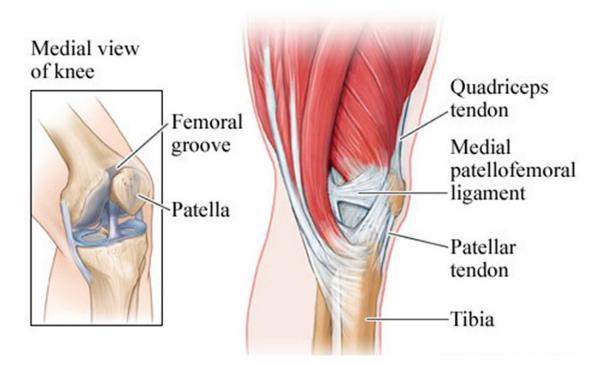


POST-OPERATIVE INSTRUCTIONS FOR A MEDIAL PATELLOFEMORAL LIGAMENT RECONSTRUCTION



The following is an outline of instructions and information for post-operative Medial Patellofemoral Ligament (MPFL) reconstruction. Please follow these instructions specifically and if you have any questions, contact the Surgeon.

Dressing Care

Keep your dressing clean and dry. All Ace wrap should be kept on for the first 48 hours. Once 48 hours has passed you may take these bandages off down to the steri-strips (little white strips overlying incisions) and shower. The steri-strips can get wet, use a clean towel to pat dry. Steri-strips will typically peel on their own after 10-14 days let them do this on their own- try not to pick at them! Do not place ointments such as Neosporin, etc. onto wounds!



Brace

You will come out of the OR with a brace on. You are to wear this brace at all times and only take it off to shower. A shower chair will be prescribed for you during this time as you are at a high fall risk. This brace will be locked with limited range of motion from 0-90 degrees. Plan to have this brace for 3 weeks.

Bathing

No showering for first 48 hours. You may shower with steri-strips over the incisions 48 hours after surgery. Do not soak in water such as a bathtub, hot tub or swimming pool for 4 weeks.

Pain and Swelling

It is normal to have pain and swelling in your knee after surgery. The swelling may last up to 4-6 months, and the pain is variable. Acute pain, however, usually is relieved after the first three to seven days after surgery. It is normal to even see some bruising up to your thigh or down to your calf and ankle. Take your oral pain medication as directed for pain. If you have severe pain and swelling or redness in your calf that persists, you should contact the Surgeon.

How to Minimize Swelling;

Make certain your ace bandage is not too tight. If it is, you may loosen it.

- 1. Use the cryo knee cuff over your brace for the first several weeks (usually 20 to 30 minutes on and 20 minutes off). Do this at least every two hours for the first 2 weeks. Do not place the ice bag directly on the skin, make certain there is a towel or bandage between the ice and your knee.
- 2. Elevate your leg so it is above the level of your heart (i.e. if you are sitting, prop your ankle up on several pillows).

Activity/Weight Bearing

You may bear weight as tolerated on the operative leg with the brace on. You may need crutches for the first week or two. When sitting, you should keep your leg elevated and out straight. Try to refrain from using a pillow under the knee. You can use your knee cryocuff and use as often as 5 times daily for 20 minutes at a time. Make sure there is always a barrier between the cryocuff and your skin (ie. Hand towel). You may walk as much as you are comfortable. Outpatient physical therapy will begin 2 weeks following surgery.



Physical Therapy

Physical therapy referral will be given to you at your first post op appointment at 2 weeks.

Medications Pain:
Oxycodone 5 mg, 1 tablet every 4-6 hours for pain as needed
 Naproxen 500 mg, 1 tablet every 12 hours for pain and swelling. Take with food. Over the counter acetaminophen
Other:
Aspirin 81 mg, 1 tablet q 12 hours for DVT/PE prophylaxis for 4 weeks

Do not put any ointments on incision sites, waterproof bandages only.

Warnings

Notify the Surgeon immediately if any of the following occur:

- Excessive bleeding
- Excessive non-bloody wound drainage beyond the first three to four days
- Poor pain control
- Fever greater than 101.5 degrees Fahrenheit after post-operative day three
- Increased redness along incision
- Calf pain or swelling

Follow-up with the Surgeon

As Scheduled in 2 week(s) Date of follow up appointment: ____/___/ Please call to schedule your post- op appointment if not already scheduled or if you have any questions or concerns. After 5 p.m. or on weekends you will forwarded to our on-call physician.