Post Operative Instructions Anterior Cruciate Ligament Reconstruction Jason Browdy, M.D.

You have just had an arthroscopically assisted anterior cruciate ligament reconstruction. Following these guidelines should give you the best chance for a quick recovery.

Diet: Advance to solid food as tolerated.

Bandages: Leave your dressings on until you follow up in the office. If

you leave the surgery center with a cooling pad, you may

remove it and replace it as needed.

Bathing/Shower: You should keep the surgical site dry until you have seen Dr.

Browdy in the office. You should consider sponge bathing for the first 7 to 10 days after surgery. If there is no drainage from any of your incisions one week after surgery, you may start to

shower

Activity: You will leave the surgery center with a knee brace that has

hinges at the knee. The brace is adjustable: a specific range of motion can be set on the brace, or the brace can be locked in a specific position. Unless otherwise directed, you may bear weight on your operative leg as long as you have your knee brace locked in full extension. However, you should use

crutches and your knee brace until instructed otherwise.

Generally speaking, you should use crutches and the brace locked in extension until you gain good control of your quadriceps, which is usually within about two weeks after

surgery.

When you are not walking, you may unlock the brace (allowing full range of motion) to work on your knee range of motion. In addition to this, you should remove your brace completely up to five times a day to work on heel props. Heel props are very



Activity (cont.):

helpful in helping you regain extension. You can roll up a large towel or use a stack of phone books to "prop" the heel up, allowing the back of the knee to sag downward (see the picture above). Alternatively, you can sit in a chair, propping the heel on a second chair facing you, with space between the two chairs, allowing the knee to hyperextend. Each time you do your heel props, you should spend about ten minutes on each session.

You should also perform ankle pumps on a regular basis to prevent blood clots. You will likely leave the surgery center with compression hoses on each leg. It is advisable you use the hose on both legs for two weeks, and then use the hose on the operative leg as much and for as long as you desire to help keep swelling down.

Medications:

Many patients elect to have a "block" prior to surgery to help with post-operative pain relief. This block provides significant pain relief in the early post-operative period, but it will wear off 12-24 hours after surgery. Your leg will likely remain weak for the duration of the nerve block.

Usually, the block provides pain relief for the front of the knee, but will not provide significant relief for the back of the knee. If you had a hamstring reconstruction, you will likely have discomfort in the back of the knee.

You will be prescribed a narcotic pain medicine to help with control the pain you might experience after the block wears off. 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 toes or foot, it is advisable to take your pain medicine - do not wait until you hurt to take your pain medicine.

You may be given two different pain medications. The purpose of this is to give you more than one option. If one medicine causes unpleasant side effects, you may try the other medicine.

Pain medicine can cause nausea, so take the medication with food. You may be given a prescription to deal with nausea. You do not need to fill this prescription, but you should keep it handy in the event you need it.

Medications (cont.):

Unless advised otherwise, please start taking a full Aspirin a day after surgery for three weeks to help minimize the risk of a blood clot. If you cannot tolerate taking Aspirin, please notify Dr. Browdy and his staff.

Comfort Measures:

It is advisable to get up and "move around" as much as you can tolerate after surgery, as doing so helps prevent blood clots. However, whenever you are not up specifically doing something, you should keep your leg elevated above the heart level for at least the first three days after surgery, and perhaps longer if needed.

A cooling system may have been applied. If not, you may use a large bag of ice. In either case, keeping the knee cool will help significantly reduce swelling and pain. If you have an ice machine with a thermostat, do not let the temperature go below 45 degrees, as frostbite can occur.

Problems:

Your knee may have swelling and soreness for the first several days. This is to be expected.

- 1. Severe Pain
- 2. A Temperature above 101 degrees
- 3. Pain, redness or significant swelling in your knee or calf (bruising may occur, and in many cases is normal).

Please call us if you have **any** guestions.

Appointments:

You will need to see Dr. Browdy for a follow-up appointment. 2-7 days after surgery. Please call the office at 314-721-7325 to make an appointment.

Phone Numbers:

Advanced Orthopedics and Sports medicine: 314-721-7325

Medication Refill Policy:

It is the policy of Advanced Orthopedics that narcotic medications will only be refilled during office hours. Please be patient with the office staff. If you call during patient hours, your call may be returned at the end of the day.