

## **MENISCUS REPAIR SURGERY - POSTOPERATIVE INSTRUCTIONS**

Arthroscopy is a minimally invasive procedure that allows the surgeon to investigate the joint with a small camera and work with thin instruments through small incisions.

Knee arthroscopy is recommended to treat various conditions of the knee. We can include: damaged cartilage, torn meniscus, torn ligaments, infection, and others.

A meniscus is a crescent-shaped fibrocartilaginous structure located between your thighbone( femur ) and shinbone( tibia ). Each knee has two menisci( plural of meniscus ). They act as shock absorbers and help stabilize the joint.

Meniscus tears are common knee injuries, especially among people who play sports. If surgery was indicated, the surgeon may remove a piece of the torn meniscus( partial meniscectomy ), and the whole meniscus( total meniscectomy - rarely performed ) or repair it if possible. The surgeon's efforts are all to preserve the meniscus.

### **MENISCUS REPAIR SURGERY**

The surgery usually takes between 1-2 hours, unless unexpected injuries are found. Both general and regional anesthesia can be used. Additionally, you may receive a nerve block. This will be decided between you and the anesthesiologist before surgery.

The surgeon inserts an instrument called an arthroscope and other pencil-sized instruments into the joint through small incisions. The arthroscope is equipped with a video camera that transmits the image of the inside of your knee to an external monitor. The surgeon will look inside the knee and after having made an inventory of it, will remove the damaged tissue, and will perform the meniscus repair. Several suturing techniques can be performed and your surgeon will decide which one is most suitable for your injury.

### **RECOVERY**

It depends on the type of surgery you had, your injury, activity level, age, smoking status, adherence to rehabilitation, etc. However, if you have had a meniscus repair your recovery time will be longer compared to a meniscectomy.

### **POSTOPERATIVE CARE: MENISCUS REPAIR SURGERY**

- Swelling is one of the most important factors involved in knee arthroscopy causing postoperative pain.
- Keeping the leg elevated and the frequent application of ice (cold therapy) are important ways to reduce swelling around the knee.
- Elevation is achieved by placing pillows under the entire leg so that the heel is elevated higher than the knee. And you need to elevate your leg above the level of your heart.
- The knee must be fully extended at the end of the second week.
- Your foot and ankle may be swollen after surgery. You are encouraged to elevate and move your foot and ankle several times a day to reduce swelling.
- **NO heavy squatting** for 4 months.
- **Do not** apply ice (cold therapy) if your nerve block is still in effect (**IF HAVING A NERVE BLOCK**).
- **You will be restricted from flexing (bending) the knee past 90 degrees for 6 weeks.**

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### BRACE

- **Meniscus repair** - you may wear a brace for your comfort for a few days.

### PAIN MANAGEMENT

- Medication, limb elevation, ice therapy and mobilization are essential in pain management.
- The usual regimen we use is a combination of acetaminophen, anti-inflammatory drugs, and narcotics.
- Taking your pain medicine as prescribed by your surgeon regularly will help you manage your pain more effectively, even if you are in mild pain.
- If strong painkiller (hydromorphone, morphine, oxycodone, etc) has been prescribed, don't wait until the pain is severe. Use strictly as prescribed by your doctor. Do not take an extra dose.
- **IF HAVING A NERVE BLOCK:** it is important to start taking regular pain medication before the nerve block wears off (see the Nerve Block HANDOUT for more information).

### WEIGHT BEARING

- You will be non-weight bearing for 6 weeks, and you must use a walking aid (crutches, walker, wheelchair) for your comfort.
- **No rotation for 3 months.**
- **Footbridge Clinic** has a **Physiotherapy team** that is used to our **protocols**. They will help you with gait training right after surgery and regain your normal gait pattern during the rehabilitation process.

### COLD THERAPY (ICE THERAPY)

- **DO NOT** use cold therapy if your nerve block is still in effect. You should wait until your function and normal sensation have returned. **(IF HAVING A NERVE BLOCK)**
- The knee is the largest joint in the body. The ice pack must be large enough to cover the front area of the knee.
- You could apply ice for up to 20 minutes, remove it for an hour and repeat the application 6 to 8 times a day, always with one-hour intervals. Remember that you must put a thin towel between the ice/ice pack and your skin.
- If you are using a CRYO THERAPY UNIT please follow the manufacturer's directions.
- **DO NOT SLEEP WITH ICE.**

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### **PHYSIOTHERAPY**

The goals of physiotherapy are:

- 8 weeks of physiotherapy (if needed).
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- Range of motion (ROM) - do not bend your knee past **90 degrees** for the first 6 weeks after surgery.
- 0 weeks of physiotherapy (if needed).
- Helping you return to the hobbies and activities that you enjoy.

Our **Physiotherapists** at **Footbridge** work closely with your **Surgeon** and are very familiar with the post-op rehabilitation process. Typically, formal physiotherapy will begin after your first post-operative visit; if you'd like to do your physiotherapy at **Footbridge** it can be booked at that time.

There is often benefit to doing one or two pre-operative physiotherapy sessions to prepare for your surgery; if you'd like to schedule an appointment you can do so online or by calling **Footbridge**.

### **WOUND CARE/SHOWER**

- You should keep the bandage that was placed on the day of the surgery for 3-4 days.
- You can shower, but you must keep your dressings dry and covered. Waterproof bandages work well for this purpose.
- After 7-10 days you can let the wounds get wet, but do not remove the steri strips (tape).
- If non-absorbable sutures are used, they will be removed 14-16 days after surgery.
- Do not get into a pool or bathtub for the first 3 weeks.

It is common to have swelling and bruising around the wounds. The bruising changes colour over time from red to yellow or green and may go down the leg.

Contact Footbridge Wound Care Resource line: 778-945-6756, Ext 8 if:

- **Pain on your CALF, BACK OF KNEE, THIGH or GROIN.**
- **Increased swelling on the operated thigh, knee or leg.**
- **Body temperature above 38 Celsius/101 Fahrenheit.**
- **Increased warmth and redness around the wounds.**
- **Increased fluid leaking from the wound.**

**CALL 911 if:**

- **You have trouble breathing.**
- **You have chest pain.**
- **Anyone noticed that you lost consciousness.**



# MENISCUS REPAIR SURGERY - POSTOPERATIVE INSTRUCTIONS

## RETURN TO ACTIVITIES - TIMELINE (approximate)

### MENISCUS REPAIR

#### *Weight-bearing*

- Non-weight bearing for the first 6 weeks (with an assistive device)

#### *Walking (without crutches)*

- 6 - 8 weeks

#### *Working*

- Deskwork: 4 weeks (with crutches)
- Heavy work: after 6-8 months

#### *Driving*

- After 8 weeks (if a complete range of motion and no swelling)

#### *Sports*

- 6-8 months

