

POSTOPERATIVE DISCHARGE INSTRUCTIONS

ACL RECONSTRUCTION

Benjamin D. Rubin, M.D.
714 937-2120

1. DAY OF SURGERY

- **Diet** - start with clear liquids and gradually increase to a regular diet as tolerated. It is not uncommon to have some nausea or even vomiting after general anesthesia.
- **Ice** – If using the gel packs provided by the surgery center, keep them on until they thaw and then change to the alternate packs that are in the freezer for the first 2 days. After the dressing is changed, ice 20 minutes on/20 minutes off.
Do not apply the ice directly to your skin as this can cause a severe burn and wound complications. Always keep a pad between the ice pack and your skin. If you have been provided with a cold unit, keep this in place. The cold unit can be used continuously since it is temperature controlled.
- **Pain Medication** – On the day of the surgery if the local anesthetic or nerve block is working and there is no significant pain, then before going to bed take a pain pill and place another on the nightstand with some water to take during the night if you are awakened with pain.
- **Clot (DVT) Prevention**—Take aspirin 325 mg daily for 2 weeks post-op and perform ankle pumps (as instructed after surgery) to decrease the incidence of developing a blood clot.

Take the prescribed pain medication at the onset of pain as needed. Do not try to tough it out but do not take it unnecessarily. If you are not having much in the way of pain you can take Ibuprofen, Advil or Aleve instead. Please take it with food to avoid stomach upset. If the medication gives inadequate relief or if you develop a reaction to the pain medication, stop taking it and call my office preferably during office hours.

● **Bandages** – The bandage applied to your knee may become moist or bloodstained, however this is normal and results from fluid placed in the joint during surgery. If your bandage becomes saturated with bright red blood, please call me. Keep the bandages dry.

● **CPM (continuous passive motion) machine** – begin using your CPM machine soon after arriving at home. Start at 0-45 degrees and increase the range at least 10 degrees/day as tolerated. Try to use it 6-10 hours/day. You can come out of your brace for this.

● **Activity** - Ice and elevate your leg preferably above the level of your heart (on 2 pillows). Do not overdo your activity as your knee and leg will probably be numb from the local anesthetic that was injected at the end of the procedure and from the nerve block that was done. This may last from 6 to 12 hours.

2. DAY AFTER SURGERY UNTIL FIRST POSTOPERATIVE OFFICE VISIT

●**Ice** – Continue to keep your leg elevated with a pillow under your calf and ice as much as possible to control the pain and swelling. If using the gel packs provided by the surgery center, keep them on until they thaw and then change to the alternate packs that are in the freezer for the first 2 days. After the dressing is changed, ice 20 minutes on/20 minutes off. If you have been provided with a cold unit, keep this in place as much as possible to help control pain and swelling. You will find that your knee and possibly your shin are swollen and uncomfortable for the first week or so.

●**CPM** - Use the CPM for at least 2-3 hours three times daily (use it more if you like.) Start with the CPM machine set for motion from 0-45 degrees and increase it 5 degrees in the morning and 5 degrees in the afternoon each day as tolerated. If you can, increase the flexion by more than 10 degrees per day.

●**Activity** – You can bear as much weight as tolerated in your brace unless you have been instructed otherwise but avoid excessive activity, as this will cause increased swelling and inflammation and therefore pain. When applying the leg brace, be sure to have your knee as straight as possible. You may sleep with your leg either in the brace or the CPM machine, which ever is most comfortable. When standing up or walking, please use the crutches provided and have the straight leg brace applied to your leg. You will discontinue the brace once you have full ROM and good quadriceps control.

There may be a sensation of splashing of fluid within your joint, however this normal and should not concern you.

●**Bandages** – You can remove the outer bandages and shower on the second day after surgery (48 hours). Do not remove the tapes over your incisions. You will need to keep your incisions dry by covering the wound with water-proof bandages (that can be purchased at your local pharmacy) or saran wrap when taking a shower. Do this for about fourteen days from surgery or until the incisions are completely healed. Do not remove steri strips because these keep the incision closed and stitches in place.

Do not submerge your knee in a bath or spa. It is normal to have some swelling, drainage and minor redness at the incisions. It is common to have swelling of the foot and ankle.

●**Pain medication** –As needed. Please anticipate your needs for medication. Prescriptions are not renewed on weekends.

PRECAUTION: If you develop a fever of 101 degrees or greater, if the pain you feel is much greater than that expected, or if you develop severe redness or swelling, please call my office.