

Post-operative Instructions: Manipulation Under Anesthesia

- **DAY OF SURGERY**

- A Game Ready/Cryo-Cuff will be placed on your knee in your hospital room. This will dramatically aid in the decrease in the amount of the swelling in your knee
- Your knee will have a large bandage placed on it. That will be removed two days after your surgery.
- You will meet a Physical Therapist starting in the recovery room. They will instruct you in some exercises that you will begin doing right away. They will also get you out of bed and begin walking by the next day.
- We would like you to start moving your feet up and down in the recovery room to help with circulation. We also would like you to use the incentive spirometer (the breathing device with the balls in it) 10x every hour while you are awake to promote you getting oxygen in your lungs. It may make you cough and that is normal.
- The pain management service will start you one IV pain medication and gradually over the next few days will wean you off onto oral medications.

- **CRYOTHERAPY**

- Cryotherapy (Cold therapy) is a very important part of pain control after surgery. The cold temperature will help control swelling and reduce pain. This can be done several ways – with an ice pack or a cold therapy unit.
- Cold therapy units are more effective in concentrating the cold to the surgical site via a molded wrap. Cold water is then circulated through the wrap, delivering cold to all sides of the joint. Cold therapy units come 2 ways - Cold therapy only and Cold therapy with compression :
 - Cryocuff® (cold only) – cold therapy via a molded wrap
 - Game Ready® (cold + compression) – cold therapy via a molded wrap which also delivers a moderate compression to the surgical site to help control swelling
- You may elect to use only an ice pack or a Cryocuff® or a Game Ready®

- **WOUND CARE**

- You may remove the Operative Dressing 2 days after surgery.
- Home CPM – please use for 2 hours, 3 times per day to maintain your range of motion.
- Please do not use Bacitracin or other ointments on the incision. An ACE wrap may be used to help control swelling. Do not wrap the ACE too tight. You may be given a stockinette to place over your wound and under the brace – this is to help alleviate sweating under the brace.
- There may be a small amount of bleeding and/or fluid leaking at the surgical site. This is normal. The knee is filled with fluid during surgery, sometimes causing leakage for 24-36 hours. You may change or reinforce the bandage as needed.
- Use Ice / Cryocuff / Game Ready as often as possible for the first 3-4 days, then as needed for pain relief. Do not wrap the Ace too thickly or the Cryocuff cold may not

penetrate. If using the Game Ready, start with NO compression, then after a couple of days you may use LOW compression. The use of HIGH compression should not be painful.

- There will actually be more swelling on days 1-3 than you had the day of surgery. This is normal. The swelling is decreased by using the Ice / Cryocuff / Game Ready. For knees, the swelling will make it more difficult to bend your knee, but once the swelling goes down, it will become easier to bend your knee.
- You may shower on Post-Op Day #2 using a water-tight plastic bag over your knee or shoulder.
- DO NOT GET THE WOUND WET, KEEP THE WOUND CLEAN AND DRY. You may gently wash around the incision with a washcloth, then gently pat the area dry. Do not soak the knee in water. Do not go swimming in the pool or ocean until your sutures are removed.

- **DRIVING**

- ****IMPORTANT** - ABSOLUTELY NO DRIVING WHILE TAKING ANY NARCOTIC PAIN MEDICATION (VICODIN / PERCOCET, etc.)** - it is against the law to operate a motor vehicle under the influence of any controlled substances (even when legally prescribed). Narcotics impair both motor ability and judgment
- As a result of your surgery, your reaction time will be greatly slowed down, impairing your physical ability to safely drive a vehicle. Thus in the case an emergency arises – i.e. you need to slam on breaks, depress the clutch, or turn the wheel, you may not be able to do so quickly – thus potentially risking harm to yourself or others.

- **CONCERNS/QUESTIONS**

- If you feel unrelenting pain, notice incision redness, continuous drainage or bleeding from wounds, continued fevers greater than 101°, difficulty breathing or excessive nausea/vomiting, please call **(801) 587-7040** during regular office hours or **(801) 587-7100** (physicians' answering service) after 4:00 pm or on weekends.
- If you have an emergency that requires immediate attention, proceed to the nearest Emergency Room.

- **FOLLOW UP APPOINTMENTS**

- If you do not already have a follow up appointment scheduled, please call (801) 587-7109 during normal office hours and ask to schedule an appointment. I would like to see you back in 10-14 days post-operatively. However, if there are any post-operative surgical concerns, please call and we will get you in sooner.

- **STUDY PATIENTS**

- We thank you for participating in clinical studies. Our intention is to improve your care and the care of future patients.
- If you have any questions regarding the study, please call the numbers provided on the study documents or you may contact the office numbers provided below.

- **IMPORTANT NUMBERS**

- Questions



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- During Office Hours (8:00-4:00)
 - Kattie Lindsay (Med Asst) 801-587-7040
 - Françoise Guillén Morillo (Clinic/Surgery Scheduling) 801-587-7187
 - Nikki Cooper (Practice Coordinator) 801-587-0989
 - Mark Beese (Athletic Training Cord) 801-587-1473
- After Hours (Tell the hospital operator your surgeon's name and they will contact the appropriate on call physician)
 - 801-581-2121
- Physical Therapy
 - 801-587-7005
- Toll Free
 - 1-800-824-2073
- Dr. Maak Fax
 - 801-587-3990