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## MPFL DISCHARGE INSTRUCTIONS

Resume regular diet as tolerated.

Medication • ☐ Follow medication instructions in your pre op binder for multimodal pain control ☐ Oxycodone ☐ Tylenol #3 ☐ Norco ☐ Aspirin 81 mg: Take 1 tablet for 2 weeks. ☐ You have been given a prescription for Phenergan. Fill this prescription ONLY IF you

- have severe nausea.

   If you had a block, begin taking pain medicine at the first sign of return of sensation. Take medicine prior to onset of pain.
- \* Restart your daily medication unless you are instructed to do otherwise

You will be given a prescription for pain medicine at your preoperative appointment. Take the medicine as needed according to the directions on the bottle. Possible side effects include nausea, dizziness, headache, vomiting, constipation, and urinary retention. If you experience these side effects, please call our office for assistance. Discontinue the medication if you develop a rash, shortness of breath, itching, or difficulty swallowing. If these symptoms become severe you should seek immediate medical attention.

Refills on pain medication are authorized during office hours only (8am-5pm; Mon-Fri.). Medication will not be refilled on weekends.

## **Activity**

Diet

- You have been given a cooling unit to ice your knee. This can be used all at times for the first 1-2 weeks, and then as needed. Do not let the ice pad directly touch your skin. **DO NOT** use heat.
- Apply ice, even though bandages are thick and you may not feel the cold. Apply ice to the 3 times per day for 30 minutes for the first 1 week until your knee is feeling comfortable again. **DO NOT** use heat.
- Pump your foot up and down 20 times per hour, every hour you are awake.
- Place a rolled towel under the ankle of your operative leg 3 times per day for 20-30 minutes for the first week to encourage full knee extension.
- **DO NOT** place a pillow underneath the knee for comfort. To elevate your leg, it must be straight with pillows under your ankle.
- You may begin straight leg raising exercises with your brace on. While lying down, pull your foot all the way up, tighten your quadriceps muscle and lift your heel off of the ground. Hold this position for 2 seconds, and then let the leg back down. Repeat the exercise 10 times, at least 3 times a day.

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Wall	king				
	Bear weight a	as tolera	ted with brace locked in full extension on operative leg. Use crutches for assistance.		
	<b>DO NOT</b> bear weight. You may stand but <b>DO NOT</b> walk with full weight on the operative leg.				
	You may put 30% partial weight on your leg with your crutches				
Dres	knee under wafter showeri You may NO appropriately Keep the dres You can expe is normal. If remove paper Re-apply you If the ace wra sing remova Remove brace a sutures. Apply	rater and ang.  OT show when we say the dress trapes (ar brace. ap is unconstituted and all defresh garden agiven agiven and all defresh garden agiven agiven and all defresh garden agiven agi	e light wound seepage through the bandage. <b>DO NOT BE ALARMED</b> . Fluid seepage sing does get soaked: Remove and replace with dry gauze and an ace wrap. <b>NEVER</b> steri-strips) or your sutures. You may drain more when the pain pump is pulled out.		
		-	steristrips until you are seen in our office.		
Arthroscopic			Torn medial patellofemoral ligament (MPFL)  Torn meniscus (cartilage)		
Proc	edure Perfo	rmed	MPFL Reconstruction with autograft allograft  □ Partial meniscectomy (cartilage removal)  □ Meniscus repair: limit bending your knee to 90° for 4-6 weeks.  □ Joint surfacing smoothing (chondroplasty)  □ Microfracture  □ Articular cartilage (joint surface) repair  □ Removal of loose body  □ Other		

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Physical Therapy		You will be given a physical therapy prescription to begin in 1 to 2 days. You will be given a physical therapy prescription when you are seen in the office for follow-up.
Follow-U	p Ap	pointment
Specific I	nstru	ctions:
1. A su relic 2. Ora exce acet 3. Exc	temped 3.3 aminessive eet, chi	ce at 949-491-9991 for: increase in swelling and redness or warm at the area the surgery was performed which is not by rest, ice, and elevation.  erature greater then 101.5 degrees that is not relieved by taking 2 tylenol every 4-6 hours. Do not 5 grams of Tylenol over 24 hours. Note your pain medicine contains Tylenol or ophen.  drainage from the incision or dressing which has not stopped 72 hours after surgery which is not y applying a compressive dressing, ice and elevation.  lls, shortness of breath, chest pain, nausea, vomiting or other signs and symptoms that concern
I have seen	and u	nderstand these instructions.  Date
Discharge 1	Vurse	Patient Patient