Mark A. Eilers, MD, MS, FAAOS
Orthopedic Sports Medicine
Arthroscopic, Trauma, & Reconstructive Surgery

POST-OPERATIVE INSTRUCTIONS KNEE – ACL RECONSTRUCTION

PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION IF NECESSARY – DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE HOSPITAL OR VIA PHONE TO DR. EILERS STAFF AFTER ARRIVING HOME

OFFICE NUMBER: 832.698.0111

WHAT CAN I EXPECT AFTER SURGERY?

- Pain, swelling, and bruising are not unusual for the first 2 weeks after surgery.
- Anesthesia medications can cause: drowsiness, dizziness, weakness, nausea, vomiting, fatigue, low-grade fever (not over 101.4^{o}F).
- These usually improve within 24 hours.

ICE THERAPY

- Begin immediately after surgery and continue until the first post-operative visit.
- If using a 'cryo-cuff' or similar ice/compression device, use as directed in the instruction manual.
- When using "real" ice, use for 20 minutes on, 20 minutes off.
- In either case, check the skin frequently for excessive redness, blistering or other signs of frostbite.

BRACE

- Keep brace locked in full extension at all times when upright or ambulating.
- Keep brace locked during periods of rest and always at nighttime until instructed otherwise.
- Brace may be removed when sedentary in order to use ice machine.
- Please contact our office and ask to speak with DME personnel with any brace questions.

WOUND CARE

Wash your hands before and after caring for your incision

- Loosen bandage if swelling or progressive numbness occurs in the extremity.
- It is normal for the wound to bleed and swell following surgery – if blood soaks onto the ACE bandage, reinforce with additional gauze dressing for the remainder of day and check again.
- On post-operative day 2, remove dressings (Thursday if surgery on Tuesday, Sunday if surgery on Friday).
- It is ok for water to run over the incisions in the shower, but do not soak or submerge the incisions in a bathtub, hot tub, or pool until completely healed (about 3-4 weeks).
- Redress incisions with gauze or band-aids after you shower, unless instructed to do otherwise. Rewrap with ACE bandage over the knee to keep brace from rubbing on the incisions.
- Do not use topicals such as Neosporin or hydrogen peroxide.
- If you have stitches, they will be removed 10-14 days after surgery.
- If you have Steri-strips over your incisions, do not remove. Leave them on until they fall off on their own.
- Call the office if you have any questions/concerns regarding the incisions.

ACTIVITY

- Rest at home the day of and the day after surgery. Slowly increase your activity each day as you feel comfortable.
- Do not engage in activities that increase knee pain/swelling (prolonged periods of standing or walking) over the first 7-10 days following surgery.
- Elevate the operative leg to chest level whenever possible to decrease swelling.
- Do not place pillows under knees (i.e. do not maintain knee in a flexed or bent position), but rather place pillows under foot/ankle.
- Weight-bearing status:
  - ☐ Weight-bearing as tolerated with the knee immobilizer locked in extension
  - ☐ Non-weight bearing with crutches
- Do not drive until your surgeon says it is okay. Do not drive if taking narcotic pain medications.
- If you are planning air travel within 4 weeks of your surgery, please consult with Dr. Eilers office to discuss whether anticoagulation (medication to prevent blood clot) is necessary.

PHYSICAL THERAPY

- You will begin physical therapy within a few days after surgery (unless instructed otherwise). Call our office if you do not already have a physical therapy appointment set up.
- Participate in physical therapy and fulfill the home exercises as instructed by the physical therapist. Exercise prevents muscle weakness, improves circulation, and rebuilds strength and flexibility.
- Knee stiffness and discomfort is normal following surgery.
- Do ankle pumps (15-20) at regular intervals during the day to reduce the possibility of a blood clot in your calf.

DIET

- Drink plenty of fluids. If you are taking pain medication, do not drink alcohol.
- Start by drinking small amounts of fluids, such as water, clear carbonated beverages, tea, or soup.
- Gradually add bland foods to your diet, such as dry toast, soup, or crackers.
- Start with light meals. Resume your regular diet as you feel comfortable.
- Pain medications can cause constipation. Eat fiber (fruits and vegetables) and drink plenty of fluids.
- Take OTC Colace or Docusate as directed if taking narcotic pain medications.
- If loss of appetite following surgery, use Boost or Ensure meal replacement shakes for nutrition.

EMERGENCIES

- Contact the office if you are having any of these symptoms:
  - Painful swelling or numbness that progressively worsens
  - Fever of 101ºF (38ºC) or higher
  - Unrelenting pain
  - Persistent nausea and/or vomiting
  - Excessive bleeding or fluid from the surgical site
  - Symptoms of deep vein thrombosis (DVT) such as swelling, redness, warmth, or pain in your calf
  - Inability to urinate
  - Increased drowsiness from pain medication. Stop taking pain/narcotic medication if you become too drowsy
  - Increased or foul-smelling drainage from incision site
  - Significant redness, tenderness, or swelling around the incision
  - Separation of the skin closures

IF YOU HAVE A NEED THAT REQUIRES IMMEDIATE ATTENTION, PROCEED TO THE NEAREST EMERGENCY ROOM OR CALL 911