**Post-Operative Instructions – Femoral Condyle Microfracture**

**Diet**

* Following surgery, nausea is very common. Begin with clear liquids and progress to your daily diet as tolerated.

**Wound Management**

* A bandage is applied to the operative site. Keep this in place for 72 hours after surgery.
* It is normal for there to be drainage and for the dressing/ACE wrap to become blood tinged. If this occurs, reinforce with additional dressing.
* Remove the dressing after the 3rd post-operative day. It is still normal for there to some drainage from the incision. Apply steri-strips or band-aids to the incision sites.
* Do not use any topical agents over the incision sites.
* Sometimes small incisions are made that do not require suture closure. Please do not be alarmed by this.
* Do not shower until after the dressing is removed. No bathes or hot tubs!

**Activity**

* If you were fit with a brace at your pre-operative appointment, bring this with you to surgery. You should wear the brace at all times unless instructed otherwise. You may loosen the straps as needed for comfort.
* If you were provided with a brace, keep the operative knee in the brace provided at all times, with the exception of showering.
* Crutches may be used to assist with walking and you may put as much weight on the operative leg as is comfortable unless otherwise directed by your physician.
* Avoid prolonged standing as this may lead to increased swelling.
* Elevate the operative leg when resting with pillows under the foot and ankle to aid in the reduction of swelling.
* You are encouraged to do ankle pumps and quad contractions as soon as you are able.
* A continuous passive motion machine (CPM) will likely be used for up to 6 hours per day. Use the CPM in 2 hours intervals. Begin at a range of 0-40 degrees and increase flexion (bending) by 10 degrees daily to 90 degrees as tolerated.
* No driving until instructed by your physician.
* Sleeping may be done in a reclining chair or bed with the use of pillows to support the operative site as tolerated.
* Generally, if you have a desk job you may return to work on the third post-operative day.
* Return to a physically demanding job will be discussed at your post-operative visit.
* Formal physical therapy will begin after your return visit and it is safe to perform those exercises at home to assist with a return of strength and motion.
* If you were provided with a brace, it may be removed by the therapist to begin range of motion exercises.

**Ice/Cryotherapy**

* Ice should be used for 30 minute increments 4-5x a day as tolerated.

**Medication**

* Pain medication: Most patients require the use of narcotic pain medication for a period of time after surgery. You are encouraged to take your prescribed pain medication as indicated on the bottle regardless of pain level for the first 24 hours after surgery.
* Anti-Inflammatory Medication: You may take an over-the-counter anti-inflammatory medication (Ibuprofen or Advil, up to 600mg up to 3 times daily) after surgery in addition to your pain medication, unless you have a history of stomach ulcers. If you are not taking pain medication, you may still take an anti-inflammatory medication for inflammation, pain and swelling. Common side effects of pain medication include: nausea, insomnia, itching, constipation, drowsiness, and hallucinations. Take medications with food to reduce side effects. Do not drive or operative machinery while taking narcotic pain medication.
* Nerve Block: If you received a femoral nerve block, numbness and loss of function may persist for up to 24 hours after surgery.

**Post-Operative**

* Your post-operative appointment will be 7-10 days after your surgery.

**Emergencies**

* **If at any time you have questions or emergent concerns, contact Dr. Trenhaile, or his Physician Assistant Michael Gilbertson, PA-C at (815-398-9491).**
* If you are calling after hours or over a weekend you will be directed to the physician answering service and you may be called by the physician or physician assistant on call.
* Please call if any of the following arise:
  + Fever over 101 (it is normal to have a low grade fever for the first 1-2 days after surgery)
  + Redness
  + Painful swelling
  + Numbness
  + Shortness of breath
  + Excessive bleeding and/or drainage from incision sites.
  + If you require immediate attention, go to the nearest emergency room

**If you have any questions, please call Dr. Trenhaile’s Nurse – Kari or Clinical Assistant - Alyssa at 815-381-7313. After hours (normal clinic hours are 8am-5pm), please call 815-398-9491.**