



2 Science Court, Madison, WI 53711

900 Ridge Street, Stoughton, WI 53589.

Telephone: 608-231-3410 Fax: 608-231-3430

Post-Operative Instructions: Meniscectomy / Debridement

DIET

- Begin with clear liquids and light foods (Jell-O, soups, etc.)
- Progress to your normal diet if you are not nauseated

WOUND CARE

- Maintain your operative dressing, loosen bandage if swelling of the foot and ankle occurs
- It is normal for the knee to bleed and swell following surgery. If blood soaks onto the TED Stocking bandage, do not become alarmed, reinforce with additional dressings as needed
- Remove surgical dressing on the 2nd post-operative day if minimal drainage is present, apply band-aids or a clean dressing over incisions and change daily. To avoid infection, keep surgical incisions clean and dry – you may shower by placing a plastic covering over the surgical site beginning the day after surgery.
- Beginning 2nd post op day you may shower as long as the incisions are dry (without drainage).
 Do not scrub the incision sites and place new band-aids over the incision sites after showering.
- NO immersion in bath or pool until instructed by Dr. Rawal's office.

MEDICATIONS

Prescribed Narcotics:

- This medication may be taken as needed for pain as directed on the bottle.
- Do not drive or drink alcohol while taking this medication.

Acetaminophen (Tylenol):

- This medications may be taken as needed.
- Please use as directed on the bottle.
- Do not exceed 4,000 mg of Acetaminophen in a 24 hour period.

Blood thinner:

• Please take blood thinner as directed. Most patients are prescribed a daily Aspirin for four weeks after surgery. It is important to take as prescribed to help prevent blood clots.

Stool softener:

- We recommend picking up an over the counter stool softer such as MiraLax, as a common side effect of narcotic pain medication is constipation.
- It is normal to take several days to make a bowel movement after surgery.
- Drink plenty of clear liquids as the anesthesia can cause dehydration/constipation as well.

ACTIVITY

- Elevate the operative leg to chest level whenever possible to decrease swelling.
- Do not place pillows under knees (i.e. do not maintain knee in a flexed or bent position), but rather place pillows under the foot/ankle.
- Use crutches to assist with walking you are able to bear as much weight as tolerated on operative leg unless otherwise instructed.

Update: 02/05/2023



OrthoTeam Clinic Ashish M. Rawal, M.D.

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- Do not engage in activities which increase knee pain/swelling (prolonged periods of standing or walking) for the first 7-10 days following surgery.
- Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks.
- NO driving until instructed otherwise by physician
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable

ICE THERAPY

- Icing is very important in the initial post-operative period and should begin immediately after surgery.
- You may place an ice pack over your knee for 15-20 min every 1-2 hours.
- Icing should not be performed while sleeping.
 Place cloth in between skin and ice. Do not place ice packs directly against the skin as this can cause frost bite.

EXERCISE

- Begin exercises 24 hours after surgery (straight leg raises, quad sets, heel slides, and ankle pumps) unless otherwise instructed.
- Discomfort and knee stiffness is normal for a few days following surgery. It is safe to bend your knee in a non-weightbearing position when performing exercises unless otherwise instructed.
- Complete exercises 3-4 times daily until your first post-operative visit your motion goals are to have complete extension (straightening) and 90 degrees of flexion (bending) at your first postoperative appointment unless otherwise instructed.
- Perform ankle pumps continuously throughout the day to reduce the risk of developing a blood clot in your calf.
- Formal physical therapy (PT), if indicated, typically begins after your first post-operative appointment 7-10 days after the procedure. A prescription and protocol will be provided at your pre-operative visit.

PHYSICAL THERAPY

- Physical therapy should start a few days after your surgery.
- Your physical therapist should already have Dr. Rawal's protocol, but it is available on the OrthoTeam website if you would like to review it.

EMERGENCIES

Contact our office at (608) 231-3410, if any of the following are present:

- Painful swelling or numbness (note that some swelling and numbness is normal)
- Unrelenting pain
- Fever (over 101° it is normal to have a low grade fever for the first day or two following surgery) or chills
- Redness around incisions
- Color change in your foot
- Continuous drainage or bleeding from incision (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting
- Calf pain

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• If you have an emergency that requires immediate attention proceed to the nearest emergency room.

FOLLOW-UP CARE/QUESTIONS

- If you do not already have a post-operative appointment scheduled or if you need to change the appointment, please contact our scheduler at 608-231-3410 to schedule.
- Your first post-operative appointment will be scheduled with one of the Physician Assistants for a wound check, physical therapy protocol and to answer any further questions you have regarding the procedure
- Typically the first post-operative appointment is made for 10-14 days following surgery for suture removal if you have any sutures in place.

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