

Ronak M. Patel, MD

Patellar Instability

(non-osteotomy; MPFL reconstruction; Medial Imbrication; Lateral Lengthening)

Post-Operative Instructions

Please bring all post-operative DME to the surgical facility the day of surgery (this includes all crutches, braces, slings, polar care machines, etc.)

Diet

- You may resume your regular diet. However, start slow with clear liquids and gradually work your way back to your normal diet. This will help prevent nausea and vomiting.

Wound Care

- After 72 hours, you may remove the outer dressing including any ACE wraps/gauze. Continue to keep extremity dry.
- Five days after surgery you may then remove the inner dressing including any bandages. After that, you may shower. After showering, cover the incisions with light gauze and tape. Put the stocking back on.
- Do not put any lotions or antibiotic ointments over the incisions until they are completely closed.
- Do not submerge your surgical leg or soak in a hot tub, swimming pool, or bath for 4 weeks.
- Sutures will be removed at your first post-op visit.

DVT Prevention

- You must wear your white TED hose compressive stocking until cleared by Dr. Patel. This stocking reduces swelling which improves healing and helps prevent blood clots.
- Please perform ankle pumps as this will help prevent blood clots.
- **Sometimes we have to prescribe a blood thinner to help prevent blood clots. Given your medical history, surgery and activity level:**
 - **You are recommended to take one 325mg Aspirin daily by mouth for 2-4 weeks after surgery. Do not take Aspirin at the same time as NSAID medications.**
 - **STOP THE ASPIRIN:** If you have any stomach irritation, bleeding in your stool or you start vomiting blood. Contact Dr. Patel's office.
 - **You do not need to take any additional medications**
 - **Other:** _____
- If you are traveling after surgery, please let us know – we advise you to wait at least 1 week between travel and surgery. General tips for preventing blood clots when traveling after surgery:

1. Get up on the plane to crutch/walk every hour or if driving stop every 1-2 hours to get up and walk
2. Stay hydrated. Avoid alcohol and caffeine.
3. Wear your leg stockings
4. Take 325mg of Aspirin (unless allergic or have stomach or kidney problems) the day before travel, the day of travel and the day after travel
5. Do your exercises during travel especially ankle pumps
6. If you experience swelling in your calf or pain please call our office immediately or go to your local ED for evaluation

Post-operative Activity and Weight Bearing

- During the first week post-operatively, begin with weight-bearing as tolerated (WBAT) with two crutches. You will then increase your weight-bearing status as instructed by your physical therapist in the weeks following.
- Your first goal after knee surgery is to get your straightness back (Obtain full extension (0 degrees)). You will actually feel more comfortable with the knee slightly bent but it is important to start working on extending your knee immediately. This entails placing a firm but padded cushion/pillow/pad beneath your heel to straighten out the knee. Do this at least three times a day.
- You will have received a hinged brace prior to surgery. This is to be on at all times, locked in extension except for when performing therapeutic exercises. The brace is to be worn during sleep as well.
- Your knee range of motion (ROM) will be restricted from **0-30 degrees** for the first two weeks. You will continue to progress your flexion further as instructed by your physical therapist

Leg Elevation

- Place pillows under the ankle/calf only. Do not bunch them directly under the knee. This will help reduce your swelling and allows for full extension of the leg, which is very important.

Cold Therapy

- Ice should be used to help reduce pain and swelling. If possible, set the ice therapy device to 40-50 degrees F – some machines do not have this setting. Use it as often as possible the first 3 days after surgery, alternating 20 minutes on with 20 minutes off during the day. It can be used **continuously at night**. After that, you should apply ice at least 3 to 5 times a day for 20 minutes each session until pain and swelling have resolved.
- When icing after your surgical dressing has been removed, do not put ice directly over healing skin. Use of a thin cloth barrier between the skin and ice is recommended.
- Usage of an ice therapy device is at your own risk. Please make sure to read all instructions prior to purchasing one or using one. If you would like to purchase one you may do so online at Amazon.com and search “Cryotherapy”.

Pain Medication

- Take your pain medication as prescribed. This usually means 1 tablet every for 4 hours for mild pain or 2 tablets every 4-6 hours for severe pain. Do not take any additional Tylenol.
- You can also use over-the-counter non-steroidal anti-inflammatory drugs (NSAIDS) once you are eating well. They will help reduce pain, swelling, and stiffness.
 - Recommended: Aleve, 1 to 2 tablets every 12 hours; or Ibuprofen, 400 to 800 mg every 6 to 8 hours. Eat something prior to taking the medication. If you develop stomach burning or severe GI upset, discontinue the medication.
 - *Do not take NSAIDS if you have a history of kidney, liver, or stomach ulcer disease, or bleeding disorders, or if you are taking Celebrex, Bextra, or blood thinners like Coumadin.
- The pain medication may also cause constipation if you take it regularly, so take the prescribed stool softener as needed. Over the counter treatments include: stool softener, fiber bar, Metamucil or prune juice to prevent constipation.
- No driving while taking any narcotic pain medication.
- The pain medication may cause some nausea so take it with some food.

Effective October 6, 2014, federal regulation prevents the ability to call or fax post-operative pain medications to pharmacies (including refills). Every prescription must be an original and presented in person; please keep this in mind when requesting additional medications.

Nerve Blocks for Anesthesia

If you had a nerve block this can last approximately 12-24 hours, sometimes longer. You may notice tingling on occasion after the block wears off. This usually resolves in several days, but if it persists please call the office.

As you begin to regain your sensation take your pain medication before the block wears completely off. This will help you prevent getting behind on pain control.

Notify the Office if you Experience the Following

- Flu-like symptoms, nausea/vomiting, temperature of 101.5 degrees or higher, severe chills; foul odor, redness, or increased tenderness or drainage from the incision. These are signs of a possible infection. You may need to report to an Emergency Room.
- Hot tender area or unusually large amounts of swelling in either calf or other area of the leg; chest pain, shortness of breath or coughing up blood. These are signs of a possible blood clot and you may need to report to an Emergency Room or call an ambulance.
- **For urgent problems** that occur during office hours (office hours, Monday -- Friday, 8:00 am to 5:00 pm), call Dr. Patel's office directly (630) 920-2350 or report to an emergency room. After hours, call (630) 920-2350 or report to an emergency room.

Follow-up

- If you do not have a postoperative appointment with Dr. Patel or his PA set-up already, please call the office to schedule an appointment for 17-21 days after surgery at (630) 920-2350.
- You should have a scheduled post-surgical physical therapy appointment that you made prior to surgery. If not, call (630) 655-8785 to schedule therapy within 7 days of surgery

if insurance allows. Please bring the physical therapy order form included in this packet to your initial appointment.

- Please bring all surgical photos to your first follow up appointment