

Post-Operative Instructions Knee Arthroscopy

Day of surgery

- **A.** Diet as tolerated
- **B.** Icing is important for the first 5-7 days post-op. While the post-op dressing is in place, icing should be done continuously. Once the dressing is removed on the first or second day, ice is applied for 20-minute periods 3-4 times per day. Care must be taken with icing to avoid frostbite.
- **C.** Pain medication as needed every 4-6 hours (refer to pain medication sheet).
- **D.** Make sure you have a physical therapy post-op appointment scheduled during the first week after surgery.

First Post-Operative Day

- **A.** Continue ice pack every 1-2 hours while awake
- **B.** Pain medication as needed.

Second Post-Operative Day Until Return Visit

- **A.** Continue ice pack as needed.
- **B.** Unless otherwise noted, you can bear as much weight on the affected leg as you can tolerate. Most patients use crutches or a cane for the first 1-3 days. The amount of pain you experience should be your guide for discontinuing crutch or cane use.
- **C.** If there is no brace on your leg, you may bend the knee as tolerated.
- **D.** If you have a brace or a splint on your leg, this must be worn for all walking activities. The brace may be removed for showering. It may also be removed for short periods of time while relaxing (while watching television, reading, etc.) as long as the leg is well supported.
- **E.** Call our office to confirm your first postoperative visit, which is usually about 1-2 weeks after surgery. If you are experiencing any problems, please call our office.
- **F.** You may remove surgical bandage and shower this evening. Remove everything down to your incisions. Wash gently with soap and water and then pat dry with clean towel. Do not scrub incisions. Do not submerge in water (no baths or pools). Apply regular band-aids to these wounds prior when showering is complete. You will need to follow this routine for 2 weeks after surgery.



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Rehabilitation Protocol: Knee Arthroscopy

| Name: | Date: |
|--|---------------------------------------|
| Diagnosis: | Date of Surgery: |
| | |
| Phase I (Weeks 0-2) • Weightbearing: As tolerated with crutches (for balanter) • Range of Motion – AAROM → AROM as tolerated | nce) x 24-48 hours – progress to WBAT |
| Goal: Immediate full range of motion | |
| Therapeutic Exercises Overdead Managemin Costs | |
| Quad and Hamstring setsHeel slides | |
| o Co-contractions | |
| Isometric adduction and abduction exercisesStraight-leg raises | |
| Patellar mobilization | |
| Phase II (Weeks 2-4) | |
| • Weightbearing: As tolerated | |
| Range of Motion – maintain full ROM – gentle passiv Therapeutic Exercises | e stretching at end ranges |
| Quadriceps and Hamstring strengthening | |
| o Lunges | |
| o Wall-sits | |
| o Balance exercises – Core work | |
| Phase III (Weeks 4-6) | |
| Weightbearing: Full weightbearing Range of Motion – Full/Painless ROM | |
| • Therapeutic Exercises | |
| Leg press | |
| Hamstring curls | |
| o Squats | |
| Plyometric exercises | |
| o Endurance work | |
| Return to athletic activity as tolerated | |
| Comments: | |
| Frequency: times per week | weeks |
| Signature: | Date: |
| | |