

## **Instructions Following MPFL Reconstruction and/or Tibial Tubercle Osteotomy**

### **1. When to contact Dr. Faulkner's team:**

- Excessive bleeding; unrelenting pain; excessive wound drainage (mild drainage or spotting is normal for 3-4 days postop); persistent numbness or tingling in operative extremity; temperature of  $>101^{\circ}$  F; increasing redness or swelling; calf pain, tenderness, or swelling

### **2. Dressings/wound care:**

- Remove gauze dressing 2 days postop.
- Leave white sticky strips in place until 1<sup>st</sup> postop appointment.
- Ok to shower 2 days postop. Do not submerge your incisions.

### **3. Blood Clot Prevention:**

- Wear compression stockings for 14 days postop. Remove for hygiene and for 2 hours/day to allow the skin to breathe.
- Take Aspirin 325 mg for 14 days.

### **4. Brace:**

- Wear locked in full extension at all times, including at night.
- Unlock at least 3x/day for knee range of motion.
- Ok to remove for hygiene

### **5. Weight Bearing:**

- **MPFL only:** Ok to place full weight on operative leg immediately after surgery with the knee brace locked in extension and using crutches.
- **MPFL and TTO:** You are restricted to touch-down weight bearing. Ok to tap toe on ground when ambulating, but do not transfer any weight through operative extremity until cleared to do so. It is VERY important to adhere to weight bearing restrictions. Use crutches to follow to this protocol.

### **6. Activity after surgery:**

- Elevate leg above heart level as much as possible to help reduce swelling.
- Start knee range of motion exercises the day after surgery (Goal is 0-90° of flexion by the 1st postop visit).
- Quad sets and straight leg raises should be performed at least 3x daily.

**7. Restrictions/Driving:** No driving unless cleared by Dr. Faulkner. No lifting, pushing, pulling, or carrying objects  $> 10$  lbs. Do not climb, stoop, crawl, or kneel.

### **8. Cold therapy/Ice:**

- Apply an ice pack or cold therapy unit to knee 30 minutes 6 x daily to help reduce pain and swelling.



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- Do not apply to bare skin. Be sure to have an ACE wrap or wash cloth between ice pack and skin to avoid frostbite.
- Remove for 30 minutes every 2 hours.

### 9. Pain medication:

- Take 1-2 tabs of the prescribed pain medicine with food every 4-6 hours as needed. Take the medication sparingly and discontinue as soon as possible.
- Common side effects of narcotics: constipation, drowsiness, nausea and confusion. If you experience severe nausea, itching, dizziness or other adverse reactions, call Dr. Faulkner.
- Increase your fiber intake (fruits, vegetable, grains) and use an over the counter stool softener (such as docusate or Senna-S) if you are having constipation.
- Substitute Tylenol and/or Ibuprofen or Aleve if you do not have any contraindication to taking these. **Maximum dose/day of Tylenol is 1000 mg every 8 hours and Ibuprofen 800 mg every 8 hours.** Stomach upset, GI ulcers and allergic reactions are the most common adverse reactions to anti-inflammatories. You should not take more than 3000 mg of Tylenol in a 24 hour period.

**10. Diet:** Anesthesia can cause temporary nausea after surgery. Begin with light with clear liquids or soft foods after surgery to minimize upset stomach. Drink at least 6-8 glasses of water daily.

**Website URL:** [nathanfaulknermd.com](http://nathanfaulknermd.com)

**Postop instruction videos URL:** [nathanfaulknermd.com/postop](http://nathanfaulknermd.com/postop)

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*Videos to watch:*

1. *Post Op: Get to Know Your Knee Brace*
2. *Post Op: Knee Home Exercise Program*
3. *Shoulder & Knee Arthroscopy Post Op Wound Care Instructions*



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Please feel free to contact our office at any time!

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