



Post-Operative Instructions: Medial Patellofemoral Ligament Reconstruction

Coming Home

- It is normal to feel like your knee is stiff and swollen with fluid. This will improve over time.
- You may bear weight on your operative leg. Use crutches for assistance with ambulation.
- Keep your knee brace locked in full extension for ambulation and sleeping. When awake and at rest, you should unlock the brace hinge to allow for range of motion exercises (brace set for 0-30°).
- You may have been given an ice machine. The machine will need to be refilled with ice every 4-6 hours. Remove the wrap for 15 minutes every 1-2 hours to inspect the dressing and ensure that condensation is not wetting the dressing. Wipe away any condensation on the wrap.
- Keep your knee and leg elevated for 48 hours after surgery to help diminish swelling.

Dressings/Hygiene

- Keep your dressings dry and intact. They will be removed in the office at your first post-op visit.
- You may shower once the initial dressings are removed. Until then, please perform sponge baths in order to avoid getting the dressings wet.
- Once the dressings have been removed and the wounds are dry, it is safe to leave the wounds open to air. You may apply band-aids over the wounds for additional protection if you prefer.

Medications

- **Aspirin / Enoxaparin (Lovenox) / Rivaroxaban (Xarelto) / Apixaban (Eliquis):** You have been prescribed one of these medications to lower the risk of blood clots. It is important to take the full amount of medication as prescribed. The over-the-counter aspirin dose is 325 mg daily for 30 days.
- **Acetaminophen (Tylenol):** This medication helps with pain. It should be taken on a scheduled basis (1000 mg every 8 hours) for as long as needed.
- **Oxycodone / Tramadol / Hydrocodone:** These are narcotic medications that can be taken as needed for pain control. You should taper off and discontinue these medications as soon as you feel you no longer need them.
- **Gabapentin:** This medication helps diminish pain signals along the sensory nerves. If prescribed, it should be taken as prescribed on a scheduled basis at least until you are off narcotic pain medication. You may keep taking the gabapentin for as long as it is beneficial.
- **Ibuprofen:** You may have been prescribed a short course of this anti-inflammatory medication. After completing this, you should **avoid** the further use of any anti-inflammatory (NSAID) medication after surgery, because this can hinder tissue healing. Examples include ibuprofen, naproxen, Motrin, Advil, Aleve, diclofenac, Voltaren, celecoxib, Celebrex, meloxicam, and Mobic.

Follow-up and Contacts

- Your first post-operative visit has likely already been scheduled, typically in about 2 weeks.
- Physical therapy has been prescribed for you, typically starting within a few days of surgery.
- If you have any questions or concerns, please do not hesitate to call:

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