Post-operative Care following ACL Reconstruction

You will be seen in the office for your first post-operative visit 7 to 10 days from your surgery. This appointment is often made when you book your surgery date. During this visit, you will be shown your intra-operative pictures, detailing the pathology in your hip. Your incisions will be checked and you will be given a prescription to begin physical therapy at this time. If you are unsure of, or need to schedule, an appointment, call (516) 622-6040.

WOUND CARE

You will have two small incisions, as well as a longitudinal incision on your knee following surgery. After removing your bandage, white Steri-strips covering your incisions. Your small incisions were closed with absorbable sutures. Your long incision was closed with absorbable sutures as well, however, a small portion of the suture remains outside the skin and will be removed at your first visit.

Your incisions will be covered with gauze, padding and an ACE bandage. It is important to keep the surgical site as clean and dry as possible. You will remove this dressing 48 hours following surgery (If you had surgery on a Monday, the dressing would come off on Wednesday). The Steri-strips should be left in place and will be removed at your first visit.

In order to visualize the structures of your knee during surgery, fluid is placed into the knee joint. Often times, the fluid can leak out onto the dressing. This should be no cause for alarm.

You may shower following removal of your bandage. You should not put any soaps, lotions or ointments on the incisions. You may allow water to run over the incisions, which should be patted dry immediately after showering.

CRUTCHES/BRACE

You will have a post-operative ACL brace placed on your leg after surgery. This brace will be locked in extension. You will leave the Ambulatory Surgery Center using crutches. Due to your nerve block prior to surgery, you will be non-weightbearing until you regain feeling in your leg. Once you have full sensation back in your leg, you are to limit your weightbearing for the first week after surgery. While bearing weight, your brace should remain on and locked in extension. During the two to three weeks
following surgery, your physical therapist will guide and assist with unlocking your brace for walking. This timing is determined by how quickly your quadriceps strength returns.

In regards to stairs, it is always best to play it safe. It is often difficult to navigate up and down with crutches. If at all possible, try to make accommodations to avoid using stairs in the early post-operative period. When you do need to use the stairs, the crutches should always remain with the affected leg. The saying “Up with the GOOD, down the BAD” can help you remember the proper way to do so. Go up the stairs leading with your good leg first, keeping the crutches with your affected leg as you fully come up the step. Come down the stairs with your affected leg and crutches first, followed by your “good” leg. We can go over this at your first post-operative visit.

PAIN MANAGEMENT

You will be given a prescription for pain medication following your surgery. Understand that this medication may hinder your ability to drive. It is important to avoid drinking alcohol in combination with this medication.

You may have gotten an icing machine prior to surgery. This machine is to be used frequently throughout the first week following surgery. This provides a safe and effective way to manage pain and swelling. If you chose not to get the icing apparatus, frozen vegetables or an ice pack may be applied to the area for 20 minutes at a time up to three times per day. Make sure there is a barrier between the ice pack and your skin, such as a towel.

ACTIVITY

Following surgery, you will need to use a CPM at home. This is a Continuous Passive Motion machine. It will gently flex your knee for you. The settings will be adjusted by the machine vendor upon delivery to your home. A good goal to reach is 90 degrees by your first post-operative visit. You may gently go past this range if you feel comfortable unless you were told otherwise.

You should use the CPM for 2 hours at a time, at least 2 times per day for the first 7 to 10 days following surgery. At your first post-operative visit, you will be told whether or not you need to continue with this machine.

Driving is often an issue following this surgery (especially if it the surgery was done on your right knee). There should not be any driving during the first 10 days following surgery, regardless of the side operated on. The necessary use of pain medication and slowed reaction time may pose a danger behind the wheel. If surgery was performed on
your left knee, you can discuss returning to driving at your first post-operative visit. For right knee surgery, you must be able to fully and quickly perform an unassisted straight leg raise to be able to go from the gas pedal to the brake pedal efficiently. This will be demonstrated to you on your first post-operative visit. It often takes 2 to 4 weeks for this function to return, as your brace must be unlocked for driving. In general, you may not drive under the influence of pain medication.

Physical therapy is in integral part of your success following surgery. We have a list of recommended physical therapists from Suffolk to Manhattan, who are trusted to safely and effectively rehabilitate your knee. You will start physical therapy after your first post-operative visit. The main focus during the first six weeks of physical therapy is to gain back full range of motion at the knee, most importantly full extension. You will also focus your efforts on quadriceps strengthening. Your physical therapist will likely give you “homework” to do, it is important to put in the effort at home as well!

Your return to work is dependent on many factors and will be discussed at your first post-operative visit. The need to drive and/or fully bear weight on your leg in order to work will play a large role in your return date. Sitting or standing for prolonged periods of time in the early part of your post-operative period may also be uncomfortable and work adjustments may need to be made. Generally, you may feel comfortable enough to return to work after 2 weeks. Depending on your driving status, further accommodations may need to be in place.