DELAWARE ORTHOPAEDIC SPECIALISTS

Discharge Instructions for Quad-Patella Tendon Repair

Diet: Start out with liquids and progress to your regular diet as you tolerate.

Activity: Do not perform any strenuous activity. You may walk only while wearing brace and you must be in brace at all times, including sleeping for the first six (6) weeks.

Pain Medication: A prescription was electronically sent to your preferred pharmacy the day before your procedure. Take this medicine for severe pain only. You may also use Advil/Motrin, an over the counter medication if you choose. Any activity that requires precise thinking and accuracy must be avoided while on narcotics after surgery, which includes operating machinery and/or driving a vehicle.

Other Recommended Medications: It is STRONGLY advised that you take an Aspirin 325mg tablet (1 tablet) for 30 days following surgery to help prevent blood clots from forming.

**If you have allergies to aspirin or are taking other blood thinners then you are NOT Advised to take the Aspirin

Ice: Ice is an excellent source of pain relief, swelling, stiffness and inflammation. Use it for a 20 minute duration a few times per day. The ice pack should never be placed directly on the skin. It can be used for several weeks as needed.

Return Visit: Your post-op appointment with your Doctor has been scheduled and is listed in the paperwork that you should have received in the mail and on your discharge packet. If you need to change the date and/or time, please call (302) 655-9494.

Emergency or Problems: DOS staff is available 24 hours a day in case you experience any problems once you leave the surgical facility. After hours, please call (302) 655-9494 for assistance.

Wound Care: Your incision is closed with sutures or steri-strips. It will usually drain or leak after you have returned home. Do not become alarmed unless you consider the volume or color of the drainage to be excessive. Starting on the second post operative day, you may remove all outer bandaging –

please keep steri-strips in place. You must use waterproof bandages when showering to keep incisions dry. If steri-strips fall off, please cover with a bandaid.

Showering: You should never take a bath, use a hot tub, or go swimming until instructed to do so. You may shower only if you keep the wound completely dry. Waterproof dressings can be purchased at your local pharmacy.(ie Tegaderm)

Suture Removal: Your sutures or staples will be removed at 10 days to 2 weeks after your procedure.

Surgery Supply Info

Lower Extremity Surgery

- Be prepared that you may not be able to walk without assistance (use of crutch or crutches) for a period of time.
- Place to sleep comfortable, as climbing up and down stairs may be unreasonable for a few days (sleeping on a couch, downstairs bedroom, etc..)
- Waterproof bandages (Tegaderm) to cover your wound when showering. They can be found at your local pharmacy.
- Extra ice pack (one (1) pound of peas or corn works great.) Ice packs should not be placed directly on the skin.
- A means of transportation, you may be limited from driving for a period of time. Due to multiple reasons, not able to drive while taking Narcotics, unable to use your right leg, etc…
- Possibly use of a shower stool to have if unable to apply weight or balance on one of your legs.

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Quadriceps Tendon Repair Guidelines

Post-Op Day 1- 4:

1. Brace to be worn at all times. May be taken off to shower, leg MUST REMAIN STRAIGHT.
2. Toe touch weight bearing with crutches
3. Exercises
    a. Ankle pumps
    b. Quad sets
    c. Patella mobs
4. Ice 20 minutes each hour

Day 4 – 7:

1. Continue use of brace (sleeping with brace locked)
2. Weight bearing as tolerated using two (2) crutches with brace locked
3. Continue to ice 20 minutes on every hour
4. Continue exercises from above

Week 2 – 4:

1. Will continue to use locked brace when weight bearing for six (6) weeks.
    a. Sleep in brace for six (6) weeks.
2. Slowly increase weight bearing with use of brace and crutches

Week 5 – 6:

1. Discontinue to use crutches (as safe per patient)
2. At week six (6) unlock brace for walking
3. Start Physical Therapy
4. Continue to ice as needed

Week 7 – 16:

1. Use brace unlocked when weight bearing until safe to ambulate without brace
2. Discontinue to sleep with brace
3. Gradually increase muscular strength

4. Gradually increase range of motion

Months 4 – 6:

1. Light activity phase
2. Continue to increase ROM
3. Continue to increase strength
4. Initiate functional activities
5. Months 5 – 6 may start light running if appropriate

Months 7 – 9:

Gradual return to full activities when appropriate

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POST OP KNEE EXERCISES

Ice knee as much as possible for 20 min on and 20 min off

Ice knee after doing exercises

Quad Sets

With leg as straight as possible, pull toes back towards you so they are pointing up into air. Tighten the muscles on top of the thigh (quads) by pushing the back of your knee into the table or floor as hard as you can. Hold for 10 to 20 seconds and repeat 10 times. Perform these 4-5 times a day, but more is better.

* You can sit up with back propped against a wall or lay on your back to perform*

Heel Slides

While lying on your stomach, Slowly bring your foot toward your buttock, DO NOT FORCE Hold for a count of 15 seconds and repeat 10 times. Perform 3-5 times a day.

*towel may be placed under thigh to *



Straight Leg Raises

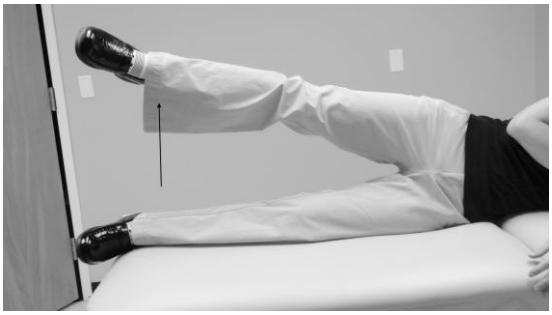
Lay on your back with good leg bent and injured leg straight. Pull toes back so they point up in the air. Tighten quad muscles by pushing back of knee to table. Keep leg tight and lift to match opposite knee. Slowly lower back to table. Should take a 2 second count to lift and 4 second count to lower. Relax your leg after completing one rep. Repeat 10 times, rest and repeat again for a total of 2 sets. Perform 2-3 times per day.



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Hip Abduction

Lay on your good side with the injured leg up in the air. Make sure that your legs are straight and toes pulled back towards you. Raise your injured leg straight up in the air. Do not rotate your hip or back to get higher (toes should not turn up to sky). Slowly lower leg back down. Should take a 2 second count to lift and 4 second count to lower. Repeat 10 times, rest and repeat again for a total of 2 sets. Perform 2-3 times per day.



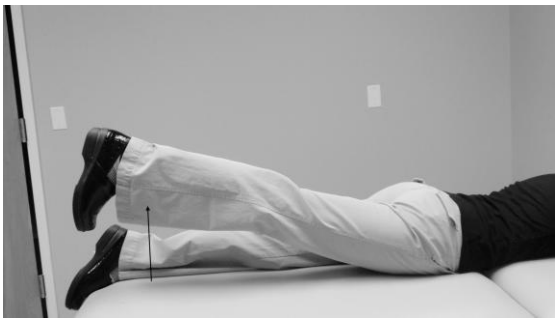
Hip Adduction

Lay on your injured side with the good leg crossed over and foot is flat on the table. For your straight leg – pull toes back towards you. Raise the injured leg up into the air. Slowly lower leg back down. Should take a 2 second count to lift and 4 second count to lower. Repeat 10 times, rest and repeat again for a total of 2 sets. Perform 2-3 times per day.



Hip Extension

Lay on your stomach. Raise the hurt leg straight into the air without arching your back. Slowly lower leg back down. Should take a 2 second count to lift and 4 second count to lower. Repeat 10 times, rest and repeat again for a total of 2 sets. Perform 2-3 times per day.



Hamstring curls

While standing or lying on stomach, You're your knee slowly, bring your heel towards your buttocks and then slowly lower back down. Should take 2 seconds to lift up and 4 seconds to return. Repeat 10 times, rest and repeat again for a total of 2 sets. Perform 2-3 times per day.

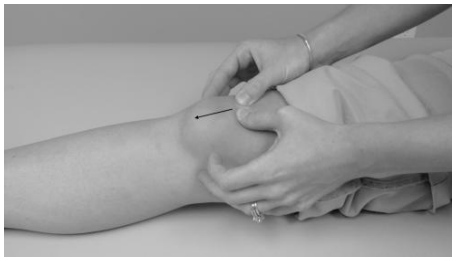
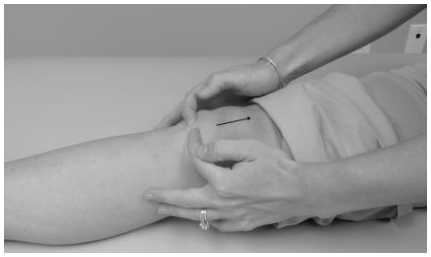


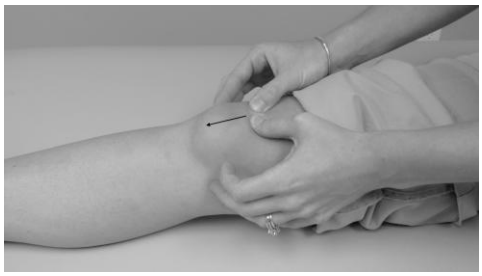
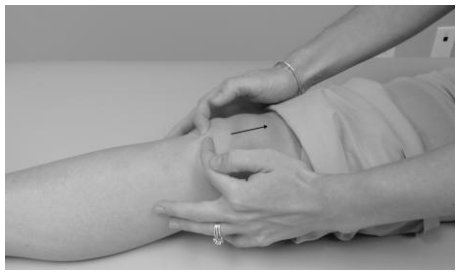
Phone (302) 655-9494 www.delortho.com Fax (302) 691-1478

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Patella (Kneecap) Mobilization

With the leg straight and the thigh relaxed, place finger of each hand on either side of kneecap. Gently apply pressure to move the kneecap side to side then up and down for 2-3 minutes. Prolonged pressure may need to be applied to get the kneecap moving if it is stiff. Perform 4-5 times a day.

Wall Slides (if unable to do heel slides)

Lie on your back near a wall with injured foot on the wall. Slowly slide your foot down the wall by bending at the knee. Use opposite leg to apply pressure to shin to help bend the knee. Hold for a count of 15 sec and repeat 5 times. Perform 3-5 times a day

