



Meniscal Repair

Overview

This is a protocol that provides you with general information and guidelines for the initial stage and progression of rehabilitation according to the listed timeframes. Specific changes may be made depending on your surgery.

Questions

If you have any concerns or questions after your surgery, during business hours call **763-302-2231**. You may need to leave a message.

After hours 763-520-7870

Address

Maple Grove

9825 Hospital Drive, Suite 104

Maple Grove, MN 55369

Minnetonka

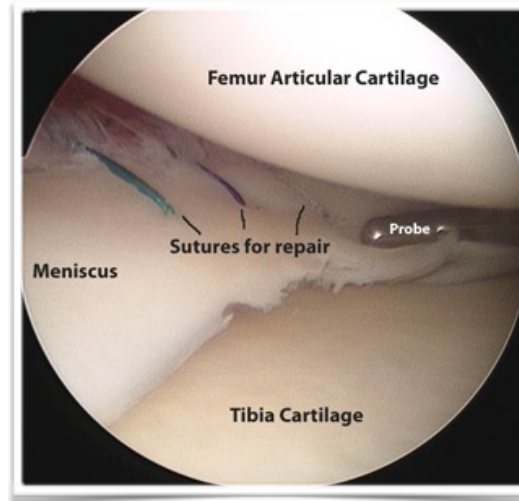
15450 Highway 7, Suite 100

Minnetonka, MN 55345

Robbinsdale

3366 Oakdale Ave. N Suite 103

Robbinsdale, MN 55422



POST OPERATIVE INSTRUCTIONS

DIET

- Begin with clear liquids and light foot (jello, soup, etc.)
- Progress to your normal diet as tolerated

WOUND CARE

- Leave operative dressing in place for 2-3 days. Loosen ACE wrap if swelling in foot/ankle occurs.
- Remove surgical dressings 2-3 days after your surgery. If minimal drainage is present, apply band-aids over incisions and change daily
- Swelling and bleeding after surgery is normal. If ACE wrap becomes saturated with blood, reinforce with additional dressing
- Keep your incisions clean and dry until you're seen back in clinic.
- You may shower as needed after surgery, but cover incisions with plastic bag to keep them dry. No immersion in water, i.e. bath.



More information

DVT prophylaxis

- DVT risk factors: smoking, obesity, pregnancy, oral contraceptive use, prolonged sitting and surgery
- To reduce this risk we recommend taking 325 mg Aspirin daily, if 18 yrs or older.
- Self care measures include: stop smoking, avoid sitting for long periods, and WALK.
- Signs of a blood clot include: Shortness of breath, chest pain/pressure, leg pain, swelling, warmth and redness

Pain medications

- We do NOT refill medications after 2:00 pm Fridays, or over the weekends. Call in advance.

Driving

- Do not drive or operate machinery while taking narcotic pain medications. No driving until instructed by your surgeon.

MEDICATIONS

- Local pain medications were used at the time of surgery. This will wear off in 8-12 hours. If a local “block” medication was given, this could last longer.
- Most patients will require narcotic pain medications for short period of time following surgery. Take per MD request.
- If pain meds are causing nausea and vomiting, contact the office (763-520-7870)
- Do not operate or drive machinery while taking narcotic meds.
- Ibuprofen can be taken between narcotic medication doses to help alleviate pain.

ACTIVITY

- Crutches and knee immobilizer are needed after surgery
- Elevate the operative leg above your chest whenever possible to reduce swelling.
- Do NOT place pillows behind your knee, but rather under your foot/ankle. This will maintain good extension of your knee.
- Do not engage in activities that increase pain/swelling in your knee such as prolonged standing, walking, sitting without leg elevated.
- No driving until instructed by surgeon

BRACE

- Knee immobilizer is typically used after surgery

ICE THERAPY

- Begin immediately after surgery
- Ice machines can be used continuously, or ice packs every 2 hours for 20 minutes daily until post-op appointment. See page 5 for more information.

POST OP APPOINTMENTS

First post op visit (7-10 days)

Your first post-op appointment is about 7-10 days from surgery. You will see the PA to review your surgery and have the sutures removed. Please bring your operative pictures with you to this appointment to enhance your understanding of your surgery.

Physical Therapy

These exercises should be started the 1-2 days after surgery. These will be all the required exercises until you are seen by your physical therapist in the office. It is important to begin working on range of motion right after surgery as this will help in your overall recovery.

HOME EXERCISES



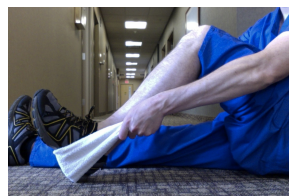
ANKLE PUMPS

3 sets of 15, 3-6 times per day
MOVE YOUR FOOT UP AND DOWN



HEAL SLIDES

3 sets of 10, 3-6 times per day ***NO FLEXION PAST 90 DEGREES ***
FLEX YOUR HIP AND KNEE. RETURN TO STRAIGHT POSITION.



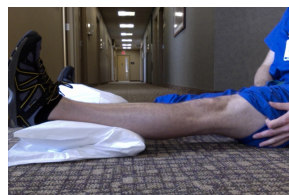
KNEE FLEXION STRETCH

3 sets of 10, 3-6 times per day ***NO FLEXION PAST 90 DEGREES ***
PLACE TOWEL UNDER HEAL. PULL KNEE TOWARDS CHEST. HOLD FLEXED KNEE FOR 15-20 SECONDS. RETURN TO STRAIGHT POSITION.



KNEE EXTENSION

3 sets of 10, 3-6 times per day
PLACE TOWEL ROLL OR PILLOW UNDER KNEE. LIFT FOOT OFF FLOOR.



QUADRICEPS SETS

3 sets of 10, 3-6 times per day
PLACE TOWEL ROLL OR PILLOW UNDER HEAL. TIGHTEN THIGH MUSCLE AND HOLD FOR 5 SECONDS.



LEG LIFTS

3 sets of 10, 3-6 times per day
RAISE LEG OFF THE FLOOR 6 INCHES, KEEPING THE KNEE STRAIGHT.

REHAB PROTOCOL

	WEIGHT BEARING	BRACE	ROM	EXERCISES
PHASE I (0-2 WEEKS)	Full with knee immobilizer (KI) and crutches	Knee immobilizer on with all activities and sleeping Off for exercises and hygiene	0-90 degrees with no weight bearing. NO WEIGHT BEARING PAST 90 DEGREES	SEE PAGE 3 NO WEIGHT BEARING PAST 90 DEGREES
PHASE II (2-6 WEEKS)	2-4 WEEKS: Full with KI 4-6 WEEKS: Full without KI	2-6 WEEKS: Off at night Discontinue KI at 4 weeks	As tolerated	Begin with PT starting at 4 weeks or per MD request.
PHASE III (6-12 WEEKS)	Full	None	Full	Progress with PT.
PHASE IV (12-20 WEEKS)	Full	None	Full	Progress with PT. Running/jumping after cleared by MD.

** Avoid any leg rotation for 8 weeks to protect meniscus repair

*** Weight bearing status may vary depending on nature of meniscus repair. Please refer to PT Rx for confirmation.

ICE MACHINES



GAME READY



CRYOCUFF



POLAR ICE

Patients are not required to purchase any of these devices. They are only offered as a supplemental modality to help with pain control. Patients may use ice packs from home or any other cold therapy device available to them. Dr. Arthur does not have any affiliation to these medical equipment companies.

BENEFITS

- Portable ice machines
- Reduces pain and swelling
- Gives constant cold therapy

PRICE

- Call for prices

CONTACT

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Ottobock Medical

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