

Sports Injury and Joint Replacement Surgery for the Hip and Knee

TIBIAL OSSICLE RESECTION FOR OSGOOD SCHLATTERS POST-OPERATIVE PROTOCOL

General Guidelines

- Tibial ossicle resection are usually performed on day-only basis
- Supervised physical therapy can be commenced immediately post-operatively
- Braces are routinely used

White compression stockings

You may stop wearing the white compression stockings after 24-48 hours. This compression stocking helps prevent a blood clot from forming in your legs. Once you are walking frequently you will no longer need the stocking. If you develop lower leg swelling, tenderness, and/or redness, please contact Dr Awwad's office or the hospital.

Dressings

The bulky encircling dressings (crepe bandage, velband and pads) may be removed the day after surgery. The small adhesive dressings should be left intact. To shower, cover the surgical knee and dressings with plastic cling wrap. Prior to discharge from hospital, an appointment will be made to see a nurse for a dressing change and wound check between 1-2 weeks post-operatively.

Ice and Elevation

The leg should be intermittently elevated and an ice pack used for 72 hours post-operatively to assist with swelling and pain. Ice packs should be applied for 20-30mins/hr. After 72 hrs, ice packs are no longer required, although can be safely continued and their use is very helpful for pain and swelling.

Pain Medications

The anaesthetist will individualise and organise the appropriate pain relief for patients. Commonly required medication are panadeine forte, tramadol, paxia and endone.

The routine use of anti-inflammatories is not recommended post-operatively, unless directed by Dr Awwad.

General Progression of Activities of Daily Living

- Driving may commence 24 hrs after surgery and if not taking strong pain killers
- Crutches are not usually required
- Return to work as directed by Dr Awwad based on work demands

Normal Expectations

It is normal to have moderate pain and swelling post surgery.

Precautions

Patients should contact Dr Awwad's office or the hospital the operation was performed in, if they develop high temperatures, worsening skin redness, worsening calf, knee or thigh pain and swelling and excessive bleeding or ooze from the incision sites.

Exercise

The exercise programme outlined on the following pages can be safely followed to maintain range of motion and muscle strength in the recovery period post-operatively.

Progression from Initial to Intermediate to the Advanced exercises should proceed when the formed programme is mastered with ease.

Specific Rehabilitation Protocol

Weeks 1 - 2

- Mobilise partial weight bearing
- Zimmer splint/ROM knee brace for comfort
- ROM exercises 0-90 degrees with active flexion and passive extension

Weeks 3 - 6

- Progress to full weight bearing by 6 weeks
- Quads control exercises
- ROM exercises 0-130 degree

Weeks 6 - 12

- Full weight bearing out of brace
- Full ROM exercises active and passive
- Strengthening

Week 12+

- Begin jogging and sport specific activities

Do you still have a question about your recovery that has not been answered within this document?

Please contact Dr Awwad's office prior to your surgical date at: awwadadmin@orthosa.com.au

Sometimes we may miss a question that is important to you. If so, please feel free to email us your feedback so that we can improve our service to you and future patients – awwadadmin@orthosa.com.au



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APPOINTMENTS AND ENQUIRIES

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Ask **Dr Awwad** to clarify your restrictions prior to surgery to avoid disappointment.