

for orthopedics Lisa Kaplin, DO

ARTHROSCOPIC LYSIS OF ADHESIONS, MANIPULATION UNDER ANESTHESIA REHAB

Diet:

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

Wound Care:

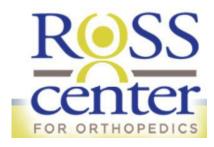
- Maintain your operative dressing, loosen bandages if swelling of the foot or ankle occurs.
- It is normal for your knee to bleed and swell from your surgery- if blood soaks onto your ACE bandage, do not become alarmed reinforce with additional dressing.
- Remove your surgical dressing on the 3 rd post-operative day- if minimal drainage is present, apply bandaids or clean dressing over the incisions and change daily you may then shave as-long-as the +
- To avoid infection, keep your incision clean and dry you may shower after transitioning to water-proof bandages– NO immersion of the operative leg in water (i.e. bath)

Medications:

- Primary Medications:
- 1. Oxycodone 5mg, to take every 4-6 hours as needed for pain. It is important to not have pain so that you can do your physical therapy exercises and get your knee moving as quickly as possible. Pain control is important!!!
- 2. Tylenol 1000mg take every 8 hours, scheduled, AROUND THE CLOCK!
- If you are having a problem with nausea and vomiting please take one of your anti-nausea medications
- Zofran. If still having issues please call our office for a possible medication change.

Activity:

- Elevate the operative leg to chest level whenever possible to decrease swelling.
- Do not place pillows under knees (ie do not maintain a knee in a flexed or bent position), but rather place pillows under foot/ankle.
- Use crutches to assist walking You can weight bear as tolerated.
- Do not engage in activities which increase knee pain and swelling (prolonged standing or walking) over the first 7-10 days after your surgery.
- Avoid long periods of sitting (without your leg elevated) or long distance traveling for 2 weeks.
- May return to sedentary work ONLY or school in 3-4 days after surgery, if pain is tolerable.
- Goals: full extension (Straightening) to as many degrees of flexion (bending) as you can get (>100) at your first post-operative appointment



orthopedics Lisa Kaplin, DO

Ice Therapy:

- Begin immediately after surgery
- Use Ice every 2 hours for 20 minutes daily until your first post-operative visit remember to keep leg elevated to the level of the chest when icing.

Exercise:

- Begin exercises the day of your surgery (straight leg raise, towel exercises, heel slides, ankle pumps) unless otherwise instructed by Dr. Kaplin.
- Discomfort and knee stiffness is normal for a few days after surgery it is safe and, in fact, preferable to bend your knee (unless otherwise instructed by Dr. Kaplin.)
- Complete exercises 3-4 times daily until your first post-operative appointment- your goals are to have full extension (straightening) and 90 + degrees of flexion (bend) by your first post-op appointment unless otherwise instructed by Dr. Kaplin.
- Do ankle pumps continuously throughout the day to reduce the possibility of a blood clot in your calf (extremely uncommon)
- Formal physical therapy (PT) should begin by the day after your surgery.

Emergencies:

- Contact Dr. Kaplin if any are present:
 - o Painful swelling or numbness
 - o Unrelenting pain o Fever (>101) or chills. It is normal to have a low-grade fever after surgery.
 - o Redness around the incision
 - o Color change in toes or feet
 - o Continuous draining/bleeding from the incision (small amounts are completely normal)
 - o Difficulty Breathing
 - o Excessive nausea.
- ***If you have an emergency please contact Dr. Kaplin before going to a hospital or emergency room. Follow-up Care/Questions:
- Please contact Dr Kaplin's medical assistant or Dr Kaplin at (609) 267-2333. If you do not already have a post-operative appointment, please call and schedule by calling (609) 267-2333 and ask for appointment scheduling.