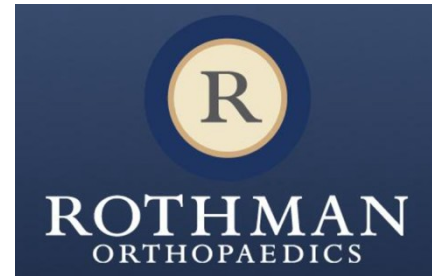


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Anterior Cruciate Ligament (ACL) Reconstruction Post-Operative Instructions

What is the recovery period like?

- Brace
 - You will wear a long brace on your leg, known as a hinged knee brace, and use crutches. You will wear the brace, locked straight for 2-6 weeks while walking. The brace will be unlocked depending on your quadriceps strength. This will be determined by the Physical Therapist and your surgeon.
 - While resting, it is ok to remove brace. However, brace must be worn while sleeping or bearing any weight.
 - You will then transition to the functional brace at 6 weeks, continue its use until you have regained quadriceps strength. Again, this is will determined by your Physical Therapist.
- Weight bearing precautions
 - Immediately after surgery you will have crutches with the brace locked straight. ***You may put some weight on the surgical leg until the first post-op visit, day 10-14.
 - After the first post-op visit, you'll be informed how much weight you can put on the leg. Typically, you can put as much weight on the leg as comfortable in conjunction with crutches.
- Physical Therapy
 - You will **start formal PT as soon as you feel comfortable**, typically within the first couple of days following surgery, just prior to your first post-op visit. You will go 2x/week for about 6 months.
 - Prior to surgery, you should schedule your first appointment with PT. Please contact the office for recommended PT offices.
 - Dedication and attendance to your sessions are critical to your recovery.
 - Prior to, and in addition to formal PT, do the following home exercises:
 - Quad strengthening: start with quad sets, then transition to straight leg raises
 - Quad sets: 3 sets of 10 performed four times a daily.
 - Sit or lie on your back with leg straight. Tighten your quadriceps muscle on the front of the thigh. Hold for 3 seconds, relax.
 - Place a rolled towel under your ankle while doing this and concentrate on driving your knee into the floor to get your leg straight
 - Straight Leg Raises: 3 sets preformed four times daily.
 - Lie on your back with leg straight, flat on the bed. Start by tightening your quads, lift your leg off the bed until your heel isn't touching it anymore. Lower your leg down. Repeat as tolerated, work up to 10.
 - Heel pumps: 3 sets preformed four times daily.
 - Sit or lie on your back with leg straight. Bend your foot up and down at your ankle joint, pumping the foot. Complete 10 pumps.

- Return to Play Assessment
 - At approximately 7 months post-operatively you will undergo a functional sports assessment where a physical therapist puts you through a battery of sports specific tests to evaluate your progress in therapy. If there are any areas that need improvement a specific program will be designed to help correct these deficiencies.

*****IF YOU HAD MENISCUS REMOVED IN ADDITION TO THE ACL RECONSTRUCTION:**

- This procedure does not change the above protocol.

*****IF YOU HAD MENISCUS REPAIRED IN ADDITION TO THE ACL RECONSTRUCTION:**

- Do not bear any weight on surgical leg until your first post-op visit. Further weight bearing precautions will then be discussed, but often you will not bear weight for the first 4-6 weeks
- DO NOT flex (bend) the knee past 90 degrees for the first 6 weeks.

INSTRUCTIONS FOR IMMEDIATELY AFTER SURGERY:

- Activity
 - Apply ice to your knee but keep the bandages dry
 - Elevate your leg on 2-3 pillows or rolled up towels placed under the **heel** so that the heel is elevated higher than your knee. This will help reduce swelling and achieve full extension of the knee. **Avoid pillows under the knee.**
 - For the first 1-2 weeks after surgery, the **most important goal is to regain the ability to fully straighten the knee.** It is much more important initially than being able to bend the knee.
 - Follow the weight bearing precaution guidelines above.
 - Start your home exercise program
- Bandage and Incision Care
 - Under your brace is an ace wrap- leave this ace wrap on for the first 2-3 days. You may then remove the ace wrap. You will have a layer of bandaging under the ace wrap. You can remove this dressing. You will see a yellow material called xeroform. You may remove this material. You can place band-aids over the small incision sites over the black suture material. The black sutures will be removed at your post-operative visit.
 - You will notice that one of the incision sites will have suture buried underneath the skin. Please cover this area with a bandage. You may see two strands of clear suture material. These will be removed at your first post op visit. Please leave rectangular steri-strips in place until your first post op visit.
 - You may re-apply the ace wrap as this helps to decrease swelling.
 - Do not apply creams, ointments, or lotions to your incisions.
- Showering
 - You may shower after you have removed the ace wrap.
 - **Do not get the incision or brace wet,** however, you must wear the brace when standing. You may use a plastic bag to cover the bandaging and brace so that this does not get wet. You should use a shower chair, or if you have a bathtub-shower, you can sit in the tub. If you take a bath, keep the leg out of the bath. The leg should not be submerged.
- Driving
 - You may not drive while taking pain medication. In addition, if it is your right knee that had surgery, you will not be able to drive for approximately 6 weeks after surgery or until the brace is removed.
- Normal sensations after surgery
 - Pain
 - Swelling and warmth up to 2 weeks
 - Small amounts of bloody drainage for first few days

- Numbness around the incision area
- Bruising
- Low grade temperature less than 101.0 for up to 2 days after surgery.
- Small amount of redness to the area where the sutures insert in the skin
- **IF ANY OF THE FOLLOWING OCCUR, CONTACT THE OFFICE IMMEDIATELY**
 - Calf pain or swelling in either leg
 - Change is noted to your incision (i.e. increased redness or drainage)
 - Temperature greater than 101.0
 - Fever, chills, nausea, vomiting or diarrhea
 - Sutures become loose or fall out and incision becomes open
 - Drainage becomes yellow, puss like or foul smelling
 - Increased pain unrelieved by medication or measures mentioned above.
- Post-op visit
 - Schedule for 10-14 days post-op. Please arrive 30-45 minutes early for x-rays.

PAIN MANAGEMENT

ORAL PAIN MEDICATIONS

- Tylenol 500 mg
 - Start by taking one tablet every four to six hours when you arrive home after surgery so you have some medication on board when the block wears off. You should take this on a regular schedule for the first few days after surgery
- Naproxen 500 mg
 - Take 1 tablet twice per day to help with pain and inflammation. You will take this for 2 weeks.
- Tramadol 50 mg
 - This is a non-narcotic pain medication. You can take this medication every 4-6 hours as needed for moderate level pain (4-7).
- Oxycodone 5 mg
 - This is a narcotic medication. You may take one tablet every 4-6 hours as needed for severe level pain (8-10) if the Tylenol and Tramadol medication does not control your pain.

SIDE EFFECTS OF THESE MEDICATIONS INCLUDE DROWSINESS AND CONSTIPATION. YOU SHOULD NOT DRIVE OR DRINK ALCOHOL WHILE TAKING THESE PAIN MEDICATIONS.

• OTHER MEDICATIONS

- Aspirin 81mg
 - This medication is used to prevent blood clots. It should be taken twice a day for 4 weeks.
- Zofran 4mg
 - This is a nausea medication that is only taken if you feel nauseous.
- Pantoprazole/Omeprazole 40mg
 - This medication is to protect your stomach while you are on the Naproxen
- Colace 100mg
 - This medication is for post-operative constipation.
 - Take this medication twice daily as needed for constipation.

• ICE MACHINE

- Recommend using **1 hour on, 1 hour off for the first 2 days after surgery** *while awake*
- Do not place pad directly on skin – make sure there is a barrier such as a t-shirt or towel

- After the first 2 days you may use the ice machine as needed for comfort
- If you did not opt for the ice machine, you may use ice packs on the surgical area for 20-30 minutes every 1-2 hours