

# JONAS R. RUDZKI, MD

SPORTS MEDICINE ORTHOPAEDIC SURGEON, SPECIALIZING IN SHOULDER & KNEE SURGERY

WASHINGTON ORTHOPAEDICS AND SPORTS MEDICINE

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# **Post-op Instructions: MPFL Reconstruction**

- 1. Before surgery, please call Dr. Rudzki's MA to schedule your first postop appointment for 7-10 days post-op. At the 1<sup>st</sup> post-op appointment, we will remove your dressings, remove your sutures, and discuss the plan for your therapy and recovery. If you have staples, they will be removed at your 2<sup>nd</sup> postop, and we will determine the timeframe for the 2<sup>nd</sup> post-op appointment your 1<sup>st</sup> post-op appointment.
- 2. If you develop a fever (temp > 101.5°), redness or drainage from the surgical incision site, please call our office to arrange for a prompt evaluation.
- 3. You will receive two prescriptions for pain medication (typically morphine sulfate & Oxycodone).
  - These pain medications are all opioid narcotic derivates, which have potential side effects that include constipation, nausea and sleepiness. Please take over the counter laxatives and stool softeners (ex. Peri-Colace, MiraLax, etc.), drink a lot of water, and eat dried apricots/ prunes 3x/day. These medications should not be taken on an empty stomach.
  - Please do not take any Motrin, Ibuprofen, or Aleve (NSAIDs) as these may impair your reconstructed ligament from healing.
- 4. You may slowly resume a regular diet as tolerated. We recommend you start slowly with clear liquids, diluted Gatorade, chicken/beef broth & crackers:
  - As soon as you get home, take small bites of food (1/4 turkey sandwich, diluted Gatorade, chicken soup, crackers) and 30 minutes later take your first pain pill (Oxycodone). Repeat this process 45-60 minutes later and take a 2<sup>nd</sup> pain pill (Oxycodone). Repeat again 45-60 minutes later and take a morphine sulfate. From this point forward, take Oxycodone 1-2 tabs every 4-6 hrs and morphine sulfate 1 tab every 12 hours. It's important to stay ahead of pain, but do not take the pain pills if you are sedated. If you are 21 years or older, take 1 baby aspirin twice a day for DVT prophylaxis.
- 5. Remove the dressing on the 5th day after surgery. Apply Band-Aids to the smaller wounds & a sterile gauze pad to the larger incision. Please do not use Bacitracin, Neosporin or any other creams under the bandages.
  - Do not shower or get your incision wet until cleared to do so by Dr.
    Rudzki. Please do not bathe/soak the surgical area or go swimming in the pool/hot tub/ocean until 4 weeks after surgery.
- 6. Apply the Game Ready Ice Sleeve or an ice-pack as often as possible for the first 10-14 days and then at least 4-6 times each day for 30 minutes and after each time you do your exercises. The Game Ready Unit should be set to cool for 30 minutes & then go off for 30 minutes. Take a one hour break every 4-6 hrs. *Make sure incisions stay dry*.
- 7. Elevation and protection of your surgical site are the most important considerations for initial post-op care. Keep your leg elevated with 5-7 pillows under your calf & ankle, NOT under the knee.
  - It is important to wear the knee immobilizer for the first 6 wks after surgery when walking around. Do not actively extend (straighten) your knee have someone do this for you or use your other leg to lift/straighten your leg.

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- It's critical to work on getting your knee as straight as possible as soon as possible after surgery. This is best accomplished by resting with your leg elevated out straight with several pillows under the ankle.
- 8. You will use crutches for stability but you are allowed to partially bare weight on your leg by just allowing your foot to touch the ground. As you work on strengthening your leg and decreasing your swelling, you will be able to discontinue your use of the crutches at approximately 6-7 wks.

Dr. Rudzki's MA can be reached at 202-787-5601 ext 652 or RudzkiMA@alignedortho.com

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