



Tidewater Orthopaedics
Specialized Care You Can Trust

ACL Reconstruction

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Post Operative Instructions after ACL Reconstruction

Helpful Hints & Important Precautions for Patients

Diet

- You may resume clear liquids and light foods after surgery (jello, soup, etc.)
- Progress to your normal diet as tolerated as long as you are not nauseated.

Medications:

- Before surgery you will likely receive a nerve block that will last about 8 to 24 hours, and in addition during surgery. It is important to begin taking your pain pills before this medicine wears off.
- The first medication I use is **Percocet (Oxycodone/Acetaminophen)** which is a strong narcotic pain medication. It will begin to work within 15 minutes after taking it, with a maximal effect in one to two hours. Normally, Percocet is taken 1 pill every 6 hours but if the pain is severe, it can be used 2 pills every 4 hours.
- Common side effects of the medications are nausea, constipation, itching, and drowsiness.
- The best way to prevent nausea is to take the medicine with a little food, start with just one pill, and be patient while the medicine begins to work. Usually, after the first few doses the nausea will go away. I also prescribe an anti-nausea medication called **Zofran (Odansetron)** to be taken if you have persistent nausea after surgery.
- You will also be given a prescription for **Naprosyn** which is a strong anti-inflammatory medication. Take this twice a day with food in addition to the Percocet. Both medications will work synergistically in pain relief. Do not take if there is a history of stomach ulcers or kidney dysfunction.
- I strongly recommend you take an over-the-counter stool softener **starting the day of surgery** such as Colace 100 mg 1 tablet a day and a laxative such Miralax to avoid constipation.
- Take Benadryl one half hour before your narcotic if you experience itching.
- Do not drive or operate heavy machinery while taking Percocet or other narcotics.
- **You should take 325 mg Enteric coated Aspirin once a day for two weeks to help prevent blood clot formation.**

- Transition to Tylenol as your pain subsides but pay attention to the dosage as Percocet has 325 mg of Tylenol in each pill. Patients with normal liver function should not consume more than 3000 mg of Tylenol per day.
- **All non-narcotic medications will be called in to your pharmacy prior to surgery.**

Bandages & Sling:

- Your post-operative dressing has two layers you need to understand in order to properly care for your surgery site. Your incisions were closed with absorbable stitches that are covered with small white tapes called Steri-Strips. Your Steri-Strips should be left in place until I see you at your first post-operative date.
- The second layer is a large white fluffy dressing and ABD pad that is loosely held in place with tape and the overlying compression stocking.
- Unless directed otherwise, remove this second layer of dressing 2 days after surgery and place a fresh ABD pad over the steri-strips. Use paper tape only on the bottom of the dressing. After changing the dressing replace the compression stocking and then the brace.
- Keep an ABD pad over the incision at all times aside from showering to avoid the brace irritating the skin around the incision.
- Keep the compression stocking on at all times aside from showering until the first post-operative visit.
- Occasionally the top elastic portion of the compression stocking can irritate the skin. If this is the case, take scissors and cut the top elastic portion of the stocking.
- As the surgery is done arthroscopically and water is used, occasionally there will be a small amount of blood mixed with water in this dressing. This is nothing to worry about, however if you see a lot of bleeding please call Dr. Sablan.

Washing & Bathing:

- You should be careful to keep the wound clean and dry for the first 48 hours after surgery.
- Beginning on the second day after surgery it is OK to shower as long as the incisions are kept dry with plastic wrap. Remove the wrap after showering and replace your ABD pad and compressive stocking.
- Do not take a bath until after the first post-operative visit.
- It is OK to go into a swimming pool after the first post-operative visit, but no lakes or ocean until two weeks after surgery.

Ice & Activity:

- One important goal following surgery is to minimize swelling around your surgery site. The best way to achieve this is with the frequent application of ice. This is most important the first 48

hours following surgery. The ice pack should be large (like a big zip-lock bag or bag of peas) and held firmly on the area of your surgery. Apply for 15 minutes every hour while awake if possible.

- Dr. Sablan occasionally orders a cold compression unit that can be used at all times under the brace.
- Crutches will be given to you before surgery if you do not have them already. Use the crutches at all times before the first visit if you are up walking.
- You will have a brace locked in full extension (straight out). Do not change the hinge settings until directed by Dr. Sablan. Keep the brace on whenever you are out of bed.
- You may be partial weightbearing (20 pounds) on the operated leg unless directed.
- **Do not place pillows under the operated knee as this can lead to stiffness.**
- You may return to sedentary work only or school in 3-7 days after surgery if your pain is tolerable.
- Avoid long distance traveling in cars or by airplane during the first week after surgery to avoid increasing your risk of developing blood clots.

Exercises

- Place a towel roll under your ankle and tighten your thigh muscles to get your knee to straighten out. This is very important and should be done at least four times a day for twenty minutes if tolerated. This is a great time to also ice your knee.
- In a non-weight bearing seated position with your brace off, you may perform active flexion/active assisted extension exercises.
- Move your ankle back and forth many times during the day to help your circulation.

Physical Therapy

- The goal of physical therapy is to first assess how your body responded to the surgical procedure. They help you feel comfortable with your surgery and make sure you aren't afraid to start doing things. Your therapist will start range of motion and strength exercises on your first visit. You will start physical therapy after your first post-operative visit.

Follow up appointment:

- We try to give all of our patients a follow-up office visit at the same time we schedule your surgery.
- Typically, I want to see my patients in the office 5 to 10 days after surgery.

FOLLOW UP APPOINTMENT: _____

What to watch out for:

- ∞ Pain that is increasing every hour in spite of the pain medication
- ∞ Drainage from the wound more than 2 days after surgery
- ∞ Increasing redness around the surgical site
- ∞ Pain or swelling around your surgery
- ∞ Fever greater than 101.5 degrees.
- ∞ Unable to keep food or water down for more than one day.

Video Instructions Scan the QR Code

