

Surgery Instructions

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Cartilage Procedures

*Osteochondral Allograft/Autologous Chondrocyte Implantation (ACI)/
High Tibial Osteotomy (HTO)/Anteromedialization (AMZ)/Meniscus
Transplant*

What to Expect

- The following instructions will help guide you through your recovery. Separate instructions for therapy and exercises will be given and are available at www.palmettohealth.com.
- Dr. Plymale's PA (Physician Assistant) Dean Levesque will be closely involved in your care and recovery. A physician assistant is a licensed practitioner that has completed over 2 years of post-college medical training and has the credentials and expertise to treat patients independently.
- **1st Post-Operative Visit** – This will be between 10-14 days after the surgery. You will see Dr. Plymale and he will go through your pictures from surgery and answer any questions that you may have.
- **2nd and 3rd Post-Operative Visits** – Occur at 4-6 weeks and 3-4 months after surgery. During these visits you will be seen by Dr. Plymale and or Dean Levesque (Dr. Plymale's PA) to ensure that you are comfortable and meeting the recovery goals. Mr. Levesque is always in direct communication with Dr. Plymale and does have the medical expertise, training and credentials to help you along with your recovery.
- **4th Post-Operative Visit** – Occurs at 6 months after surgery. Dr. Plymale will discuss any questions that you have and ensure you are making a complete recovery.
- **Physical Therapy** – Physical therapy can start within 24 to 48hrs after surgery. We will assist with setting up physical therapy upon scheduling your surgery. You should be scheduled before the surgery day. If no one has contacted you about this a few days prior to your surgery please call my office.
- We will contact your insurance company to authorize your surgery, but we suggest that you also contact your insurance company for further information and to verify coverage.

Day of Surgery

- **Diet** – Do not eat or drink anything after midnight the day of surgery.
- When you get to the hospital or surgery center Dr. Plymale will come speak with you and confirm the procedure and the operative limb. Feel free to ask any questions.
- The anesthesiologist will also come speak with you. For certain surgeries we routinely perform regional blocks for pain control during and after surgery. A regional block is a small injection that will numb the nerves at the operative site for up to 12-30 hours

after surgery. These blocks are excellent for pain control. They do have risks and if you have any questions be sure to ask the anesthesiologist.

- After surgery you will wake up in the recovery room and once you are comfortable and fully awake, the nurses will discharge you. You will have a cold machine on your leg as well as a hinged knee brace that you will use for 6 weeks.

Post-Operative Care

- **Diet-** Following surgery, nausea is very common. Begin with clear liquids and progress to your daily diet as tolerated.
- **Wound Care-** A bandage is applied to the operative site. Keep this on for 48 hours after the surgery.
- It is normal for there to be drainage and for the dressing or ACE wrap to become blood tinged. If this occurs, reinforce with additional dressing.
- Your dressing will be removed at your first therapy visit, which is 24 to 48 hours after your surgery.
 - It is still normal for there to be some drainage. Apply new bandage to the incision sites, change daily until 5 days after surgery and then there does not need to be any dressing from then on.
- Keep the incision dry for the first 5 days then running water only. Do not scrub the area. Pat it dry after your shower.
 - Do not soak in bath or hot tubs!
- You will be in a hinged knee brace for 6 weeks and must be work at all times except to shower.
 - You and your therapist will remove the brace for certain exercises.
 - You will wear your brace to sleep for 6 weeks unless instructed otherwise.
- Crutches will be used and must remain non-weightbearing to the operative leg for 6 weeks unless instructed otherwise by Dr. Plymale.
- No driving until instructed by your physician.
- Generally, if you have a desk job you may return to work/school after the 1st week.
- Return to a physically demanding job will be discussed on your postoperative visit.
- You will likely have an ICE MACHINE and it can be applied to the affected limb.
 - Use continuously for the first 72 hours postoperatively, then in 30 minute increments 4- 5 times per day thereafter as tolerated.
 - Do not put it directly on the skin.
- Elevate the leg as much as possible and work on foot pumps (pushing up and down with your feet like a gas pedal)
- You may be given a CPM machine that will need to be used up to 6 hours a day. Use it for 2 hours at a time. You will begin at 0-40 degrees and progress as tolerated increasing your bend 10 degrees daily to 90 degrees total.

Medications

- Most patients require the use of narcotics for a period of time after surgery. Take as directed. Common side effects of pain medication: nausea, insomnia, itching,

constipation, drowsiness, hallucinations. Take medications with food to reduce side effects.

- Do not operate machinery or moving vehicles while taking the pain medication.
- Ibuprofen, Motrin, Advil or Aleve (over-the-counter anti-inflammatories) may be taken as directed in addition to the pain medication to control symptoms.
- If you were prescribed Toradol (Ketorolac) or Indomethacin, do not take over-the-counter anti-inflammatories until this is gone.
- If you were given Aspirin. **This is to help prevent blood clots.** Do not take this with other over-the-counter anti-inflammatories unless instructed to by Dr. Plymale.
 - You will be on the aspirin for 2 weeks after surgery and then can stop unless Dr. Plymale gives you other instructions.

Emergencies

- If at any time you have questions or emergent concerns contact Dr. Plymale or his physician assistant Dean Levesque, PA-C at (803-296-9340).
- If you are calling after hours or over a weekend you will be directed to the physician answering service and the physician or physician assistant on call may call you.
- Please call if any of the following arise:
 - Fever >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

Follow-up

- A follow-up appointment will be set for 10 -14 days after the surgery. If you have questions or concerns about this date or any other questions related to your care please contact Dr. Plymale's team at (803-296-9340) during normal office hours.

Post Operative Expectations

- The following is a brief guide of what to expect during your recovery from ACL surgery. If you have any additional questions, please do not hesitate to contact my office and physician assistant Dean Levesque.
- Don't over do it. This is a long process and over doing it will not speed it up. Ask your therapist or myself questions that come up through your recovery.

Day 1

- Weight bearing: No weight should be placed on the leg. This might change based on other procedures that might have been performed at the same time. The therapist

should be able to clarify this and you should also be made aware of this upon discharge from surgery.

Weeks 0-2

- Keep the incisions dry for 48 hours. You will also be taught, in more detail, how to use your crutches, and the precautions. The therapist will also help you move your knee through range of motions and start performing very gentle exercises.
- You will be given a written protocol so you will know what to expect. This phase is very important to protect your graft.

Weeks 2-12

- You will continue with restrictions and at the 6 week mark usually you will be weight bearing as tolerated and will be out of the brace by week 8.

Weeks 12-24

- You will continue to advance with your physical therapist to more normal activities including sport specific activities.
- You will be able to start running at 6 months.
- Return to sport will vary but usually is anywhere from 9-12 months after surgery.