

YOUR **GROUP23** PATIENT HEALTH JOURNEY

SURGICAL PROCEDURE:

Surgical Features

Side: Left Right

Chondral Repair/Transplant: Medial Lateral
 Trochlea Patella

Meniscus Repair: Medial Lateral

Type of Meniscal Surgery:

Fracture: Yes No; Location:

Ligament Involvement: ACL PCL MCL LCL

Ligament Harvest Type: Autograft Allograft Both

Ligament Autograft Harvest Site:

LET Procedure

Posterior Lateral Corner

AMRI Restraining Procedure

Medial Patellofemoral Ligament

Osteotomy

Partial Knee Replacement

Other:



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Your **Rise Above** Patient Health Journey

Group23 asks that you:

Become an expert. We believe every patient at Group23 should be able to *understand and explain their diagnosis and surgical procedure*. We'll teach and provide information because *the more you know, the more you will understand the rehabilitation plan, and the better success you will have*.

See your rehabilitation plan as a Journey. Your Health Journey will begin by having you set your **Rise Above** goal(s). Goals establish a benchmark for measuring the success of treatment interventions and rehabilitation. Most importantly, they *ensure every decision reflects your priorities, not ours*.

Take an integrated Bio-Psycho-Social-Spiritual approach. You must recognize your injury, pain, and disability aren't *isolated in a physical dimension* of life. Consider your social situations, stressors, and overall mental well being, as it is inevitable your progress will be impacted by other areas of your life.



Now what?

- ✓ Go online to read about your surgical procedure at <https://www.group23.ca/surgical-journeys>.
Become an expert!
- ✓ Set your SMART goals
- ✓ Discuss with your Surgical Journey Navigator which Group23 services are recommended for you





Why do we care about goals?

- ✓ a good goal indicates you have **become an expert**, and actually understand the implications of your diagnosis
- ✓ a personal goal ensures every treatment decision reflects **YOUR priorities**, not ours
- ✓ they show when we have arrived at success, which will look different for everyone

Make your Rise Above Goal S.M.A.R.T

Specific | Measurable | Actionable | Realistic | Time Bound



Good S.M.A.R.T Goal

Example: Be able to play rec-level soccer three days a week, in two months.

- ✓ Specific
- ✓ Measurable
- ✓ Actionable
- ✓ Realistic
- ✓ Time Bound



Bad S.M.A.R.T Goal

Example: I want to get rid of my pain.

- ✗ Specific
- ✓ Measurable
- ✗ Actionable
- ✗ Realistic
- ✗ Time Bound

On my Surgical Journey, my Rise Above Goal(s) are:

1

2

3

Group23 Post-Operative Information


Incision Care

- After surgery you will have thick, white bulky dressing and steri-strips covering your incision sites. It is recommended you leave this dressing on for 48 hours. Keep the incision site and dressings dry during this time. After 48 hours the dressings can be removed and the steri-strips left to fall off on their own.
- The stitches are dissolvable. The surgeon will leave an excess of the stitch sticking out of the skin. You may trim this stitch slightly if it becomes bothersome or you may cover the stitch with a bandage to prevent irritation. The tails of your stitches will be removed at your first post-op visit with the surgeon
- If you have non-dissolvable stitches they will be removed between 10-14 days after surgery. If you will be away, some family doctors, urgent care centres or medicentres can remove the stitches for you.
- You may shower after the initial 48 hours. At this point the incision site and steri-strips can be exposed to water and soap. However, do not submerge the knee in water such as taking a bath or hot tub until you have been cleared by the surgeon which will be approximately 14 days after surgery.
- **Check for signs of infection** - A general feeling of being ill including fever, chills and sweating more than normal; as well as redness of the skin around the incision site that grows in size, a steady increase in pain and constant drainage of fluid from the incision site are signs and symptoms of infection. **If you are concerned about an infection call your surgical journey navigator at group23, call 8-1-1, or go to the emergency department at your nearest hospital.**

IN SUMMARY


Days 0-2

Incision Care Tips:

- Leave on the bulky white dressing
 - Keep dressing and incision sites dry
- 

Days 3-10

Incision Care Tips:

- Remove bulky white dressing
 - Trim stitch or apply bandage if irritation occurs
 - Incision site can be exposed to water and soap.
 - Avoid submerging the area in water such as a bath.
 - Check for signs of infection
- 

Days 10+

Incision Care Tips:

- Tails of stitches and non-dissolvable stitches will be removed
- The incision site will be checked
- If the incision site has healed, you may be cleared to submerge the knee in water.

Home Care

- Red Leg - An anti-septic solution is used on your leg for surgery. This will stain your leg red until it is washed off with water.
- Tensor - A tensor will be wrapped around your knee after surgery. Once you are home from the hospital you may re-wrap the tensor to ensure it is snug, but not too tight. The tensor can be use at all times with the exception of icing and showering.
- Sleeping - The most comfortable positions to sleep in after knee surgery are lying on your back with the leg elevated (put pillows under your knee and foot), or on your side with the surgical leg on top and a thin pillow between the knees.
- Driving
 - You must be off any medication that alters your judgement, slows you reaction time or makes you dizzy.
 - You must be off crutches.
 - Confirm with your insurance company if you are covered to be driving while wearing a splint or brace.
 - Ultimately you must be safe on the road and be able to control your vehicle in the case of an unpredictable event.
- Flying - This is dependent on your surgery type and medical history. If you are planning to fly within two weeks from your surgery, contact the surgical journey navigator. After two weeks is safe.

Activity Modification

- Weight-bearing will be modified in some capacity following surgery. The following will be filled out as to the recommendations specific to your surgery.
 - Initial weight bearing status:
 - Duration:
 - Progress to:
 - Duration:
 - Progress to:
 - Duration:
 - Special Instructions:

Bracing and Crutches

Immediately after surgery you may be required to wear a brace. The following details will be provided to you regarding the recommendations for your specific surgery.

The following brace is recommended immediately out of surgery.

- PCL Rebound Equivalent - Extra cost - Custom order
- Rebound Cartilage Equivalent - Extra cost - Custom order
- Hinged Knee Brace - No cost- provided in surgery
- Zimmer - No cost - provided in surgery
- No Brace is required

Duration:

Guidelines on usage:

Crutch use – You will be required to bring crutches with you or purchase some at the surgical facility.

*Group23 sells crutches

Range of Motion (ROM) Restrictions

- Extension (straightening):
- Flexion (bending):

Timeline:

Any other post-op information specific to your surgery:

Post-Op Exercises

Ankle Pumps - Perform 20 reps per hour
Move your foot forward and backward



Patellar Mobilizations - Perform 3 sets of 5 reps, 2 times per day
Side-to-Side

While seated with your leg out in front of you gently move your knee cap side to side.



Downward

- Sit in a chair with a 30 degree bend in your knee.
- Place the web of your hand on the top border of your knee cap.
- Push the knee cap down the leg in the direction of your toes. Return to the starting position. Repeat.

Range of Motion (ROM) - Work within you ROM allowances. While performing the exercises work up to the point where you feel a restriction but not through the restriction.

Prone Passive Flexion ROM - Perform 10 reps 3 to 5 times per day

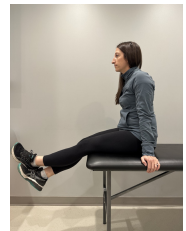
- On your stomach place the non-surgical leg under the surgical leg.
- Use the non-surgical leg to lift and lower the surgical leg through the ROM. Keep the muscles relaxed of the surgical leg.



Seated Passive Flexion ROM

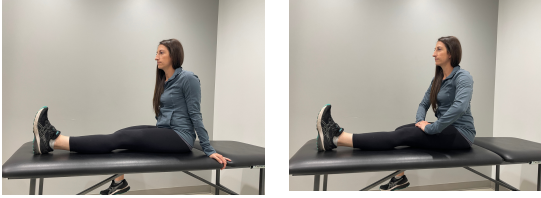
Perform 10 reps 3 to 5 times per day

- Sit on a chair. Take your non-surgical foot and place it behind the ankle of the surgical leg.
- Using your non-surgical leg, lift and lower the ankle of the surgical leg to passively bend and straighten the knee.



Knee Extension ROM - Hold 5-10 minutes once per hour

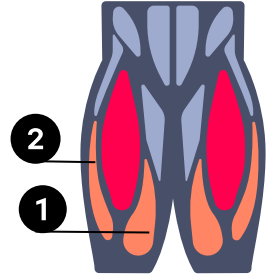
- Sit with your leg straight out in front of you with nothing under the knee. Allow gravity to pull your knee into extension while you focus on relaxing the muscles.
- If you're feeling nothing with gravity alone, you can progress to adding gentle downward pressure on the thigh with your hands.



Quad Work

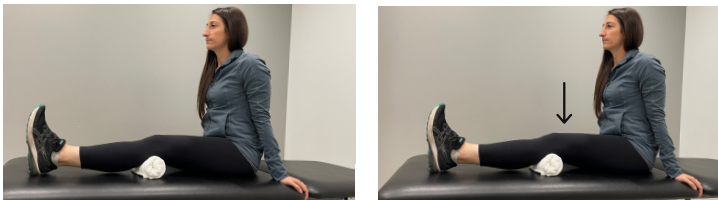
It is important to work on proper quad activation patterning immediately after surgery. The reason for this:

- To aid in getting the knee straight
- To improve your quadriceps strength
- To help with your transition to walking



Quad Activation - Perform 5-10 reps per hour

- Sit on a surface with your leg out in front of you in a straightened position.
- Place a rolled up hand towel under your knee.
- Place one finger on your Vastus Medialis Obliquus (#1 on diagram) and other finger on Vastus Lateralis (#2 on the diagram).
- Attempt to engage your quads; Vastus Medialis Obliquus first and Vastus Lateralis second while pushing your knee down into the towel.
- Remove the towel if your knee is close to being fully straight.



*****It is important to check with your Surgical Journey Navigator, Athletic Therapist or Physiotherapist that these exercises are appropriate for you*****

Group23 Navigation Toolkit

Pain Management- The first three days after surgery is when you will experience the most acute pain. Ensure you are consistent with your pain management tools during these days. It is normal to have swelling and bruising into the knee, lower leg and foot. It is also normal to have effusion (swelling inside the knee joint).

○ *Pain Management*

Icing For a duration of 15-20 minutes every hour

- ❑ Ice Pack - Ice cubes or crushed ice in a bag can be placed directly on the skin. A tensor can be added around the ice bag for compression.
- ❑ Ice Pack (chemical pack) - This should be used with a barrier between the pack and the skin such as a damp cloth. Again you can add a tensor for compression.
- ❑ Commercial ice and compression machine (ex: Cryocuff, Bregg Polar Care Wave Cooling Unit etc.)

Exercises

- ❑ By activating the muscles in the leg, you improve circulation and lymphatic drainage which helps to reduce the swelling.
- ❑ Bringing your knee through the range of motion will aid in decreasing the stiffness at the joint due to the tightness in the surrounding muscles.

Compression -Can be used to minimize excessive swelling at the knee, lower leg and foot.

- ❑ A compression sleeve
- ❑ A tensor can also be worn. Start below the calf and work up to mid thigh. Make sure it is snug but not too tight.

Now that we know where we're going, how do we get to your SMART goal destination?

All the following tools are options on your Journey, and tracking results will help us develop your personal rehabilitation plan.

Did it help?

Did it last?

Did it help?

Did it last?

Did it help?

Did it last?

Prescription Medications Take as directed by ordering provider

- Vimovo - To reduce inflammation, pain and fever
- Tramacet - To manage pain
- Lyrica - To treat pain that is caused by nerve irritation
- ASA - For blood clot prevention
- Ketotifen - This may be prescribed if you have a known history of increased scarring

It is common with the above medications to have side effects including nausea, dizziness, heartburn, and bowel disruptions. You may use over the counter medications as needed to combat these side effects. Check with your pharmacist for specific recommendations and instructions.

○ **Bracing**

- Over the counter knee braces and patella trackers
- Custom stabilization braces
- Dynasplint to address range of motion deficits

Specific recommendations:

○ **Physiotherapy**

Therapy can be started in the first week to ten days following surgery

- Physiotherapy, with individualized Group23 program

Did it help?

Did it last?

Did it help?

Did it last?

Did it help?

Did it last?

○ *Specialized Therapies*

- AlterG training - This is an anti-gravity treadmill which can aid in getting you weight bearing earlier in your rehabilitation.
- Blood flow restriction training - A tool to build muscle mass earlier on in rehabilitation when adding resistance is not yet appropriate.
- NMES - Muscle stimulation- This device is used to aid in muscle activation and re-training

○ *Massage*

After surgery massage is a great way to decrease swelling early on and at later stages can address scar tissue and tight muscles.

- Massage therapy, with individualized Group23 program
- Self massage: foam roller, lacrosse ball, Tiger Tail - as prescribed by healthcare professional

○ *Health & Wellness*

Health coaches have training and expertise in areas such as nutrition, exercise, stress management and lifestyle change.

- Free Group23 Health & Wellness needs assessment

Did it help?

Did it last?

Did it help?

Did it last?

Did it help?

Did it last?

○ Injections

There may be a role for an injection if the mechanical structure is repaired but there is ongoing pain or swelling. A referral can be made if this is a recommended treatment option for you.

Ultrasound guided injection therapies

- Hyaluronic acid
- Hyaluronic acid and cortisone combination
- Cortisone
- Non-steroidal anti-inflammatory injection

Regenerative therapy

- Platelet rich plasma (PRP)
- Autologous protein solution



REMEMBER: You are on a personal journey, and while all these tools are available to you, they won't all make sense for your individual destination, the nature of your surgery, and your personal finances.



KNOW: We practice sports medicine differently and ask that *you take responsibility and actively participate* in this Surgical Journey. Our integrated clinic believes in **comprehensive care** and **provides everything you need** for your rehabilitation: physiotherapy, health coaching, bracing, x-rays, injections, and other elite treatment options including blood flow restriction and an anti-gravity treadmill.

Did it help?

Did it last?

My Health Journey team at Group23 is:

Surgeon:

Othopaedic Assistant:

Administrative Assistant:

Surgical Journey Navigator:

Physiotherapist:

Other:

Surgical Appointments at Group23

With the Surgeon

- Initial Consultation- This is an assessment of the injury, diagnosis and discussion of treatment options whether that be surgical or non-surgical.
- Follow-up at 2 weeks after the surgery to inspect the incision site, check your progress and discuss future care.
- Approximately 9 to 12 months after surgery to be provided clearance for return to work/activity/sport.

With the Group23 Surgical Team

These appointments are available to ask questions, learn more about the surgery and rehabilitation, learn more about the navigation tools available to you, discuss your progress, and get outcome measurements.

- Pre-Op Phone Call
- Post-Op Phone Call
- Post-Op Appointment
- 6 weeks
- 3 months
- 6 months
- 9 to 12 months with the Surgeon

Note that these timelines may be adjusted for individual needs

Notes & Questions:





KNOW: although the journey after surgery is long, have comfort knowing that you have a well planned **Rise Above** road map, many treatment options and the ongoing support of **Group23**. Keep going!

Group23 Sports Medicine

p: 403-284-4040

f: 403-284-5656

<https://www.group23.ca/surgical-journeys>



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Disclaimer: The information contained within this protocol is intended for use under the direct supervision of a qualified health professional. Failure to adhere to proper medical supervision may lead to further injury or negative patient outcomes. Group23 Sports Medicine is not responsible for persons using these recommendations outside of its care and supervision.

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