



**Michael Pensak, M.D.**

**530 Lakehurst Rd, Suite 101  
Toms River, NJ 08755**

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## **Post-Operative Instructions Quadriceps Tendon Repair**

### **Bandages & Ace Wrap:**

Your post-operative dressing has several layers you need to understand in order to properly care for your ankle for the two weeks following surgery. Your incision was closed with multiple layers of stitches, only the outer layer will need to be removed in the office in 7-10 days.

The first layer is gauze and non-adherent mesh that is laid right over the incision. The second layer is a large white fluffy dressing that is loosely wrapped around your knee. Occasionally, there will also be a small amount of blood, which is nothing to worry about. The third and final layer is an ace bandage. Your knee will be protected in a knee immobilizer to keep your knee straight and prevent it from bending. It is absolutely essential that you don't bend your knee until I permit you to do so as you will ruin the surgical repair.

While you can loosen the ace wrap after surgery, please do not remove the knee immobilizer without my permission.

### **Washing & Bathing:**

You should keep the dressing clean and dry until I see you in the office following your surgery. A watertight plastic bag with rubber bands around the opening work well while showering. However, some find it easier to take a bath and rest the extremity outside of the tub. The wound may not get immersed in any still bodies of water (bath, pool, hot tub, lake, ocean, etc...) until 10-14 days after your surgery. Immersion in water prior to this can cause the wound to breakdown or get infected.

### **Motion, Ice & Elevation:**

It is extremely important that postoperative swelling is minimized so that your lower extremity does not get stiff. To help prevent swelling it is important to frequently apply ice and keep your leg elevated above your heart level for the first 48 hours after surgery. An ice pack from a store of cubes from your freezer placed in a ziplock bag work well. These should always be wrapped in a small towel like a washcloth and then applied to the dressing, 10 minutes on the front and 10 minutes on the back. This should be done roughly once an hour while awake. Never leave the ice on for more than 20 minutes and if the cold sensation becomes painful remove it immediately. The best way to achieve this is with the frequent application of ice and by keeping the foot elevated. I would also like you to wiggle your toes as much as possible to prevent them from getting swollen.

### **Physical Therapy:**



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All patients will need formalized physical therapy following this surgery to prevent scarring and to maximize your range of motion and strength. When you are seen at your first post-operative appointment I will decide when your therapy will start.

**Follow up appointment:**

We try to give all of our patients a follow-up office visit at the time we schedule your surgery. Sometimes I find things or do things I did not anticipate during your surgical procedure, therefore I may want to see you in the office sooner than originally planned. Typically I want to see my patients in the office 7-10 days after surgery to check your wound.

**Follow up appointment:** \_\_\_\_\_

**Medications:**

I will usually prescribe the narcotic Oxycodone rather than Percocet so that you can supplement with Tylenol on the side and not have to worry about excessive Tylenol consumption. Oxycodone is Percocet without the Tylenol. This medication should be taken every 6 hours at the dose prescribed. However, you may supplement with Ibuprofen and/or Tylenol every 6 hours, offset by three hours from the narcotic. For example, in a given 24 hour period, you would take Oxycodone at 6, 12, 18 and 24 hours and the Ibuprofen and/or Tylenol at 3, 9, 15, 21. This way, you have medication on board every 3 hours. I find that it leads to better pain relief. If you were ever told that you can't take non-steroidal anti-inflammatories which is the class of medication Ibuprofen belongs to, or that you can't take Tylenol, then simply stick with just the narcotic. Tylenol and Ibuprofen should be taken in accordance with the directions on the bottle.

Some patients, when taking the first few doses of Oxycodone, may experience nausea or an episode of vomiting. To prevent this, take the medicine with food and be patient while the medicine begins to work. Usually, after the first few doses the nausea will go away. This medication may also cause skin itching and a slight rash. If either of those happen please notify us but they will usually subside with Benadryl so long as you have no contraindications to taking that medication.

**What to watch out for:**

- Pain that is increasing every hour in spite of the pain medication
- Drainage from the wound more than 2 days after surgery
- Increasing redness around surgical site
- Pain or swelling your surgical site
- Fever greater than 101
- Unable to keep food or water down for more than one day

**Who to call for questions or problems:**



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If you are having problems or there are questions you need answered then please call our office at 732-349-8454 and our staff will assist you. Our hours of operation for our phone room are as follows:  
Monday through Thursday 8:30am- 4:30pm and Friday 8:00am – 4:00pm.

We realize that after surgery some problems or questions are urgent and cannot wait until normal working hours. Under these circumstances we have a service that will get the message to a doctor on call for our office by calling the main number 732-349-8454.

**\*\*\*If an emergency were to occur please go to the nearest ER for immediate attention.**

**Wishing you- All the Best,  
Michael Pensak, M.D.**