

**Palmetto Health USC Orthopedics**

**Sports Medicine Center**

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**Pre-operative Instructions:**

1. Do not eat or drink anything after midnight the night before your surgery.
2. Please discontinue aspirin 10 days prior to your surgery when possible to minimize bleeding.
3. Please discontinue the use of anti-inflammatory medicines such as Motrin, Aleve, Advil, and Ibuprofen 10 days before your surgery if possible to minimize bleeding unless Dr. Plymale has put you on one of them prior to surgery.
4. You may take anti-inflammatory medicines such as Celebrex, Mobic, or Bextra prior to surgery because these medicines do not affect your bleeding time or clotting capability.
5. Please discontinue the use of any herbal supplements two weeks before your surgery to minimize anesthetic risks. Some herbs are biologically very important. The following specific herbs should definitely be discontinued prior to surgery: valerian, echinacea, ephedra, ginkgo, kava, garlic, ginseng, and St. John's wort.
6. **Anesthesia:** The type of anesthesia used is between you and the anesthesiologist. Local anesthesia alone is **not** recommended for most patients undergoing knee arthroscopy due to inadequate pain control during the procedure.
7. If you are over the age of 55 or have any significant medical problems such as hypertension, diabetes, or heart disease, please contact your primary care physician to discuss what your risks may be of sustaining a medical complication during or after surgery. We will be happy to refer you for a pre-operative medical consultation when necessary as well.
8. Make certain that you arrange for someone to drive you home the day of surgery and stay with you the night of surgery.

**Surgery:**

1. Surgery is done very effectively as either inpatient or outpatient depending on your procedure.
2. Surgical time is usually between one to two hours after induction of anesthesia, positioning, and sterilely preparing the affected operative limb.
3. A brace will be provided to you on the day of surgery by the hospital or surgery center.
4. Time in the recovery room immediately after surgery is usually between one and two hours.

**Post-operative Instructions:**

1. Pain is significant but manageable with narcotic pain medications for the first few days. Narcotic pain medications may be necessary for up to 4 weeks for the average person. You may also take anti-inflammatory medicines with the narcotic medicines after surgery.
2. Post-op medications: Aspirin 325mg-take 1 tablet daily for 3 weeks to help with preventing any blood clots. Also promethazine (phenergan) 25mg-take as needed for increased nausea/vomiting. We will send these electronically to the pharmacy on file the day of your procedure. Before you leave the hospital, the nurses will hand you a prescription for narcotics, which is to be used for pain control. We cannot send these electronically as they are controlled medications. Please pick up the other medications at your pharmacy while filling these. You may alternate these medications every 3 hours as needed to control pain.
3. Pain control: Pain is usually controlled by the combined use of an ice bags, narcotic medication, and anti-inflammatory medication. As soon as you feel discomfort at home, the numbing shot (nerve block) is beginning to wear off. At that time you should take the pain medicine even if the pain is not severe. Even if your surgery is accomplished arthroscopically, you can expect significant pain the first few days after surgery. It is better to take the pain medicines as prescribed to minimize discomfort. You may also take anti-inflammatory medicines (Aleve, Advil, Ibuprofen) but not Tylenol because your narcotic medications already contain Tylenol.
4. Showering: You may bathe 48 hours after surgery but please keep the bandages on and your surgical area dry. (use a plastic bag or plastic wrap or bathe in a bathtub).

5. **Brace:** A brace may be necessary for up to 3 to 6 weeks after your surgery depending on the recommendations of your physician. It is very important to remain in the brace at all times until further instructed by your surgeon.
6. **Icing:** Postoperatively, an ice bag can be placed on top of the dressing and is recommended to reduce swelling, decrease pain, and decrease inflammation. After the first 48 hours, it is no longer necessary to use this continuously but only as needed for pain and swelling.
7. **Driving time:** Driving may be accomplished when you are no longer taking narcotic pain medications. As long as you wear your brace as instructed by your doctor and are no longer taking narcotics, you may drive if you are comfortable doing so. Most people do not drive after the surgery for at least 10 days.
8. **What about bleeding?** Do not be alarmed if you see some bloody drainage on the outside of your dressing. It is normal to have some bleeding, even after arthroscopic surgery. You may reinforce your dressing with additional gauze pads or wraps, but try not to remove the initial dressing until 48 hours after your surgery.
9. **Physical therapy:** P.T. visits will be needed twice a week for up to 4 months depending upon the individual. Therapy is extremely important to achieve the best result possible from surgery. We will schedule your therapy visits within the first 1-2 weeks after surgery.
10. **When will my arm have full range of motion?** The amount of time varies depending upon the individual and the type of surgery performed. Most people have full range of motion by twelve weeks after surgery.
11. **Swelling:** Significant swelling is normal for the first week after surgery.
12. **Healing time:** Recovery after any surgery takes time for the tendons to heal and time for your affected limb to strengthen. Your skin sutures are usually removed within two weeks after surgery if removable sutures are used.
13. **Return to work:** For a sedentary, desk type of job, one can generally expect to return to work in one week. Reduced hours may be necessary initially. For a moderately strenuous job one can expect to return around six weeks after surgery for one handed duty if available. For a strenuous job with no light duty available, return to work time can be up to four to six months after surgery.
14. **Out of Work Forms:** Please provide our office with any forms from work that need to be addressed. The time required to complete these forms is reduced if you answer the non-medical questions (name, address, employer information, date of injury, etc.) prior to turning them over to us. We ask that you allow our staff 7 days to complete these forms.
15. **Surgical complications:** Most patients hopefully will experience no complications and enjoy a rewarding return to regular activities. However, like most surgical procedures, post-operative complications can occur. These complications include infection, medical complications from anesthesia, blood clots, severe loss of motion necessitating additional surgery, re-rupture of the repair, residual pain, or nerve injury. **In the event that you have a post-operative complication, please call the on-call physician at 803-296-9200.**

We hope that your experience with the Palmetto Health Orthopedic is as pleasant as possible. Dr. Plymale is Board-certified by the American Board of Orthopaedic Surgery and Fellowship-Trained in Sports Medicine and the arthroscopic treatment of knee, shoulder, elbow, and hip disorders. It is his ambition to return you to activities that you enjoy in the most minimally invasive manner possible utilizing both non-surgical and surgical methods.

We will be contacting you closer to the time of surgery to discuss benefits. Palmetto Health Orthopedics will collect the physician portion prior to surgery. You will receive bills afterwards for any facility fees or anesthesia; they are separate from the physician fee. Please understand we will try our best to make these estimates as close to the correct amount as possible, but they are estimates and it could change if the procedure changes.

If you have any questions or concerns please contact our care team at 803-296-9340.