

**Brian B. Gilmer, MD** US Ski Team, Team Physician Swift Institute Physician Phone: 775-507-4668

# POST-OPERATIVE INSTRUCTIONS: Patellofemoral Joint Arthroplasty

## ACTIVITY

- Crutches, cane or a walker may help you balance for the first few days; however, you may put as much weight as comfortable on your leg.
- You may bend and straighten your knee as much as you like.
- Do not engage in prolonged periods of standing or walking over the first 7-10 days following surgery.
- Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks.

## **DRESSINGS & INCISIONS**

- The first two days after surgery you can expect a small amount of red-tinged drainage on your dressings. This is normal.
- Please keep the dressing clean and dry; if you are going to shower/bathe, you must protect the dressing. You may not soak in a pool, lake, hot tub, or the ocean until a week after the staples have been removed.
- <u>DAY 7</u> Remove large adhesive dressing, gently peel the dressing down and expose your incision. Replace with the Aquacel dressing in your discharge envelope.
- <u>DAY 14-</u> Remove the TED hose. Remove large adhesive dressing, gently peel the dressing down and expose your incision.
- The incision can now be exposed to air until your first post op, you can shower normally but continue to refrain from soaking.
- Do not apply any lotions, creams, ointments or bacitracin to your incision.

## PAIN & INFLAMMATION

- Ice- Apply ice wrapped in a towel several times per day for 20 minutes for the first week and then as needed for pain relief and inflammation.
- **Compression-** Use the ace wrap to decrease swelling. Wrap from the foot towards your thigh. If provided, you should wear the white stocking for at least 5-7 days after surgery to decrease swelling and prevent blood clots.
- Elevation- Keep your foot elevated above your heart as much as possible for the first 3 to 4 days. Keep your leg elevated with a pillow under your calf or foot, NOT under the knee.
- Pain medication-
  - You have been given a narcotic prescription for pain control; please take as directed.
    - If you think you will require a refill on your medication, you **MUST** do so during our regular **weekday** office hours.
    - If you need additional pain medication you may take Tylenol 500 650 mg every 6 hours. Do not take more than 3000 mg in a 24-hour period!
    - Common side effects of the pain medication are:
      - NAUSEA: To decrease nausea, take these medications with food.
      - DROWSINESS: Do not drive a car or operate machinery.
      - ITCHING: You may take Benadryl to alleviate any itching.
        - CONSTIPATION: To decrease constipation, use stool over-the-counter softeners remedies (Mineral Oil, Milk of Magnesia, etc). Also avoid bananas, rice, apples, toast, or yogurt...as these foods can make you constipated. Getting up and



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moving around also helps with constipation and "waking up" your intestinal tract.

Anti-inflammatory medications (Aleve, Ibuprofen, Naproxen, etc.) should **not** be taken after surgery until cleared by Dr. Gilmer.

## **EMERGENCIES**

- You must have someone stay with you for the first 48 hours after surgery
- Please call the clinic if:
  - Drainage soaks the dressings, expands, is foul-smelling, or your incisions are red, warm, and extremely painful
  - You develop a fever (>101.5°) or chills
  - You experience leg or calf pain, leg swelling, or difficulty breathing

#### **FOLLOW-UP CARE**

- Please schedule a follow-up visit for suture removal and to review your surgery 10-14 days postoperatively if not already scheduled.
- You should be scheduled to see your physical therapist in approximately 3-5 days after surgery.

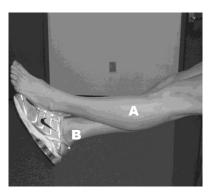
**EXERCISES** – When you are comfortable and ready you may perform each exercise 2-3 times a day; it may help to take pain medication 20-30 minutes prior to the exercises and to apply ice after the exercises

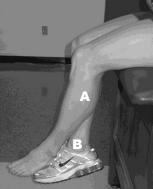
#### Flexion:

- 1. Sit in a chair and remove or unlock your brace
- 2. Place your unoperated leg (B) under the foot of your operated leg (A)
- 3. Gently allow the knee to bend by doing ALL work with the unoperated leg (B)
- 4. When you reach your maximum bend, hold for 5 seconds
- 5. Use the unoperated leg (B) to straighten the knee DO NOT ATTEMPT TO STRAIGHTEN YOUR LEG USING YOUR THIGH MUSCLES!
- 6. Perform 10-20 times in a row
- Goal = 90° of flexion (bending) by 2 weeks after surgery

#### **Quadriceps Contractions:**

- 1. Sit or lie on the floor with your operated leg straight
- 2. Place a towel roll under the knee
- 3. Tighten your thigh and hamstring muscles, causing you to press your knee downward into the towel roll
- 4. Hold this position for 10 seconds
- 5. Relax your thigh and hamstring muscles







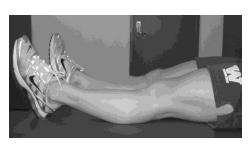
Perform 2-3 sets of 10

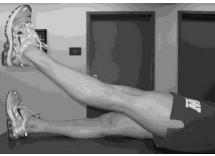
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## Straight Leg Raises:

- 1. Lie on the floor with your **brace on and locked**
- 2. Perform a quadriceps contraction (as stated in the above exercise)
- 3. Raise your foot about 6-12" off the floor
- 4. Slowly lower your leg back to the floor
- 5. Relax your thigh muscle

Perform 2-3 sets of 10





#### Ankle Pumps:

- 1. Point toes downward and hold for 5 seconds
- 2. Point toes upward and hold for 5 seconds

Perform 2-3 sets of 10

