Prior to surgery:

Medications: Please fill your prescription medications prior to your surgery. Both narcotic and non-narcotic medications will be e-prescribed to your pharmacy. Check your After Visit Summary (AVS) for the location of your e-prescribed prescriptions.

Temporary Handicap placard: If you received a DMV form at your pre-operative visit, take this form to the DMV to receive your temporary placard. Do not mail it in as it takes a few weeks to process.

Physical Therapy: Contact a physical therapist as soon as possible to get an appointment scheduled. **You want to begin physical therapy approximately 7-10 days following your surgery.** You will receive a physical therapy prescription at your pre-operative visit or at your first post-operative visit.

Anti-bacterial body wash: Please use an anti-bacterial soap in place of your normal body wash during your last shower- either the night before or the morning of your surgery. We recommend Hibiclens or anti-bacterial Dial soap. Wash your **ENTIRE** body with the soap and rinse off. Do not use on your face, hair, or genital area as it may cause dry skin.

Food/Water: Do not eat any food or drink any fluids, including water, after 12am the night prior to your surgery. Patients who do not follow this may experience a delayed or even cancelled surgery.

Attire: Wear loose comfortable clothing to the surgery center. We recommend loose sweats, athletic pants, or shorts that can easily slide over your leg and brace.

Bathing Chair: When you are cleared to shower, we recommend you shower while seated on a stool or lawn chair. This helps decrease the risk of falling when in the bathtub/shower. Insurance will not cover the purchase of a shower chair.

MyChart: If you have not already signed up for UCSF MyChart, please refer to the back of your After Visit Summary (AVS) to register. This is an online portal that will enable you to access some of your medical records, request prescription refills, check appointment times and <u>most importantly it allows you to send and receive messages from your treating physician or surgeon</u>

On day of surgery:

Ice: Use bag of ice, ice pack, frozen peas or cold therapy unit. Place over bandaged leg for 20 minutes every 1-2 hours to decrease pain and inflammation.

Pain Medication: When you are discharged from the surgery center, return home, eat a light meal and begin taking the pain medication as prescribed. Do not wait until you experience pain to start taking the medications as it takes 30-45 minutes to work. The first 2-3 days are usually the most painful, so continue with the medications as prescribed, but as pain decreases you can decrease the narcotic medication as tolerated. Avoid taking Tylenol while you are taking the narcotic medication as they both contain acetaminophen, which can be dangerous in high amounts.



Eating: Eat bland or liquid foods following surgery. The narcotic medication and/or the anesthesia medications may cause nausea or vomiting. Progress to your normal diet slowly over the 24 hours following surgery. Take narcotic and anti-inflammatory medications with food whenever possible.

Leg elevation: It is normal to experience swelling in the knee and lower leg after surgery. To decrease this, keep your leg elevated above the level of your heart as much as possible. Avoid placing a pillow behind the back of your knee as this may cause stiffness and difficulty getting your knee to straighten. Place pillows or cushions under your heel instead. This is similar to the Knee Extension Bridging Exercise which is one of your post-operative exercises.

Post-op Day 1 and until 1st Post-op visit:

Surgical Dressing: Remove the dressings as instructed by your surgeon. If you have any concerns about dressing removal, keep the dressing on the surgical site until your first post-operative visit – usually about 5-9 days after your surgery. Do not put any ointment on your incision as this may increase the risk of post-operative infection.

Bathing: You may sponge bath following surgery. You can also shower with a plastic garbage bag/tape around the brace and your leg, but you must keep the dressing absolutely dry as this may cause post-operative infection. You may shower normally after the dressings are removed. Do not use a hot tub, swim in a pool or the ocean until instructed by your surgeon.

Crutches: To protect your cartilage repair you will be on crutches and **NON-WEIGHT-BEARING** with the brace for approximately 6 weeks. If you are uncomfortable ambulating up or down stairs, go up or down on your rear end.

Brace: You will be placed in a hinged knee brace. Keep the brace on until your first post op visit after which you will receive further instruction. Generally, you will use the brace for a total of 6 weeks. Keep the brace locked in extension **EXCEPT** when performing your post-operative/rehab exercises. You must also wear the brace locked in extension when you sleep.

CPM: You may receive a Continuous Passive Motion (CPM) device for knee range of motion. Use it 6 hours per day for up to 6 weeks.

Driving: Do not drive until instructed to do so by your surgeon and you have discontinued the narcotic pain medication. You will not be cleared to drive for at least 6 weeks if you are having surgery on your right leg. Driving remains at your own risk.

Post-Operative Exercises: Begin the post-operative exercises the day after surgery. Perform them at least 3 times per day and continue until you start physical therapy. Visit sportsrehab.ucsf.edu to review videos of these exercises.

Please call the office if you have any of the following:

Fever greater than 101.5°F or 38.5°C Continuing drainage from the wound/dressing Unrelenting pain Excessive nausea/vomiting due to pain medication Any other worrisome conditions



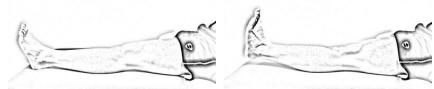
Post-Operative Exercises: Start the day after surgery

Perform these exercises 3 times per day with the brace on:

- Quad Sets. Tighten your quad muscles and hold for 5 seconds. Perform 3 sets of 10 repetitions. When you tighten your quad muscles, it will feel like your knee is being pushed into the ground and straightening. Make sure you do this with your brace lockedin-extension.
- 2. **Straight Leg Raises**. Tighten your quad muscle like in exercise 1, then lift your leg about 24 inches off the ground and hold it for 5 seconds then lower. Perform 3 sets of 10 repetitions.

Make sure you do this with your brace locked-in-extension.

- 3. Heel Slides. (bending the knee) *Keep the brace* on during this exercise! Unlock the brace and slide your heel toward your buttock and hold for 5 sec, then straighten out. This may be assisted by using a towel to pull your foot. Perform 3 sets of 10 repetitions. Do not bend the knee beyond 90 degrees.
- Knee Extension Bridging Exercise. Roll a towel/pillow and place it under your heel with nothing under your knee/thigh. Hold this position for 5 to 10 minutes. Gravity will slowly assist with extending your knee. Alternatively, you can sit in a chair and place your foot up on another chair/ottoman.
- 5. **Calf Pumps**. Move both ankles up and down, Perform 10 repetitions every 1-2 hours until you are up and moving around regularly. This encourages blood flow in the lower legs and helps reduce the risk of blood clots (DVT).



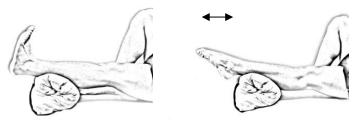












6. CPM: A CPM (continuous passive motion) device may be ordered by your surgeon. This machine helps improve range of motion and encourage cartilage healing. Use this machine at least 6 hours per day. You can divide it up into 3 sessions of 2 hours but try to obtain at least 6 hours per day. You can also try using it at night when you sleep. Start at 0-30 degrees, and increase it 5 degrees every 12 hours as tolerated. Unlock the brace to use the CPM device, but do not remove the brace.

