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Medial Patellofemoral Ligament (MPFL) Reconstruction Postoperative Instructions

ACTIVITY

- Rest for the first few days following surgery. When sitting or lying down be sure to keep you leg elevated above the level of your heart to help decrease swelling.
- Utilize ice as much as possible for the first 3-4 weeks to help decrease swelling (15-20 minutes at a time 3-4 times daily)
- **Crutches are recommended** for the first week to help provide support and aid in ambulation. You may weight bare as tolerated on the operative leg.
- You will be placed in a **hinged knee brace**. You will likely have to wear this for the first 4-6 weeks following surgery. The brace will need to be locked (straight) in extension when you are standing or walking. It should be **worn at all times** (including sleeping at night) except for hygiene. You may also remove your brace several times a day while seated or lying down to work on ROM (begin to bend and straighten your knee).
- Return to work or school is permitted 3-4 days following surgery if pain is tolerable. Return to lifting/heavy labor or excessive ambulatory activities will be determined by Dr. Busse.

DRESSINGS

- Remove the outer dressing and gauze wrap **2-3 days following surgery**. You may shower at that time. Let the warm soapy water run over the incisions, but do not vigorously scrub over any of the incision sites as they are still healing. You may place band-aids over the incision sites after you remove the dressing if you prefer them covered.
- **DO NOT bathe, hottub, soak, or submerge the incision** in water for at least 4 weeks as this can increase the risk of infection.
- Small amounts of bloody drainage, numbness at the incision site, knee swelling, and bruising are normal findings following surgery.
- **DO NOT apply** bacitracin or any ointments to the incision for at least 4 weeks following surgery.

MEDICATION

- You will be prescribed **oxycodone** for pain medication. You may take 1-2 tabs every 4-6 hours as needed for pain.

- In addition to narcotic pain medication, it is advised that you take scheduled **NSAID (non-steroidal anti-inflammatory) and Tylenol (acetaminophen)**. Alternate the two medications for the first 5 days following surgery. As your pain gradually improves you will wean off the narcotic pain medication and take NSAID/Tylenol on an as needed basis.
 - Tylenol (acetaminophen) – take no more than 4,000 mg in a 24 hour period. Do not take if you have liver disease.
 - Ibuprofen (Advil) – take no more than 2,400 mg in a 24 hour period. Do not take if you have kidney disease, history of ulcers, history of GI bleed, or are currently taking a blood thinner.
- You may be given a prescription for **Aspirin 325 mg** which you should take daily with food to decrease risk of postoperative blood clot formation.
- You will also be given a prescription for **Senokot** to take 1-2 tabs daily as needed for constipation. If you find that you are still constipated despite the medication, there are other over the counter medications that you can try: Miralax, Fleet enema, or bisacodyl suppository.
- If you have any side effects (ie. Nausea, rash, difficulty breathing) from a medication discontinue use and call our office.

FOLLOW UP

- You likely have already been scheduled for your first postoperative visit. If you have not received any appointment **please contact the office to schedule an appointment for 10-14 days after you surgery.**
- You will be seen by Dr. Busse's Physician Assistant- Ashley Roerig. Sutures will be removed at that time if necessary. In addition, you will be able to ask any questions that you may have.
- Call the office immediately if you develop a fever (>101.4), chills, excessive incision drainage, calf pain, or persisting leg numbness.

PHYSICAL THERAPY

- If you have not already scheduled your physical therapy appointments, please call 952-808-3000 to schedule. Make your first PT appointment **within 7-10 days following surgery.**
- Frequency of PT: 1-2 x per week. Brace will be locked in extension while standing or walking for the first 4 weeks following surgery. Goal of PT: **Week 1** ROM 0-45 degrees of flexion. **Week 2** ROM 0-90 degrees of flexion. **Weeks 2-4** advance to ROM of the knee as tolerated. After 4 weeks may begin strengthening under direction of physical therapy. Return to sport likely around 12 weeks.