with some food, as it can cause a little stomach upset.

*Please do not take NSAIDs such as Ibuprofen or Motrin, as these may slow healing of bone and tendon.

You should take Aspirin following surgery to help prevent a blood clot. Take one full-strength pill (325 mg) twice a day. If you are unable to take Aspirin, you should take another blood thinner. Discuss this immediately with your surgeon. You should also wear the compression stockings that were placed on you following surgery.

FOLLOW-UP APPOINTMENTS:

You should have a **follow-up appointment** with your surgeon in about 2 weeks if you stay overnight in the hospital. If you do not stay in the hospital, you will have an additional visit with the Physician's Assistant within a few days of your surgery. Call (480) 964-2908 right away if you do not have an appointment already scheduled. We will check your incisions and remove any sutures at the 2-week visit. We will also answer any specific questions you may have about your surgery. We will consider getting you into Physical Therapy if this has not been arranged, as many patients benefit from PT after knee surgery.

CALL OUR OFFICE at (480) 964-2908 with any urgent or emergent questions or concerns that you may have, or if you develop swelling in your leg with calf pain, swelling that will not go away when you elevate your leg, a temperature above 101.4, or drainage from your incisions.

If you experience any of these symptoms: go to an **Emergency Department** close to your house: High fever (above 102.5), chest pain, difficulty breathing, fainting, or bleeding.