1. Once you have gone home, apply fresh gauze and ACE wrap to the wounds. Please do not use bacitracin or other ointments under the bandage. Use the Cryo/Cuff or ice packs as often as possible for the first 5-7 days, then as needed for pain relief.

2. You may shower on postoperative days #1-2. Keep the area dry. You may use waterproof Band-Aids. Do not soak the knee in water or go swimming until Dr. Henshaw clears you to do so.

3. Keep your leg elevated with a pillow under your calf, NOT under the knee.

4. Exercises to be performed 2-3 times daily:

   * Gentle range of motion of the knee: bending and straightening.

   * Straight leg raises, with foot straight and turned out. Goal is 50-100 reps 3 times per day.

   * Isometric quadriceps contractions.

   * No weight bearing; use crutches at all times until instructed by Dr. Henshaw to bear weight.

   * Use the CPM machine at home for 4-6 hours per day.

5. Please call the office to schedule a follow-up appointment for suture removal 7-10 days after your surgery.

6. If you develop a fever (101.5) or redness or drainage from the surgical incision site, please call our office to arrange for an evaluation.

7. You may experience some low back pain due to muscle spasms from the anesthesia. If so, apply a heating pad to the affected area and take an analgesic if you have not already done so.

8. Enclosed are two prescriptions. Naprosyn, an anti-inflammatory medication, is to be used twice a day with breakfast and dinner, for the first 10 days after surgery. Percocet, Dilaudid, or Vocidin, narcotics, are to be used on an as needed basis for pain in addition to the Naprosyn.

If you have any questions, please feel free to call our office.

If you have any difficulty using anti-inflammatory medications or aspirin, or have a history of ulcer disease, you will only use the narcotic postoperatively.

If you find that the Naprosyn is upsetting your stomach, please call our office to review the medications.