
Post-op Instructions for ACL Reconstruction or Multi-Ligament Reconstruction/Repair

These instructions are to compliment the information given by Dr. McCarthy, the nursing staff and physical therapists. They cover many of the common questions.

Wound Care

- Dressings are to be kept clean and dry. A small amount of clear drainage or bleeding is normal. You may loosen the ace bandage if it feels tight. Dressing may be removed 2-3 days after surgery or at your first PT appointment.
- If you develop purulent drainage (thick white or greenish in color) from the wound, increasing redness, or a temperature of 101 or higher, please report these symptoms to your surgeon or the doctor on call.

Pain/Swelling

- Ice your knee as frequently as possible with the cooling device or ice packs wrapped in a towel. This will help with the pain and swelling. Do not apply the cooling device or ice pack directly to the skin, as this may cause damage to the skin.
- Narcotic pain medication will be prescribed for use, if needed, after you leave the hospital in limited amounts. Try to wean down/off as soon as you are able. Use acetaminophen (Tylenol) and/or anti-inflammatories (Ibuprofen or Aleve) as main medications for pain control as/if appropriate. Add the narcotic medication for additional pain control if needed. It can help to stagger your pain medications. If a refill of medication is needed, please call the office during regular business hours, Monday-Friday 8:00 a.m. to 5:00 p.m. In general, refills will not be made after hours or on weekends as they need to be picked up. Please plan ahead.
- Also narcotic medications can cause constipation so you may want/need to use an over the counter stool softeners/laxatives as needed.
- Swelling to some degree is common after surgery. To reduce swelling, elevation is very helpful. Elevate the knee above the heart level ("toes above the nose") for the first 2-5 days after surgery. Elevation for 30 minutes every 2 hours is a good initial recommendation. Moving your ankles up and down on a regular basis helps circulate blood from your legs to help reduce swelling. Excessive pain and swelling should be reported to your surgeon.

Driving

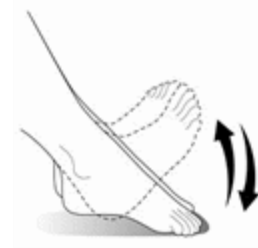
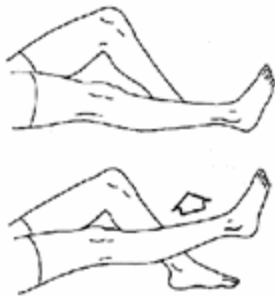
- To drive you must no longer be taking narcotic pain pills. Also, you must feel strong and alert. You may unlock the brace to allow for flexion of the knee while driving. Most people are able to start driving 1-3 weeks after surgery.

Brace/Crutches

- Crutches and the hinged post-op brace are required following surgery. Weight bearing as directed by your surgeon and direction of nursing/physical therapy
- Your brace should be left on at all times initially unless otherwise directed. If for some reason the brace slips down or the dressing is too tight, carefully open the brace and readjust it, or release the tension of the ace bandage. Keep the brace on and locked when up on crutches and sleeping, and when doing your exercises.
- Your brace will be set at approximately 0-10 degrees of flexion initially after surgery. The brace should be left in this position at all times, except when attempting gentle passive range of motion until further directed by PT at your first session.
- If you are uncomfortable changing the brace settings, leave it in the locked position until your first PT appointment.

Activity/Exercises

- **Range of motion**
 - During range of motion exercises you may unlock the brace to allow for up to 90 degrees of flexion as tolerated unless otherwise directed by your surgeon. Using your hands at your upper thigh to bend your knee and then straighten it. You should spend approximately 10 minutes 3 times per day working on this.
- **Home Exercises**
 - **Quad Sets**- Straighten the knee by tightening the quad (front thigh muscle), flexing the ankle (point toes to the ceiling), and pushing the back of the knee into the floor. Hold for the count of 5-10.
 - **Straight Leg Raises**- While maintaining the tightened quad position, slowly raise the straightened leg off the floor and hold for 5-10 seconds.
 - **Vigorous foot, ankle, and toe movement**—20 pumps per waking hour.



Follow-up

Make sure an appointment has been scheduled for you, for approximately 3-5 days after surgery.

Mark McCarthy, MD
Chippewa Valley Orthopedics & Sports Medicine
715-832-1400