



**STERLING RIDGE
ORTHOPAEDICS
& SPORTS MEDICINE**

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POST-PROCEDURE INSTRUCTIONS
MANIPULATION UNDER ANESTHESIA (MUA) vs
LYSIS OF ADHESIONS (LOA)

**PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION
IF NECESSARY – DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE
HOSPITAL OR VIA PHONE TO DR. EILERS STAFF AFTER ARRIVING HOME**

OFFICE NUMBER: 832.698.0111

WHAT CAN I EXPECT AFTER THE PROCEDURE?

- Pain, swelling, and bruising are not unusual after surgery.
- It is normal to feel drowsy, dizzy, or weak 24-48 hours afterward.
- An upset stomach (nausea), vomiting, fatigue, and a low-grade fever (not over 101.4°F) are possible due to medication you received during surgery. These usually improve within 24 hours.

ICE THERAPY

- Begin immediately after surgery and continue until the first post-operative visit.
- If using a 'cryo-cuff' or similar ice/compression device, use as directed in the instruction manual.
- When using "real" ice, avoid direct skin contact > 20 mins to prevent damage/frostbite of skin.
- In either case, check the skin frequently for excessive redness, blistering or other signs of frostbite.
- Remember to keep the extremity elevated while icing when able.

WOUND CARE (for lysis of adhesions only)

Wash your hands before and after caring for your incision

- Loosen bandage if swelling or progressive numbness occurs in the extremity.
- It is normal for the wound to bleed and swell following surgery – if blood soaks onto the ACE bandage, reinforce with additional gauze dressing for the remainder of day and check again.
- Keep the dressings clean and dry, and do not remove, for 2 days after surgery.
- On post-operative day 2, remove dressings (Thursday if surgery on Tuesday, Sunday if surgery on Friday).

- It is ok for water to run over the incisions in the shower, but do not soak or submerge the incisions in a bathtub, hot tub, or pool until completely healed (about 3-4 weeks).
- Redress incisions with gauze or band-aids after you shower, unless instructed to do otherwise. Rewrap with ACE bandage over the knee to keep brace from rubbing on the incisions.
- Do not use topicals such as Neosporin or hydrogen peroxide.
- If you have stitches, they will be removed 10-14 days after surgery.
- If you have Steri-strips over your incisions, do not remove. Leave them on until they fall off on their own.
- Call the office if you have any questions/concerns regarding the incisions.

ACTIVITY

- Increase your activity each day as you feel comfortable.
- If procedure was done on your knee, elevate as much as possible for swelling. Do not place pillows under knees (i.e. do not maintain knee in a flexed or bent position), but rather place pillows under foot/ankle.
- **Weight-bearing status:** weight bearing as tolerated through operative extremity.
- Do not drive until your surgeon says it is okay. Do not drive if taking narcotic pain medications.

PHYSICAL THERAPY

- You will begin physical therapy the same day as the procedure, and daily for thereafter for the first week. Call our office if you do not already have a physical therapy appointment set up.
- Participate in physical therapy and fulfill the home exercises as instructed by the physical therapist. It is crucial to perform your home exercises/stretchers several times every day to help maintain motion and prevent scar tissue recurrence.
- Stiffness and discomfort of the operative extremity is normal for a few days following surgery
- Do ankle pumps (15-20) at regular intervals during the day to reduce the possibility of a blood clot in your calf.

BRACE or SLING

If procedure done on the knee:

- Wear the brace and use crutches until the nerve block wears off (1-2 days). Keep the brace locked in full extension at all times when upright or ambulating.
- Remove the brace for sleep and when sedentary.
- Once the nerve block wears off, discontinue the brace and crutches, and bend the knee as much as possible.

If procedure done on the shoulder:

- Wear the sling until the nerve block wears off (1-2 days).
- Remove the sling when sedentary to work on shoulder ROM exercises.
- Once the nerve block wears off, discontinue the sling and use the shoulder/arm for normal activities
- Please contact our office and ask to speak with DME personnel with any sling or brace questions.

DIET

- Drink plenty of fluids. If you are taking pain medication, do not drink alcohol.
- Start by drinking small amounts of fluids, such as water, clear carbonated beverages, tea, or soup.
- Gradually add bland foods to your diet, such as dry toast or crackers.
- Start with light meals. Resume your regular diet as you feel comfortable.
- Pain medications can cause constipation. Eat fiber (fruits and vegetables) and drink plenty of fluids.
- Take the prescribed stool softener as directed if taking narcotic pain medications.
- If loss of appetite following surgery, use Boost or Ensure meal replacement shakes for nutrition.

EMERGENCIES

- Contact the office if you are having any of these symptoms:

- Painful swelling or numbness that progressively worsens
- Fever of 101°F (38°C) or higher
- Unrelenting pain
- Persistent nausea and/or vomiting
- Excessive bleeding or fluid from the surgical site
- Symptoms of deep vein thrombosis (DVT) such as swelling, redness, warmth, or pain in your calf
- Inability to urinate
- Increased drowsiness from pain medication. Stop taking pain/narcotic medication if you become too drowsy
- Increased or foul-smelling drainage from incision site
- Significant redness, tenderness, or swelling around the incision
- Separation of the skin closures

IF YOU HAVE A NEED THAT REQUIRES IMMEDIATE ATTENTION, PROCEED TO THE NEAREST EMERGENCY ROOM OR CALL 911