POST-OPERATIVE INSTRUCTIONS  
QUAD/PATELLAR TENDON REPAIR  
Dr. Daniel A. Nicholson

MEDICATION

- One of three pain medications, Norco (hydrocodone), Ultram, or Tylenol #3 will be prescribed to you. Take as instructed and as needed.
  - Pain medication may cause constipation. You may take an over the counter stool softener (Colace, Senekot, etc) to help prevent this problem.
  - You should take these medicines with food or they may nauseate you.
  - You may not drive or operate heavy equipment while on narcotics.
- **DO NOT** take any medication with Advil or ibuprofen for **two weeks** after surgery as this may impair graft healing.
- Take one regular aspirin (325 mg) twice a day for 10 days unless you have been prescribed Lovenox, are on another blood thinner, or have a history of stomach ulcers.
- A sleeping pill may also be given, take as needed.
- **Resume all home medications unless otherwise instructed.**
- Call immediately to the office, (404) 255-5595, if you are having an adverse reaction to the medicine.

WOUND CARE

- Do not remove or unwrap your dressings and do not allow another person to remove your dressings. An exposed wound in physical therapy is **UNACCEPTABLE**.
- If you feel they may be too tight, you may loosen the ace wrap only.
- Dressings will be changed on your first post-operative visit and a new dressing applied. If they get EXCESSIVELY wet prior to this, meaning “soaked through,” contact the office.
- Until your first post-op visit, wrap the leg, **WITH BRACE**, in a large plastic garbage bag with tape at both ends to shower or bathe.
- Continue to use the bag or plastic wrap to keep incisions dry for at least 2 weeks after surgery.
- NO submersion of wounds (bath, hot tub, pool) is allowed until a minimum of 3 weeks after surgery.
CRUTCHES
- Toe touch weight bearing with your brace on the involved leg is allowed unless instructed otherwise after surgery to help with balance and stability.
- Crutches will be needed until your physical therapist and Dr. Nicholson deem them unnecessary. This decision will be based on strength in the involved leg and your ability to walk with a normal gait (heel to toe walking without a limp).

BRACE
- The post-operative IROM brace, locked in full extension, is to be worn at all times.
- It is necessary for even the simplest tasks such as going to the restroom to protect your knee while your muscles are inhibited.
- Dr. Nicholson will instruct you when to open the brace and discontinue the brace.

EXERCISE
- Following surgery three main goals exist:
  1. Full knee extension
  2. Quadriceps contraction and activation
  3. Control of pain and swelling.
- Keep the leg elevated for several days to help with swelling.
- DO NOT put pillows under the knee at any time. Instead, place them under your heel to ensure full knee extension.
- To help gain full knee extension, place a small rolled up towel under your ankle and push back of knee to touch the floor by contracting your quadriceps muscle.
- Depending on your limitations after surgery, several exercises will be beneficial for you at home: ankle pumps will be demonstrated to you following surgery and should be performed 3-4 times a day after surgery.
- Moving around after surgery will help diminish the risk of blood clots.

SLEEP
- Nighttime will probably be the most uncomfortable time. You should use the sleeping aid as prescribed to assist you in resting well.
- You should sleep in your post-op brace until your first post-op visit where you will get additional instructions depending on your progress.
- You may slightly loosen the straps to aid in sleeping if you feel they are tight.

COLD THERAPY
- Ice or cryo-cuff (if covered by insurance) should be used for comfort and swelling constantly for the first 24 hours. Never apply directly to exposed skin.
- After the first day, use 15-20 minutes every 2-3 hours.
- Always use after physical therapy to help with swelling and pain.
- A simple bag of frozen peas may be used as an inexpensive ice pack. Buy several bags of peas, place in a gallon size zip-lock bag making them about an inch thick and removing as much air as possible. Return to freezer, lying flat after you have finished.
BRUISING
- The lower leg may become swollen and bruised, which is normal. This is from the fluid and blood from the knee moving down the leg and should resolve in 10-14 days.
- **If you experience severe calf pain and swelling, call the office immediately.**

EMERGENCIES
- If you have an emergency contact Dr. Nicholson’s office at (404) 255-5595 and he will be contacted.
- Contact the office if you notice any of the following:
  - Uncontrolled nausea or vomiting, reaction to medication, inability to urinate, fever greater than 101.5 (low grade fevers 1-2 days after surgery is normal), severe pain not relieved by pain medication, redness or continued drainage around incisions (a small amount is normal), calf pain or severe swelling.
- **If you are having chest pain or difficulty breathing, call 911 or go to the closest emergency room.**

FOLLOW UP APPOINTMENT
- Please make your first post-op visit 5-7 after surgery if not done so already.
- **If you have any questions, please do not hesitate to call the office.**