

# Care after knee surgery

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- Dr. J. DeBeer's patients – 905-527-1115
- Dr. F. Smith's patients – 289-337-1920
- Dr. D. Wismer's patients – 905-575-3300

You had this surgery today:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> knee arthroscopy          | <input type="checkbox"/> lateral release       | <input type="checkbox"/> ACL reconstruction |
| <input type="checkbox"/> medial meniscectomy       | <input type="checkbox"/> articular debridement | <input type="checkbox"/> Fulkerson          |
| <input type="checkbox"/> lateral meniscectomy      | <input type="checkbox"/> microfracture         | <input type="checkbox"/> hardware removal   |
| <input type="checkbox"/> other procedure(s): _____ |  |   |

You may remove your dressing/bandage 24 hours after your surgery, and you may then take a shower. Cover your knee with saran wrap. Pat dry after shower. Apply fresh sterile dry gauze and secure with skin tape. Leave the steristrips (the white tape over your incision) on for 10 days after your surgery. Do not take a bath or go swimming for 10 days after your surgery.

## Tonight after your surgery

- take your pain medication as prescribed
- raise your limb
- apply ice to your limb often
- use your crutches for support
- if the bandage is too tight, loosen it

If you have any of the following, please call my office:

- fever
- excessive pain
- excessive swelling

Go to the Emergency Department if you have:

- calf pain
- shortness of breath
- chest pain

These symptoms may represent a blood clot.

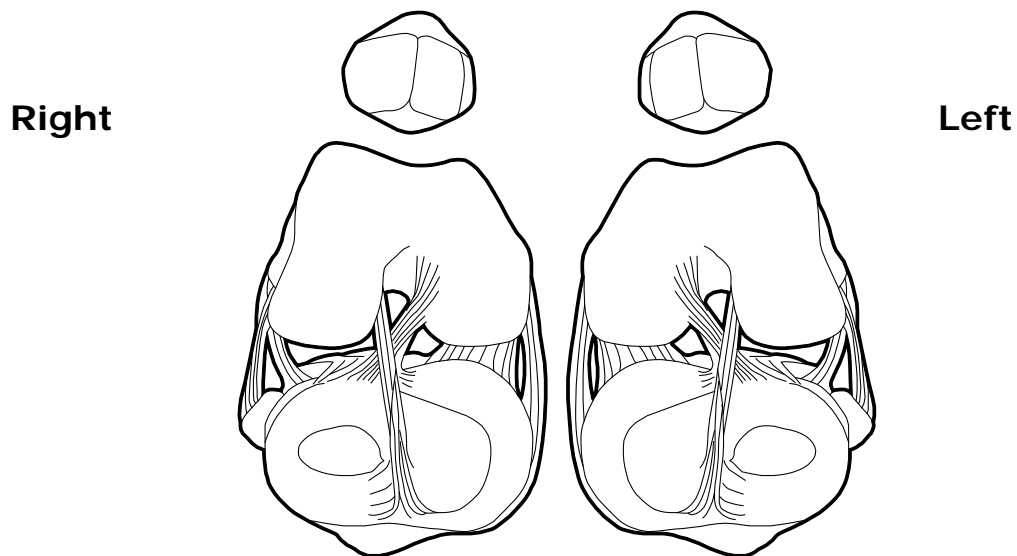
You need to be seen for a follow-up appointment in about 15 days at the Fracture Clinic. To make an appointment call the central booking office at 905-527-4322, ext. 42293 with your surgeon's name.

Please arrange a physiotherapy appointment for the day after your post-operative visit at the Fracture Clinic. **Do not start physiotherapy** until you have seen the surgeon after your surgery in the Fracture Clinic, unless you were told otherwise.

## Your weight bearing status and/or use of crutches is as follows:

- weight bearing as tolerated/crutches for support
- partial weight bearing for \_\_\_\_\_ weeks
- touch weight bearing for \_\_\_\_\_ weeks
- non-weight bearing for \_\_\_\_\_ weeks
- Remove Zimmer splint and replace it with your brace in \_\_\_\_\_ days

Please feel free to contact my office with any questions that you may have.



**Please remember to bring this sheet to your appointment at the Fracture Clinic.**