



Xinning Li, M.D.



EXCEPTIONAL CARE. WITHOUT EXCEPTION.

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POST-OPERATIVE INSTRUCTIONS PATELLAR REALIGNMENT / RECONSTRUCTION OF MPFL SURGERY

BRACE / AMBULATION

- Your leg will be placed in the Bledsoe brace postoperatively. You will need to wear this brace at all times. It should be locked in full extension (0 degrees) until your first postoperative visit with Dr. Li.
- You will only be ambulating with Toe Touch weight-bearing (TTWB) only unless otherwise instructed. You must use your crutches.
- While in the recovery room, the PACU nurse will instruct you in putting on and taking off your brace, ambulating, climbing stairs, and other activities of daily life. Please listen to them carefully.
- Other Instructions:

WOUND CARE

- You may remove the Operative Dressing on Post-Op Day # 2
- KEEP THE INCISIONS CLEAN AND DRY.**
- Apply Sterile Gauze to the wounds. Please change this daily. Do not remove the Steri-strips. Please do not use Bacitracin or other ointments under the bandage.
- An ACE wrap may be used to help control swelling. Do not wrap the ACE too tight. You may be given a stockinette to place over your wound and under the brace – this is to help alleviate sweating under the brace.
- There may be a small amount of bleeding and/or fluid leaking at the surgical site. This is normal. The knee is filled with fluid during surgery, sometimes causing leakage for 24-36 hours. You may change or reinforce the bandage as needed.
- Use Ice or the Cryocuff as often as possible for the first 7 days, then as needed for pain relief. Do not wrap the Ace too thickly or the Cryocuff cold may not penetrate.
- There will actually be more swelling on days 1-3 than you had the day of surgery. This is normal. The swelling is decreased by using Ice or the Cryocuff. The swelling will make it more difficult to bend your knee, but once the swelling goes down, it will become easier to bend your knee.
- You may shower on Post-Op Day # 3 using a water-tight plastic bag over your knee. **DO NOT GET THE WOUND WET.** You may gently wash around in incision with a washcloth, then gently pat the area dry. Do not soak the knee in water. Do not go swimming in the pool or ocean until your sutures are removed.

FOLLOW-UP

- Please call the office to schedule a follow-up appointment for your suture removal, 10-14 days post-operatively.
- At your post-operative visit, Dr. Li will go over your surgery, show you arthroscopic photographs from your surgery, and outline your rehabilitation.

POST-OP

- Enclosed is a prescription for you to use post-operatively:
 - PERCOCET or OXYCODONE, a strong narcotic, is to be used only on an “as needed” basis for pain.
 - Please hold off on taking any Anti-Inflammatories (Advil, Motrin, Aleve, etc.) for the first 4-6 weeks after surgery until you check with Dr. Li.
- If you have any adverse effects with the medications, please call our office.
- If you develop a Fever (101.5), Redness or Drainage from the surgical incision site, please call our office to arrange for an evaluation.
- You may experience some low back pain due to muscle spasm from the epidural anesthesia. If so, apply heating pad to area and take an analgesic if you have not already done so.

EXERCISES

- The Bledsoe brace should be worn at all times for:
 - Walking
 - Sleeping
 - Straight Leg Raises
- Follow the instructions that the nurses gives to you:
 - Towel roll under heel
 - Isometric Quadriceps strengthening
 - Straight Leg Raises (in brace)
 - Active Flexion (bending) / Passive Extension (straightening)
- Goals include:
 - Walking with the knee in extension using crutches as needed
 - Ability to lock and unlock the Bledsoe brace
 - Obtaining full extension
 - Range of Motion: 0-90 degrees
- DO NOT TRY TO ACTIVELY STRAIGHTEN YOUR OPERATED LEG.
- You will not begin a formal Physical Therapy program until you have seen Dr. Li at your first post-operative visit. You will then be given a prescription for you Physical therapy rehabilitation. You will be attending PT approximately 3 times per week for 6 - 7 months post-operatively.

DRIVING

- If your Right Knee is the operative side, you MAY NOT DRIVE FOR 6 WEEKS. It is important to regain adequate Quadriceps control before operating a motor vehicle.
- If your Left Knee is the operative side and you drive an Automatic Transmission vehicle, you may drive a few days AFTER you finish taking your pain medication. It is important that you feel very confident in your ability to respond efficiently before attempting to drive.