



ACL Reconstruction Post-operative Instructions

Diet

Advance with solid foods as tolerated.

Bandages

After 72 hours you may remove your dressings and place small band-aids to cover incisions sites. You may change the band-aids as necessary. Do not clean your incisions with peroxide, alcohol or ointments. Do not scrub or soak your incisions in water.

Bathing/Showering

You should keep your surgical site dry until your stitches are removed at your first post-operative visit. If you do shower please cover your incisions with a waterproof bandage or plastic.

Activity

Upon waking up from anesthesia you have a surgical dressing on your leg and a knee brace that has hinges. The brace is adjustable, but this will be locked in extension for your procedure. Unless otherwise directed, you may bear weight on your operative leg as long as you have your knee brace locked in full extension. You will be given a set of crutches to use. Elevate your leg on 2-3 pillows to minimize swelling and throbbing.

When you are not walking you may take off your brace to work on range of motion. A Continuous Passive Motion machine will be rented for you if your insurance allows. This machine allows you to rest in bed with your operative leg supported. The machine moves your knee gently and continuously preventing stiffness and reducing pain. The CPM machine should be used twice daily, 2-3 hours at a time. The settings should be set initially 0-45 degrees, increasing the flexion by 5 degrees every time you use it. The brace should be removed while using the machine, otherwise the brace stays on for all other activities, even sleeping.

You may work on heel props 3 times daily. Heel props are very helpful in helping you regain full extension. You can roll up a large towel or a stack of book to “prop” the heel up, allowing the back of the knee to sag downward. Alternatively, you can sit in a chair, propping the heel on a second chair facing you, with enough space between the chairs to allow the knee to hyperextend.

Medications

Most patients have a nerve block prior to surgery to help with post operative pain. This block provides significant pain relief in the early period, but it will wear off 12-24 hours after surgery. Your leg will remain weak for the duration of the nerve block. The block will provide relief of pain in the front of the knee, but may not provide significant relief for the back of the knee.

A pain medication will be given to you to be used after surgery. It is very important to stay ahead of the pain by taking the medication prior to the onset of severe pain. Once you start to regain sensation in the foot and toes, we advise that you take the pain medicine. Do not wait until you hurt to take your pain medicine. Some pain medicine can cause nausea and constipation. Please take this medicine with food. You may be prescribed a medication to prevent nausea. You may need to take a stool softener or laxative to prevent constipation.

Comfort measures

Apply ice to your operative knee for 20mins 4 times a day. This is an excellent way to diminish pain and swelling after surgery. It is advisable to get up and move around as much as you can tolerate after surgery, this will help prevent blood clots. However, when you are not moving around you should keep your leg elevated above the heart level at least for the first three days after surgery. A cooling system will be given to you, otherwise use a large bag of ice. You may be prescribed a blood thinner to take after surgery to further prevent blood clots.

Problems

Your knee may have swelling, soreness and bruising for the first week. This is to be expected.

Please contact Coastal Orthopedics if you have any of the following:

1. Severe pain
2. A temperature above 101 degrees
3. Pain, redness or significant swelling in your knee/leg

Appointment

You will need to make a follow up appointment for 7-10 days after surgery. Physical therapy will be prescribed after you first post-operative visit.

Please call 978-927-3040 with any questions.