Patient Name: [Patient Name]

Date of Surgery: [Date]

Procedure: Arthroscopic Meniscus Repair ([Left/Right] Knee)

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1. Wound Care

Keep the surgical dressings clean and dry. You may remove the outer bandage after 48 hours, but keep the adhesive strips (Steri-Strips) or waterproof dressings over the incisions until your follow-up appointment. Do not soak the knee in a bath, pool, or hot tub until cleared by your surgeon.

2. Weight Bearing and Bracing

You are restricted to **[Non-Weight Bearing / Partial Weight Bearing / Touch-Down Weight Bearing]** on the operative leg. You must use your crutches at all times when walking. You must wear your knee brace locked in full extension while walking and sleeping for the first [Number] weeks.

3. Activity and Physical Therapy

- Keep the leg elevated above the level of your heart to reduce swelling.
- Apply ice for 20 minutes every 2 hours while awake.
- Perform gentle ankle pumps frequently to prevent blood clots.
- Physical Therapy should begin within [Number] days of surgery.

4. Medications

Take prescribed pain medications as directed. Do not wait for pain to become severe before taking the first dose. If an aspirin regimen was prescribed for blood clot prevention, please follow the schedule strictly.

5. Red Flags (Contact Hospital Immediately)

- Fever over 101.4F (38.5C) or chills.
- Excessive redness, warmth, or foul-smelling drainage from incisions.
- Severe calf pain, swelling, or tenderness.
- Shortness of breath or chest pain.
- Pain not controlled by medication.

6. Follow-Up Appointment

Your follow-up visit is scheduled for: **[Date and Time]** at **[Location]**.

Surgeon Signature: _____