

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.

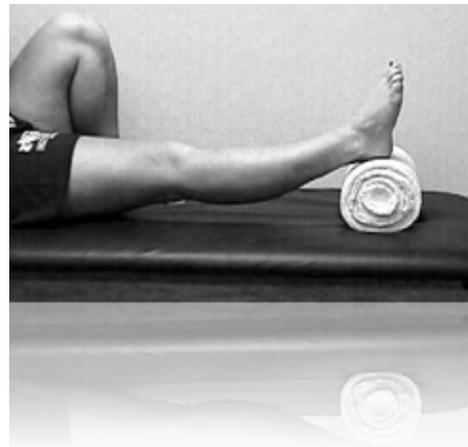
Diet: Advance to solid food as tolerated.

Bandages: Leave your dressings on until you follow up in the office in 3 days. 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 the incision is fully healed. This generally takes 7-10 days. You should consider sponge bathing for the first 7-10 days after surgery. Once the incision is fully healed, as determined by Dr. Browdy, you may get your incision wet in the shower, but you should avoid submerging under water until you are four weeks out of surgery.

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. Over the next four weeks, you will be non weight bearing, assisted by crutches, on your operative leg. Dr. Browdy or his staff will make adjustments to the brace during your post-operative follow up visits.

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 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



Heel Prop

Activity (cont.)

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 a thigh high compression hose on each leg. It is advisable you use the hose on both legs for three 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 two narcotic pain medications 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. We recommend using oxycodone for a maximum of 48 hours. Take your first dose before bed time the night of surgery. You should switch to hydrocodone on the third day after surgery. 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.**

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.

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.

As part of the recovery process following surgery, Dr. Browdy highly encourages his patients to use a motorized cold therapy machine (a.k.a. cryo unit). The unit is beneficial for the entire post-operative course by reducing pain and swelling during recovery and throughout physical therapy treatment. The machine will give 6-8 hours of continuous cold therapy to the affected body part. If you elect not use a cryo unit, 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. Please contact Dr. Browdy's office 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 or calf (bruising may occur, and in many cases is normal).

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

Appointments: Generally, we plan to see you for your first post-operative visit about 72 hours after surgery and again one week after surgery. Please call the office at 314-991-2150 to make an appointment.

Phone Numbers: Motion Orthopaedics: 314-991-2150

For any urgent need after normal business hours or on weekends you may call the after hours line at 1-888-456-8166.

Medication Refill Policy: **It is the policy of Motion Orthopaedics 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.**