



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 3rd 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 wound remains sealed with a band-aid.
- 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



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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 215-745-4050. If you do not already have a post-operative appointment, please call and schedule by calling 215-745-4050 and ask for appointment scheduling.