Cedars Sinai
Kerlan-Jobe Institute

# Isolated Meniscus Repair/Knee Arthroscopy with ALL Reconstruction/Knee Arthroscopy with Bone Dowels: 1st Post-Op Visit

Medication

- Make sure they are effective and not causing problems.
- **Toradol (Ketorolac)** for pain and inflammation. Starting the first day after surgery, take one tablet every 8 hours. This medication should be taken ONLY for the first two days. If you have had any problems, allergies or stomach intolerance stop taking these medicines and please tell us!
- **Mobic (Meloxicam) 15 mg**: Take one tablet by mouth daily for 14 days starting the day after surgery (Post-op Day 1 to Day 14). Mobic is an anti-inflammatory medication of the COX-2 family (NSAID) so please DO NOT TAKE ANY ADDITIONAL ANTI-INFLAMMATORIES such as Advil, Aleve, Motrin, etc. (Cox-1 family).
- **Tylenol 500 mg:** Extra strength Tylenol. Use as need for pain. Do NOT exceed more than 3000 mg in a 24-hour period.
- **Tramadol 50 mg:** This is pain medication. Use as need for breakthrough pain (if pain not managed by Tylenol)
- Directions: Take 1-2 tablets every 6 hours as needed for moderate-severe pain. Take no more than 8 pills a day.
- **Aspirin (Ecotrin) 325 mg:** After one week, start taking 1 tablet of aspirin daily for 14 days. Aspirin (or its substitute) is an anticoagulant and will help prevent blood clots.
- **Keflex (Cephalexin):** Starting the first day after surgery, this is an antibiotic to be taken as a preventative medicine once every 8 hours for 3 days. **If you have a penicillin allergy this will be replaced by other options.**
- **Mupirocin Ointment:** continue to apply 2x/day with a Q-tip to nasal cavities for 2 more days after your surgery.
- If you have had any problems, allergies, or stomach intolerance stop taking these medications and please tell us.
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Wound Care

- Today we will re-dress the incisions with gauze and an ACE bandage for the first week. If you continue to bleed you will need to change the gauze from this dressing, otherwise leave the dressings on without changing.
- The white stocking will stay on for 2 weeks.
- **Please keep the incisions as dry as possible**. To shower, you will need to cover the gauze and ACE wrap with a plastic bag so that the incisions do not get wet. We will waterproof your incisions after we remove your sutures.

Icing Protocol

- Continue to ice your knee every hour using the **ice machine** and/or **"blue packs"** to minimize swelling and pain.
- When icing, make sure there is one layer of cloth between your skin and the ice pack, for example, unwrap your ACE bandage until there is just one layer on your knee and ice on top of that.

Exercises and Physical Therapy

- Continue the **straight leg raises** 4x/day.
- Start "Yoga stretch" for hamstrings: reach for surgical side toes and breathe.
- You may be prescribed a Continuous Passive Motion Machine (CPM) but this is on a case-by-case basis.
- You may begin physical therapy 6 weeks after surgery.
- You may begin swimming (flutter kick only) at 3 weeks with brace on.
- In most cases you will start the Pedlar and/or biking progressions at or by 6 weeks
- Between weeks 3 and 6 the focus should be on range of motion and minimizing swelling

Walking

- The hinged knee brace must stay on and will be locked at 0° for the first three weeks. At three weeks, you may remove your brace while lying down or on the couch.
- After the first three weeks, range of motion (ROM) will gradually increase as tolerated to 90° in the brace.
- Make sure you use crutches for 3 weeks on a partial weight-bearing (PWB) status.

Before You Leave

- Schedule your next post-op visit in 7-10 days for suture removal.
- The third post op visit will be at 3 weeks from your surgery date, and the fourth will be at 6 weeks.
- Make sure you have all of the necessary notes and documentation for school and/or work.

**Remember, our goal is to make this process smooth and easy. If there is anything you need, please ask us, message us on GetWell Loop, or call (424) 314-5040**
**Bert R. Mandelbaum MD**