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AFTER YOUR ACL SURGERY

You have just undergone reconstruction of your anterior cruciate ligament (ACL). The post-operative instructions should answer most of your questions about caring for your knee from the time of discharge to your first follow-up appointment with Dr. Nascimento (10-14 days after surgery).

☐ **Prescribed Medication:**

- a. For pain:
 1. Oxycodone (5mg) one to two tablets as needed every 4- 6 hours. For severe pain.
 2. Toradol (ketorolac) 10 mg one tablet every 6 hours for 5 days (no refills).
 3. Tylenol (2 extra strength tablets every 6 hours) or
 4. Once you complete the Toradol, you can take Advil (Ibuprofen) two every 8 hours as needed with food
- b. Enteric coated Aspirin (81mg once daily) starting the day after surgery (tomorrow) unless there is an allergy or medical contraindication (e.g. GI ulcer disease). We recommend for you to take aspirin for **4** weeks. Aspirin is to reduce the risk of blood clots. This is particularly important in high risk patients: over the age 40 or females taking oral contraceptives.
- c. Other medications: Zofran 4mg every 8 hours as needed for nausea_____

☐ **Crutches & Weight Bearing:**

- a. In standard cases you will be **Partial-Weight bearing** for the first two weeks– further instructions will be given at your first post op visit. Most cases will progress to weight bear at tolerated after 2 weeks.
- b. **Meniscal Repair Precautions:** If you had a meniscal repair you will have more restrictions in terms of weight bearing and how long you will be on crutches. Usually the brace will be worn in a locked position for a longer period of time as well. Meniscal REPAIR precautions are (also see #7 below:
 - a. Partial – 50% bear weight on the surgical leg in full extension for 2 weeks – additional details will be given at your first post-op appointment.
 - b. No flexion (bending) past 90 degrees for 4-6 weeks.
 - c. Some tears will be non weight bearing

☐ **Brace:**

- a. The **brace** is initially **locked in extension** (your leg straight). It is to be worn this way for walking and sleeping until Dr. Nascimento tells you otherwise. It is taken off for your exercises as well as for the CPM (continuous passive motion) machine if used. The length of time it is to be worn locked with walking depends on your individual case. Further instructions will be given at your first follow-up appointment. You may **unlock** the brace while seated (car, desk, eating etc) for **20-30 minutes max**.
- b. You may have rented a NICE (ice machine) which supplies compression as well as ice to your knee. It should be used regularly for the first three days after surgery. Please refer to instruction manual or contact the company/representative if you have questions about the device. You may remove the brace while icing.
- c. The snug **white stocking** on your leg is called a TED stocking and keeps the swelling down in your lower leg and foot as well as your knee. It also helps prevent blood clots. It is to be worn for the first **2** weeks after surgery. After this, an ace bandage or compression sleeve just around the knee under the brace is sufficient.

Robert J Nascimento, M.D
Shoulder, Sports Medicine & Arthroscopy

- d. **Swelling** in your lower leg below the knee and/or the foot can occur from being on your feet for longer periods of time in the immediate post-operative period. You can lie down on your back, elevate your leg on pillows above the level of your heart with your knee fully extended.

4. Dressing Instructions:

- a. Expect some bloody staining through your dressing, especially in the first couple of days. If mild, just leave the dressing intact after surgery. If moderate, the dressing can be changed sooner. If excessive, contact the office immediately at 617-643-0907.
- b. In routine cases, the dressing can be changed 3 days after surgery. Pull the stocking down and remove the wrap and bandage around you knee. The incision site will be covered with white steri-strips and/or sutures. Do not remove the steri-strips. This will be done at your follow-up visit. You may apply clean/sterile gauze and wrap the knee loosely and then reapply the TED stocking. Only change the bandage as necessary after this until your follow-up appointment.
- c. Once the dressing has been removed on post op day 3, you may shower (if a pump block is in place, wait to shower until that is removed). The steri-strips should be covered for showering. It is ok if they get a bit wet, pat them dry. Do not submerge for 4 weeks.
- d. Report any pus or unusual drainage immediately, especially if it is associated with increased pain, redness, warmth, and a temperature > 101°F. However, it is normal to have a low grade temperature for the first few days following surgery.

5. CPM (Continuous passive motion):

- a. The CPM machine is to be used at home starting the day after surgery **ONLY** if you are unable to start physical therapy within 5 days. The brace should be removed while using it. The initial setting should be from **0° (knee straight) to 40°**. The machine should be used in two hour sessions, three times a day. Set the machine at a slow speed. Try to increase 10 degrees per day, although this is not always possible. The machine has been prescribed for **2** weeks, at which time the CPM representative should be called to pick it up. If you pause the machine for a period of time, stop it at 0 degrees (with the knee straight) so your knee does not get stiff in a bent position.
- b. Company used for CPM machine: SurgiCare 1-800-797-8744 : Please call in order to schedule delivery or send an email to cpm@surgi-careinc.com.

6. Physical Therapy

- a. Formal **physical therapy** should **start within 5 days** after surgery, with sessions initially three times per week.
- b. You will be given **home exercises** by the physical therapist and you should do these along with the following exercise flow sheets provided for you to get started. In particular, the exercises to straighten your knee completely (towel extension) is critical during the first couple of weeks.
- c. A written physical therapy protocol has been supplied to you and your therapist. This is a “rough guideline” and there will be a lot of individual variations.

7. Meniscal Repair Precautions: If you had a meniscal repair you will have more restrictions in terms of weight bearing and how long you will be on crutches. Usually the brace will be worn in a locked position for a longer period of time as well. **Meniscal REPAIR precautions are:**

- ☐ Partial – 50% bear weight on the surgical leg in full extension for 2 weeks – additional details will be given at your first post-op appointment.
- ☐ No flexion (bending) past 90 degrees for 4-6 weeks.
- ☐ Some repairs are strictly non weight bearing for 6-8 weeks.

8. Driving Instructions

- a. Right knee- no driving for at least the first couple of weeks (approx 1-2). You will be able to get back to automatic driving sooner than standard.
- b. Left knee- automatic driving is acceptable once you are comfortable.
- c. We advise **NO** driving while taking narcotic medication.

9. Follow-up appointment:

- a. **Your currently scheduled post op appointment should already be made and is in Gateway, if you have any questions please call 617-643-0907. You should be seen in 10-14 days after surgery.**
- b. Other instructions: _____