



OrthoTeam Clinic

Ashish M. Rawal, M.D.

2 Science Court, Madison, WI 53711

900 Ridge Street, Stoughton, WI 53589.

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

Post-Operative Instructions: Meniscus All Inside Repair

DIET

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

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.

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 ACE bandage, do not become alarmed, reinforce with additional dressing
- Remove surgical dressing on the 3rd post-operative day – if minimal drainage is present, apply band-aids or a clean dressing over incisions and change daily. You may then shave as long as the wounds remain sealed with the band-aid.
- To avoid infection, keep surgical incisions clean and dry – you may shower by placing a large plastic bag over your brace beginning the day after surgery. NO immersion of the operative leg (ie: bath or pool).
- At **2 days post operatively** you can begin to get the incision wet in the shower (water and soap lightly run over the incision and pat dry). NO immersion in a bath until given approval by our office.

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.

Updated: 02/05/2023



OrthoTeam Clinic

Ashish M. Rawal, M.D.

2 Science Court, Madison, WI 53711

900 Ridge Street, Stoughton, WI 53589.

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

- Use crutches to assist with walking. Following meniscus repair the patient is **touch down weight bearing with crutches for 4-6 weeks.**
- 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

BRACE

- Your brace should be worn fully extended (straight) at all times (day and night – except for exercises) until otherwise instructed after the first post-operative visit.
- Remove brace for flexion (bending) and other exercises done in a non-weight bearing position (i.e. lying or sitting).

ICE THERAPY

- Icing is very important in the initial post-operative period and should begin immediately after surgery.
- You may use the ice machine for 2 hours on, then remove for two hours during the day until your first post-operative visit. Care should be taken with icing to avoid frostbite to the skin. **DO NOT PLACE ICE PACK / PAD DIRECTLY ON SKIN.**
- Icing should not be performed while sleeping.

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 up to 90 degrees of flexion (bending) at your first post-operative 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) typically begins following your first post-operative clinic appointment. A prescription and protocol will be provided at your first post-op visit.

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



Excellence in Orthopedics

OrthoTeam Clinic

Ashish M. Rawal, M.D.

2 Science Court, Madison, WI 53711

900 Ridge Street, Stoughton, WI 53589.

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

- Excessive nausea/vomiting
- Calf pain
- 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.