

**Grant H Garcia, MD**  
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## **POSTOPERATIVE INSTRUCTIONS**

### **Microfracture**

**\*\*Please note that the instructions provided below are general guidelines to be followed; however, any written or verbal instructions provided by Dr. Garcia supersede the instructions below and should be followed.**

#### **DIET**

- \*Begin with clear liquids and light foods (jellos, soups, etc.)
- \*Progress to your normal diet if you are not nauseated

#### **WOUND CARE**

- \*Maintain your operative dressing, loosen bandage if swelling of the foot and ankle occurs
- \*It is normal for the knee to bleed and swell following surgery – if blood soaks onto the ACE bandage, do not become alarmed – reinforce with additional dressing
- \*Remove surgical dressing on the third post-operative day – if minimal drainage is present, apply band-aids over incisions and change daily – you may then shave as long as the wounds remain sealed with the band-aid
- \*To avoid infection, keep surgical incisions clean and dry until the fourth day – you may shower by placing a large garbage bag over your leg starting the day after surgery
- \*After the fourth day, you may shower as long as the wounds are dry (no drainage on dressings or band-aid)
- \*NO immersion of operative leg (i.e. hot tub, whirlpool, pool, bath)

#### **MEDICATIONS**

- \*Pain medication is injected into the wound and knee joint during surgery – this will wear off within 8-12 hours
- \*Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle.
- \*Common side effects of the pain medication are nausea, drowsiness, and constipation – to decrease the side effects, take medication with food – if constipation occurs, consider taking an over-the-counter laxative
- \*If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed.
- \*Do not drive a car or operate machinery while taking the narcotic medication
- \* If you are having pain that is not being controlled by the pain medication prescribed, you may take an over the counter anti-inflammatory medication such as ibuprofen or naproxen in between doses of pain medication. This will help to decrease pain and decrease the amount of narcotic medication required. Please take as directed on the bottle.
- \*For 2 weeks following surgery take one 325mg aspirin to help prevent blood clot

#### **ACTIVITY**

- \*Elevate the operative leg to chest level whenever possible to decrease swelling
- \*Do not place pillows under knees (i.e. do not maintain knee in a flexed or bent position), but rather place pillows under foot/ankle
- \*Use crutches to assist with walking – your weight bearing status will be discussed with you after surgery

- \*Do not engage in activities which increase knee pain/swelling (prolonged periods of standing or walking) over the first 7-10 days following surgery
- \*Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks
- \*NO driving until instructed otherwise by physician
- \*May return to sedentary work ONLY or school 3-4 days after surgery if pain is tolerable

### **ICE THERAPY**

- \*Begin immediately after surgery
- \*Use icing machine continuously or ice packs (if machine not prescribed) for 20 minutes every 2 hours daily until your first post-operative visit – remember to keep leg elevated to level of chest while icing

### **EXERCISE**

- \*A continuous passive motion machine may be ordered for you and will be delivered to your home within one day of your surgery
- \*Use the continuous passive motion machine out of the brace for 6-8 hours per day. Specific settings for the CPM will be discussed with you following surgery
- \*Begin exercises 24 hours after surgery (quad sets and ankle pumps) unless otherwise instructed
- \*Discomfort and knee stiffness is normal for a few days following surgery
- \*Complete exercises 3-4 times daily until your first post-operative visit
- \*Do ankle pumps continuously throughout the day to reduce the possibility of a blood clot in your calf (extremely uncommon)
- \*Formal physical therapy (PT) will begin after your first post-operative visit

## **CONTACTING OUR OFFICE**

### **EMERGENCIES\*\***

- \*Contact Dr. Garcia at 206-633-8100 if any of the following are present:
  - Painful swelling or numbness (note that some swelling and numbness is normal)
  - Unrelenting pain
  - Fever (over 101° - it is normal to have a low grade fever for the first day or two following surgery) or chills
  - Redness around incisions
  - Color change in foot or ankle
  - Continuous drainage or bleeding from incision (a small amount of drainage is expected)
  - Difficulty breathing
  - Excessive nausea/vomiting
  - Calf pain

\*\*If you have an emergency after office hours or on the weekend, contact the same office number (206-633-8100) and you will be connected to our page service – this will contact Dr. Garcia or one of his physician assistants. If he is unavailable. Do NOT call the hospital or surgicenter.

\*\*If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

### **FOLLOW-UP CARE/QUESTIONS**

- \*If you do not already have a post-operative appointment scheduled, please contact the office immediately at 206-633-8100 to speak our Administrative Assistant or visit our website [www.grantgarciamd.com](http://www.grantgarciamd.com)
- \*Typically post-operative appointments are made for 10-14 days following the date of surgery
- \*If you have any further questions, contact the office directly.