Rehabilitation After Arthroscopic Knee Surgery
Phase 1: The First Week Following Surgery

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This protocol is a guideline for your rehabilitation after arthroscopic knee surgery. You may vary in your ability to do these exercises and to progress to full resumption of your previous activity. Please call the doctor if you are having a problem with your knee or if you need clarification of these instructions.

Goals
1. Control pain and swelling
2. Maintain knee motion
3. Activate the quadriceps muscles

Guidelines and Activities

1. The novocaine that is put in your knee at the time of surgery lasts six to eight hours. Begin taking the pain medication when you start feeling sensation return. The knee will be painful for several days after the arthroscopy.

2. You can bear full weight and walk on the leg unless otherwise instructed by Dr. Berkson. In some instances, crutches can be used for a period of time if walking is uncomfortable.

3. Remove your bandage on the second morning after surgery but leave the small pieces of white tape (steri strips) across the incision.

4. Gently move the knee (flexion and extension) as much as you can to prevent stiffness.

5. Apply cold to reduce pain and swelling. Use ice on the knee 20 minutes on and 20 minutes off for the first day when awake. Then apply cold as often as needed for 15 to 20 minutes at a time for the next several days. Place a towel or cloth between the skin and the ice to prevent skin injury.

6. Wrap an elastic bandage (ace) around the knee at other times to control swelling. Wrapping too tight though, though, can make your foot swell.

7. You may shower and get your incision wet after the second day from surgery. Do not soak the incision in a bathtub or Jacuzzi until the stitches have been removed.

8. Take an aspirin each morning. If you have been previously told to avoid aspirin or have an easily upset stomach, you do not need to take an aspirin.

9. Wear an elastic stocking (TED) below the knee, and do at least 10 ankle motion exercises each hour to control swelling and to help prevent phlebitis (blood clots in the veins).
Exercise Program

**QUADRICEPS SETTING** - to maintain muscle tone in the thigh muscles (quadriceps) and straighten the knee. Lie on your back with your knee extended fully straight as in figure. Tighten and hold the front thigh muscles making the knee flat and straight. If done correctly, the kneecap will slide slightly upward toward the thigh muscles as the muscles contract. The tightening action of the quadriceps should make your knee straighten and be pushed flat against the bed or floor. Hold for five seconds for each contraction. Do 20 repetitions whenever you think about it (many times a day).

**HEEL SLIDES** - to regain the bend (flexion) of the knee. While lying on your back, actively slide your heel backward to bend the knee. Keep bending the knee until you feel a stretch in the front of the knee. Hold this bent position for five seconds and then slowly relieve the stretch and straighten the knee. While the knee is straight, you may repeat the quadriceps setting exercise. Repeat exercise 20 times, three times a day.

**SITTING HEEL SLIDES** - to regain the bend (flexion) of the knee. While sitting in a chair, slide the heel backward as if trying to get the foot underneath the chair. Hold five seconds and slowly relieve the stretch by sliding the foot forward. You can help with the opposite foot if necessary. Repeat exercise 20 times, three times a day.

**ANKLE PUMPS** - move the foot up and down to stimulate circulation in the leg. Do at least 10 ankle pump exercises each hour.

**OFFICE VISIT**
Please return to see Dr. Sanders approximately **one week to ten days** after your surgery. At this time, your sutures will be removed and your progress will be checked.