



# GOLDEN STATE ORTHOPEDICS & SPINE

## ACL RECONSTRUCTION POSTOPERATIVE INSTRUCTIONS

**In the recovery room** after ACL surgery, the nurses will treat you with pain medications and antibiotics. You will have a brace in place across your knee. Under the brace you will have a pad or jacket wrapped around your knee and leg with a thick hose that is attached to a machine which circulates cold water that is used to keep your knee cool, or you will have a simple ice pad, You will also have a drain coming from your knee that will be used to remove excess blood into a holding container. This is the way you will be discharged, along with a set of crutches. On the day after surgery you will be instructed on how to put your leg without the brace on a constant passive motion machine which will be used to help begin a range of motion program for your knee.

### **When you get home, activity:**

Use your crutches at all times when up and moving. Please do not put more than 25 pounds of weight on the surgical leg. I will adjust your weight-bearing over the next several weeks. When getting up, make sure the brace hinge is placed in the full extended position (the knee completely out straight) and the side hinges locked at 0 degrees. In the first four or five days after surgery, it is okay to be up for one to two hours at a time, but then lay down so that your leg is above the level of your heart for one or two hours. As you start your second week, you need to increase your time up. Do not forget to move your ankles frequently and tighten and relax your calf muscles often (a few minutes every half hour while lying), to help the circulation and minimize the risk of forming blood clots in your leg.

### **CPM (constant passive motion machine):**

You will start to use the CPM machine the day after surgery after I have seen you in the office. You need to try to use the CPM machine about six to eight hours per day in the first week. If you are comfortable and wish to use it more, you can use it up to twelve hours per day. Use it in two hour intervals. Please remove your brace when using the CPM machine and also remove the ice jacket or ice pad. When you place your leg on the CPM machine support it by putting your hands on your calf or use your other leg to help support the surgical leg as you are placing it on the CPM machine. You may also have a family member help or assist with this maneuver.

**Day One:** The day after surgery and after your drain has been removed from your knee, start the CPM machine with a range of 0-60 degrees. Back off 5 or 10 degrees if it is very painful.

**Day Two:** Increase your flexion by 10 degrees per day. The hope is that by the fifth or sixth day you will be near the 110 degrees of motion. Keep the CPM machine for six to ten days and at that point contact the representative who delivered it to your home to come to pick it up. Please be reminded that this is a rental item.

### **Wound Drain:**

A drain was placed into your knee to remove excess blood; it will come out the day after surgery. You will have an appointment to see me the day after surgery and I will remove your drainage and change the dressing at that time. I will then give you the go ahead to begin using the CPM machine at home. If I am unable to see you the day after surgery, one of my partners or one of my assistants will remove the drain for you.



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### **Cold Therapy:**

The **Game Ready** device provides both cold and compression to your knee and leg. Use it 20-30 minutes at a time every hour if possible while awake and especially after each CPM session. Do not use the Game Ready while on the CPM. Set the temperature to a range of 34-45 degrees Fahrenheit and the compression mode to approximately medium. (Do not use the compression mode on the first day, which is the day of surgery.)

If you did not decide to rent a Game Ready device, gel ice pads can be used. If we dispensed a gel pad pack for you, you will have been given four pads so that two can be in the freezer while two are being used. Again, use them for 20-30 minutes at a time, every hour if possible while awake. Do not forget to use the gel ice pads after every CPM session.

Do not forget to cover your skin under the ice pad or under the Game Ready wrap, to minimize the risk of injury to the skin.

### **Femoral Nerve Block:**

As part of your anesthetic, the anesthesiologist may have given you an injection of a local anesthetic near your femoral nerve at the groin of the surgical leg. This may give you 8-12 hours of pain relief and certainly helps take the edge off of the postoperative pain. Rarely do patients require a repeat femoral nerve block on the day after surgery, but it can be considered in those circumstances when the pain is severe.

### **Pain Medications:**

When you arrive home, begin taking the oral pain medications that were prescribed. We usually recommend Percocet 5 mg one or two tablets every four to six hours, or Norco 10 mg one to two tablets every four to six hours. Start early on the pain medication before your pain becomes too severe or before the femoral nerve block wears off. By the second or third postoperative day, your pain medication requirements will probably diminish. I do not typically like the use of any anti-inflammatory drugs during the healing phase after an ACL reconstruction.

### **Antibiotics:**

You have received intravenous antibiotics before and after surgery. If you go home on the same day of surgery, a prescription of oral antibiotics, usually Keflex 750 mg every eight to twelve hours will be given to you. You will be using the antibiotics for only one or two days.

### **Aspirin:**

Please take a 325 mg aspirin, I recommend the enteric-coated, every day for six weeks after surgery. The aspirin is used to help decrease the risk of deep venous thrombosis (blood clots in the veins) of the leg. If you are allergic to aspirin, please do not take it and advise me.

### **Constipation:**

The pain medication that you are taking may cause constipation. We recommend that you drink



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plenty of fluids, and consider the use of a stool softener or laxative. I recommend Senokot-S two tablets per day. If you have not had a bowel movement in many days, you might also consider a glycerin suppository and at the worst the use of a Fleets enema.

### **Bathing:**

Keep your knee dry. For showers you might try a long-leg shower bag that accommodates your brace as well. Some patients have used a heavy-duty garbage bag that is wrapped over the top of the brace and taped to seal it to the leg. The first few days after surgery, a simple sponge bath may be sufficient. To shower, I recommend a shower chair so you can sit. Once in the shower, remove your brace, wrap the knee dressing or the incisions in a plastic such as Saran wrap, and take your shower. Immediately after the shower, dry the knee if it gets wet or change the dressings if they become moist. After your shower, replace your brace and be careful leaving the shower, as the wet floor may cause you to slip.

### **Follow-up Appointments:**

Your first office appointment after surgery is the next day. On that appointment, I will remove your knee drain and give you instructions for the next week. At your preoperative examination before surgery I will have given you a physical therapy prescription to initiate your first therapy session at the fourth or fifth day after surgery. The second appointment will be at 10-12 days after surgery for suture removal and further instructions.

**Contact a physician** if you develop severe pain, fever, chills, streaking redness up the leg to your groin or generalized badness ... do not hesitate to call my office at **925-939-8585** and speak to me or one of my on-call partners or assistants. On nights or weekends our practice always has two or three physicians on call. Occasionally, they may be occupied in surgery for long periods of time and may be unable to contact you in a timely manner. If you do not receive a call back in a timely manner and you feel an urgency to be evaluated, go to your local emergency room. The ER physician may call us for further discussion.

### **Other Instructions:**