General:

1. You will be given a prescription for narcotic pain medication (Percocet, Dilaudid, or Vicodin). You will have pain for the first week after surgery. You will also be given a prescription for Naprosyn, which is an anti-inflammatory medication. This will help alleviate the inflammation and will aid in decreasing pain and thus decrease the need for the pain medication. Take the Naprosyn with meals. If severe stomach discomfort develops, discontinue the Naprosyn and call the office.

2. Keep the incision clean and dry. You may shower with a plastic bag or plastic wrap around the knee to cover the surgical site. Surgical supply stores carry such plastic wraps for keeping an extremity dry after surgery. Use ACE wrap for 3 days.

3. Apply ice packs or the Cryo/Cuff to covered incision 20-30 minutes 4 times per day.

4. You should keep a clean gauze over the surgical incision until the sutures are removed at 8-10 days after surgery.

5. Maintain leg elevation while sitting and sleeping at night. Put a pillow under the ankle/foot, NOT under the knee.

6. You may develop bruising around your knee and down into your calf. Do not be alarmed; this is normal following surgery. If you develop significant calf swelling, redness, or tenderness, you should contact our office promptly.

7. It is also normal to develop a low-grade fever after surgery (up to 100.5°).

8. You should contact our office if you develop significant drainage from the surgical incision, redness, or fever above 101.5.

9. You may experience some low back pain due to muscle spasms from the epidural anesthesia. If so, apply a heating pad to the area and take Tylenol. If the discomfort persists or if you develop severe headache, contact our office.

Activity Guidelines:

1. Wear the brace locked in full extension (straight) and use crutches for walking. You may put partial weight on the operated leg while walking with crutches. The brace should be worn for sleeping during the first 4 weeks after surgery to protect the tendon repair.

2. You will begin flexion (bending) at approximately 2-3 days after surgery. You will work on active bending (using your own muscle power) to the limits set by Dr. Henshaw, and passive straightening (using your good leg to help straighten the operated leg). At 4-6 weeks, you will begin formal physical therapy 3 times per week for approximately 3 months.

3. The first goal in physical therapy will be to restore full range of motion, followed by quadriceps and hamstrings muscle strengthening.

Please call our office if you have any further questions

We wish you a speedy recovery