

Dr. Allen ACL Reconstruction Post-Op Instructions

Dressings

Keep your dressings in place until your first PT visit (usually POD #1-3). Keep the dressings clean and dry, sponge bath or cover your leg while showering until your first dressing change. The Physical Therapist will do your first dressing change. After your first dressing change it is ok change your dressing as needed and ok to shower and get the wound wet post-op day #3. Do not soak your incision. Let warm soapy water run over your knee, pat dry with a clean towel, and replace with fresh dressings. Use extreme caution in the shower as falls can occur, it is recommended to use a shower chair or have assistance. Make sure to wash your hands before touching the skin around your incision. Dressings can be removed and replaced with clean, fresh gauze, make sure to keep the wound covered until your first follow up. Do not pick at or remove any scabs. It is ok to lotion the skin surrounding the incision, but don't place any lotion or ointment directly on the wound.

Brace & Crutches

You will use a brace and crutches for the first several weeks after surgery. Your brace will be locked in extension when ambulating for the first couple weeks after surgery. As your motion and quad control returns you can unlock the brace, wean off the crutches and eventually discontinue the brace. The goal is to be brace and crutches free by the 6-week post-op visit. Typically, you can unlock the brace in 1-2 weeks, discontinue the crutches within the first 3 weeks, and out of the brace a week or 2 after that. Your therapist will help guide you in this process.

If you had a concurrent meniscus repair, you will be non-weight bearing for 4 weeks and toe touch weight bearing for 2 additional weeks. Your brace will be limited to 0-90° during this time. This protects the meniscus repair to allow it to heal. At 6 weeks you are allowed to progressively bear more weight and discontinue the brace.

Pain Control

Pain control is a very important aspect of your recovery. It is well documented that multimodal pain control is the most effective way to manage post-operative pain. At the end of the procedure, I will inject local anesthetic into the surgical field, additionally the anesthesiologist may give you a lower extremity block. These blocks can last anywhere for a few hours to a couple days. The goal is to have little to no pain in the immediate post-operative period. You will also receive a prescription for narcotic pain

medications. This is to be used for break through pain. Combining the narcotic pain medications with Tylenol and Ibuprofen has been shown to give superior pain relief compared to the narcotic alone. The goal is to use the narcotic pain medications sparingly, and discontinue its use by 2 weeks post-op. If you are running low and will require a refill, please plan in advance, as refills on the weekend are often not logistically possible. Ice and elevation for the first several days after your surgery will also help control your pain.

Nausea

Nausea after surgery and anesthesia is not uncommon. You will receive an anti-nausea medication prescription for use at your discretion.

Constipation

Narcotic pain medications can be very constipating. You will receive a stool softening medication. I recommend you take it as long as you are taking the narcotics. Make sure to drink plenty of water as well in the immediate post-operative period.

DVT Prophylaxis

Blood clots after orthopedic surgery are an uncommon, but potentially dangerous occurrence. Literature supporting DVT prophylaxis in ACL reconstruction is mixed. I prefer to prescribe a daily Aspirin for DVT prophylaxis for most ACL reconstructions. This prescription is typically for 4 weeks. Signs of a blood clot include swelling of the lower leg, increasing pain and pressure, redness, shortness of breath, or chest pain. If you notice any of these warning signs, please contact my office immediately or present to the ER for further evaluation.

Physical Therapy

Your first PT visit will be within the first few days after your surgery. Your first dressing change will be at this visit. Early goal is to regain full extension, this is critical in the first 2 months of recovery. Therapy is the most important aspect of returning to full function after an ACL reconstruction.

Follow Up

Typically, your first follow up is about 2 weeks after surgery. We will assess your wound and likely remove your sutures at this visit. We will review your surgery and ensure you have all the proper upcoming therapy visits arranged.