



G&T ORTHOPAEDICS AND SPORTS MEDICINE

PATIENT NAME: _____

DATE: _____

___ CHRISTOS S. GIANNOULIAS, M.D.

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KNEE ARTHROSCOPY PROTOCOL

POST-OP:

- USE ICE MACHINE OR ICE PACKS FOR THE FIRST 2 DAYS, THEN AS NEEDED FOR PAIN.
- CHANGE DRESSING TO LIGHT GAUZE OR BAND AIDS FOR THE FIRST 4 DAYS.
- YOU MAY SHOWER ON POST OP DAY 3. KEEP WOUND AREA DRY WITH PLASTIC OVER DRESSING, THEN CHANGE DRESSING AFTER SHOWER.
- FIRST POST OP CHECK IS 7-10 DAYS FOR SUTURE REMOVAL.
- CALL FOR TEMP OVER 102, EXCESSIVE SWELLING, PAIN OR REDNESS AROUND WOUNDS.

PHYSICAL THERAPY:

WEEK 1: ACTIVE ROM AND STRETCHING TO REGAIN FULL MOTION AS SWELLING AND PAIN DECREASE. THIGH AND CALF ISOMETRICS. STRAIGHT LEG RAISES.

WEEK 2-4: STATIONARY BIKE, WALKING TREADMILL, NO HIGH IMPACT ACTIVITIES. CONTINUE TO WORK ON MAINTAINING FULL MOTION.

WEEK 4-6: STRENGTHENING WITH LIGHT WEIGHTS, STAIRMASTER AND BIKE. JOGGING MAY BEGIN. REMEMBER TO ICE AFTER ALL WORKOUTS.

WEEK 6: SPORT SPECIFIC TRAINING AND WORK HARDENING AS NEEDED FOR RETURN TO FULL ACTIVITY.

FREQUENCY: _____ DURATION: _____

SIGNATURE: _____, M.D.