

# **Knee Surgery - Postoperative Care**

These notes are intended to answer some of the common questions following your knee surgery. Please note that they have been prepared by Prof Julian Feller and reflect his views and that they may not necessarily be the same as for other surgeons.

### **Wound care**

You will generally leave hospital with some waterproof dressings covering the incisions underneath a Tubigrip elastic sleeve. You can shower normally, but take off the Tubigrip prior to showering and don't spend longer than you need to. If the absorbent part of the dressings becomes wet, then it is better to change them. You can do this yourself or see your GP.

There are usually no stitches to be removed. The ones that have been used are absorbable and will disappear with time. The cut itself will have Steristrips or a Prineo strip on the surface. The dressings can be removed after 5 days if you have just had an arthroscopy, or 2 weeks for all other procedures. Any small areas of bleeding can be covered with a band aid.

You can get the cuts wet once the dressings have been removed.

Keep wearing the Tubigrip until your first appointment.

## Pain relief

Local anaesthetic was injected into your knee at the end of the procedure. If you have had day surgery, this will wear off after you get home and your knee may become more painful. It may also swell. This will have been dealt with if you had surgery as an inpatient.

Icing your knee is the simplest way to reduce your pain. 20 minutes every 2-3 hours during waking hours should be adequate.

You will have been discharged with painkillers. As a general principle, pain medication is built on a pyramid structure. The base should be regular paracetamol (two 500mg tablets, every 6 hours) OR slow release paracetamol ( $2 \times 665$ mg tablets, every 8 hours).

Depending on your surgery, you may also have been prescribed a slow release opioid (e.g. Palexia SR, Targin) to be taken twice a day.

For pain that is not controlled with this, you will also have been prescribed something stronger, such as Endone or Palexia IR. Endone and Palexia IR can be taken in addition to paracetamol.

A lot of these medications can cause nausea and vomiting, so it is often a case of finding the right balance between pain and nausea. Most people will prefer to tolerate some pain rather than feeling nauseated.

You may also have been prescribed anti-inflammatory tablets to help with pain relief in the first few days after surgery. These should be taken with food. If you get indigestion or have ongoing nausea, the anti-inflammatory tablets should be stopped.

## **Swelling**

Swelling is common after knee surgery and can take weeks to months to resolve, depending on the type of surgery. Swelling will be helped by

applying the R.I.C.E. principles:

- REST: Rest with your leg elevated as much as possible. Use pain
  and swelling as a guide to activity. Don't be frightened to move
  your knee though. Nothing bad will happen. Frequent small
  amounts of exercise help to prevent stiffness and also reduce pain.
- ICE: Any kind of ice pack will do. A device such as the CryoCuff
  that is used in hospital makes icing much easier. An alternative is a
  large bag of frozen peas (you will probably need two, so that one
  can be re-frozen while the other one is in use).
  - For the first 2 weeks use icing/cooling for 20 minutes at least 3 times a day. After 2 weeks ice the knee at least twice a day, typically after exercise and at the end of the day.
- COMPRESSION: You will usually have a Tubigrip stocking around you knee. Sometimes you will have a bandage. The bandage can be replaced by a compression stocking on the day after surgery. The compression stocking should be worn until or appointment.
- **ELEVATION:** See above.

## **Crutches**

Unless otherwise instructed, you can place as much weight on the leg as comfortable, using crutches if necessary.

To start with, the pattern of walking is "crutches, bad leg, good leg". Once you are more comfortable, the crutches and operated leg go forward together. You may find it easier just to use one crutch. Use it with the opposite arm i.e. for a left knee operation, use the crutch with your right arm.

To manage steps with crutches, use the following guide:

- UP: good leg, bad leg, crutches.
- DOWN: crutches, bad leg, good leg.

#### Follow-up appointment

A follow-up appointment will have been made for you, usually between 2 and 4 weeks following your surgery. If you don't have an appointment card, please ring the office the check the date. You will also be sent an SMS reminder.

These notes have been prepared by Prof Julian Feller at OrthoSport Victoria. They are a general overview aimed for use by his patients and reflect his views, opinions and recommendations. The contents are provided for information and education purposes only and not for the purpose of rendering medical advice. Please contact the office with any questions regarding medical conditions and treatment.

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