

Post-Operative Instructions – Femoral Condyle Microfracture

Diet

- Following surgery, nausea is very common. Begin with clear liquids and progress to your daily diet as tolerated.

Wound Management

- A bandage is applied to the operative site. Keep this in place for 72 hours after surgery.
- It is normal for there to be drainage and for the dressing to become blood tinged. If this occurs, reinforce with additional dressing.
- Remove the dressing after the 3rd post-operative day. It is still normal for there to be some drainage from the incision. Apply steri-strips or band-aids to the incision sites.
- Do not shower until after the dressing is removed. No baths or hot tubs!
- Do not use any topical agents over the incision sites.
- Sometimes small incisions are made that do not require suture closure. Please do not be alarmed by this.

Activity

- If you were fit with a brace at your pre-operative appointment, bring this with you to surgery. You should wear the brace at all times unless instructed otherwise. You may loosen the straps as needed for comfort.
- If you were provided with a brace, keep the operative knee in the brace provided at all times, with the exception of showering.
- Crutches may be used to assist with walking and you may put as much weight on the operative leg as is comfortable unless otherwise directed by your physician.
- Avoid prolonged standing as this may lead to increased swelling.
- Elevate the operative leg when resting with pillows under the foot and ankle to aid in the reduction of swelling.
- You are encouraged to do ankle pumps and quad contractions as soon as you are able.
- A continuous passive motion machine (CPM) will likely be used for up to 6 hours per day. Use the CPM in 2 hour intervals. Begin at a range of 0-40 degrees and increase flexion (bending) by 10 degrees daily to 90 degrees as tolerated.
- No driving until instructed by your physician.
- Sleeping may be done in a reclining chair or bed with the use of pillows to support the operative site as tolerated.
- Generally, if you have a desk job you may return to work on the third post-operative day.
- Return to a physically demanding job will be discussed at your post-operative visit.
- Formal physical therapy will begin after your return visit and it is safe to perform those exercises at home to assist with a return of strength and motion.
- If you were provided with a brace, it may be removed by the therapist to begin range of motion exercises.

Ice/Cryotherapy

- Ice should be used for 30 minute increments 4-5 times a day as tolerated.

Medication

- **Pain Medication:** Most patients require the use of narcotic pain medication for a period of time after surgery. You are encouraged to take your prescribed pain medication as indicated on the bottle regardless of pain level for the first 24 hours after surgery.
- **Anti-Inflammatory Medication:** You may take an over-the-counter anti-inflammatory medication (Ibuprofen or Advil, up to 600mg up to 3 times daily) after surgery in addition to your pain medication, unless you have a history of stomach ulcers. If you are not taking pain medication, you may still take an anti-inflammatory medication for inflammation, pain and swelling. Common side effects of pain medication include: nausea, insomnia, itching, constipation, drowsiness, and hallucinations. Take medications with food to reduce side effects. Do not drive or operate machinery while taking narcotic pain medication.
- **Nerve Block:** If you received an inter-scalene nerve block, numbness and loss of function may persist for up to 24 hours after surgery.

Post-Operative

- Your post-operative appointment will be 7-10 days after your surgery.

Emergencies

- **If at any time you have questions or emergent concerns, contact Dr. Trenhaile, or his Physician Assistant Michael Gilbertson, PA-C at 815-398-9491.**
- If you are calling after hours or over a weekend you will be directed to the physician answering service and you may be called by the physician or physician assistant on call.
- Please call if any of the following arise:
 - Fever over 101° (it is normal to have a low grade fever for the first 1-2 days after surgery)
 - Redness
 - Painful swelling
 - Numbness
 - Shortness of breath
 - Excessive bleeding and/or drainage from incision sites
- If you require immediate attention, go to the nearest emergency room

If you have any questions during normal clinic hours (8am-5pm),
please call Dr. Trenhaile's Nurse – Kari or Clinical Assistant - Alyssa at 815-381-7313.
After hours, please call 815-398-9491.