4. STRENGTH

Following arthroscopy, there is a tendency for the thigh muscles (quadriceps and hamstrings) to become weak and you must work to avoid this.

a. The following can be done to strengthen the QUADRICEPS muscle:

Lie down, tighten the quadriceps muscle and make the knee straight, lift the leg off the ground and hold for five seconds, bring the leg back to the ground, and relax. Repeat 20 times.

Do "wall sits" by leaning against the wall with your feet about 12 to 15 inches from the wall, feet a little wider than shoulder width and feet pointed outward to 30-45 degrees. Slowly squat down until the knee is bent to a right angle, sliding your body along the wall, hold for a few seconds then come back up. Gradually increase the number of repetitions that you perform.

Do half squats and gradually increase the amount of weight on your shoulders.

If you have access to weight machines, the leg press machine should be used. <u>Do not</u> do the knee extension exercise.

b. The following can be done for HAMSTRING exercise:

Lie on your stomach and do leg curls: Bend at the knee and try to bring the foot to your buttocks. You can add ankle weights if desired, or you can use a weight machine if available.

Lie on your stomach, lift the leg off the ground while keeping the knee straight, then bend the knee. Straighten the knee again; then, finally, lower the leg to the ground. Add ankle weights if desired.

5. ENDURANCE

These help build endurance, and can be started as soon as tolerated:

- a. Nordic Track®: Very easy on the knees
- b. Swimming: After the sutures are removed
- c. Biking: Excellent knee exercise
- d. Fast walking
- e. Running: Usually takes about three weeks to start running
- f. Stair Master®: Machines which allow adjustment of the pedal excursion are best
- g. Versaclimber®: Like the stair machine, but with a workout for the arms
- h. Aerobics: Begin with low-impact and build up

6. **RETURN TO SPORTS**

Perform sport-specific drills prior to returning to competition. When you can return to your sport depends on many factors and should be discussed with your surgeon during the post-operative appointments.

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Information After Knee Arthroscopy

DIET

You may resume a normal diet.

ACTIVITY

- 1. You should try to elevate your knee above your heart as much as possible in the first 24 hours to reduce pain and swelling.
- 2. Use crutches only as needed for pain. Gradually put increasing weight on the operated leg as tolerated, and wean off the crutches.
- 3. You may drive a car as soon as pain and swelling subside enough to allow good mobility.
- 4. Most patients are able to return to desk work within a few days after the arthroscopy.

PAIN

- 1. You will be given prescriptions for the following medications, if you are not allergic to them.
 - a. Celebrex: Take two tablets the night before surgery, then one tablet with a sip of water the morning of your surgery before you come to the hospital. Take one tablet the evening of surgery and the remaining tablets twice a day for four days.
 - b. A narcotic pain-killer that you can use if needed for severe pain. This will make you drowsy, so it is best used at night to help you sleep. If you have adverse effects from these medications, then discontinue them.
- 2. Pain should gradually subside after the arthroscopy. If you have increased pain then perhaps you are being too active, and you need to elevate your leg and rest. If you have increasing pain despite elevation and rest, contact our office.

SWELLING

- 1. Swelling is normal after arthroscopy. Usually it resolves slowly over a three to six week period, but it may take several months for full resolution.
- 2. As you become more active, you will often have increased swelling after an activity or exercise session. To minimize swelling you can wear an ACE wrap or elastic knee sleeve and use the CryoCuff after an activity. Also, the Celebrex or OTC anti-inflammatory greatly reduces the swelling in the first week.

WOUND CARE

- 1. Remove the dressing the day after surgery. For the first two days apply Band Aids over the small incisions.
- 2. The small incisions may be sore and develop bruising over the next several days. The bruising eventually disappears and does not require any special care.
- 3. Do not apply creams or lotions to your incisions. They will heal well on their own.
- 4. You may shower the day after surgery. After the shower, blot dry carefully around the incisions and strips of tape; do not rub vigorously with the towel. Do not take a bath or immerse the knee in water for one week after surgery.

PRECAUTIONS

Please call your surgeon if you have:

- 1. Fever 101.5° F or above.
- 2. Redness around the incisions.
- 3. Swelling in the calf and foot that does not improve with elevation.
- 4. Increasing pain not relieved by rest and medication.
- 5. Foul-smelling drainage from wounds.

RETURN VISIT

You will need to visit your surgeon about two weeks after your surgery to check on your progress. This appointment is usually made at the time your surgery is scheduled. In addition, do not hesitate to call if any problems or questions arise before your appointment. You will probably receive a phone call from one of our nurses after you're home to check on your progress.

THE CRYOCUFF

The CryoCuff device is placed on your knee at the time of surgery. It provides compression and cooling to the knee beginning immediately after surgery, in the recovery room, and when you return to the Same Day Surgery Center. You should continue to use this device at home after the surgery to relieve pain and swelling. Please read the instructions about this device that are enclosed.

REHABILITATION

Rehabilitation of the knee after arthroscopy involves a gradual progression of exercises. How fast you are able to progress in this program depends mainly on how much discomfort is present in the knee.

1. **Ambulation**

You may slowly discontinue the use of crutches as the pain subsides. Gradually increase the duration and speed of your walking; try not to limp. When you can walk well without a limp, start light jogging, then gradually build up your distance and speed. Most patients do not start to jog until about three weeks after arthroscopy.

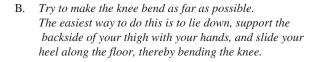
2. Range of Motion

Do the range of motion exercises on the next page as often as possible during the day.

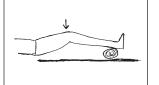
RANGE OF MOTION EXERCISES

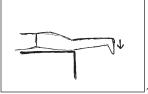
A. Try to make the knee go completely straight. The best way to do this is to lie down, place a towel roll under the ankle, tighten the muscle on the top of the thigh to try to push the back of the knee towards the floor, pushing on the top of the knee with your hands if needed.

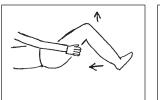
Another way to achieve this is to lie on your stomach on a table or bed and let your foot and leg hang over the



Another way is to sit in a chair with your foot resting on the ground, slide the foot toward the chair and use your good leg to assist the operated leg to bend at the knee.









Hamstring flexibility

At least once a day spend a few minutes stretching the hamstrings (the muscles at the back of the thigh). Warm up first, and hold the stretch for about 30 seconds each time; don't bounce. There are essentially three different techniques for stretching:

A. Sit with your legs almost completely straight and your toes pointing straight up. Bend forward from the hips until you feel the stretch. Do not dip your head down by bending at the neck, and do not bend forward at the low back-keep your back straight.

- B. Stand with your feet about shoulder-width apart and pointed straight ahead. Keep your knees slightly bent, so that the lower back is not over stressed. Slowly bend forward from the hips until you feel the stretch in the hamstrings.
- C. Place your heel on a table or other support at about waist height. The leg on the ground should have a slight bend in the knee. Slowly bend forward at the waist until you feel the hamstring stretch.









