ORTHOPAEDIC SPECIALISTS OF MASSACHUSETTS

Post-Operative Instructions – MPFL Reconstruction

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Wound Care

- Please leave the dressing and hinged knee brace in place until your 1st follow-up appointment.
- You may shower on POD #3. Please put a plastic bag or Saran wrap around the knee brace to protect it from getting wet. If it does get wet, put a hair dryer on cool and dry the wet areas.
- The incision underneath the dressing is sterile, and the dressing does not need to be changed until you come back to the office for your 1st postoperative appointment.

Bracing

- The knee brace should remain on at all times, locked in approximately 30° of flexion, until your 1st follow-up appointment. This position helps keep the patellofemoral joint stable while the MPFL reconstruction heals.

Weight Bearing & Swelling

- Touch weight-bearing only on the operative leg, with the knee brace on and locked in approximately 30° of flexion. Use crutches at all times until instructed otherwise.
- Elevate and ice aggressively for the first 48–72 hours. Even if you feel good after surgery, try to take it easy for the first 2–3 days especially. Elevation is difficult with the knee brace on, and if this is not possible, focus on icing the knee, especially for the first 48–72 hours.

Pain Control

- 1000 mg Acetaminophen (Tylenol) and 600–800 mg Ibuprofen (Motrin/Advil) together 3 times a day with food, unless you have a contraindication to taking acetaminophen and/or ibuprofen.
- If needed: 5 mg Oxycodone every 4–6 hours (limit use).

Note: Blood clots (in the leg) are very rare after knee arthroscopy, but to decrease the risk of blood clots after surgery, I would recommend taking aspirin 81 mg (by mouth) twice daily with food for 6 weeks after surgery, unless you have a contraindication to taking aspirin.

Follow-Up

Recovery from an MPFL reconstruction requires patience and consistency.

Call 781-769-6720 with questions or concerns.