

Post-Op Instructions ACL/PLC Reconstruction

DIET

- Begin with clear liquids and light foods (jellos, soups, etc.)
- Progress to your normal diet if you are not nauseated

WOUND CARE

- Loosen bandage if swelling or progressive numbness occurs in the extremity.
- It is normal for the joint to bleed and swell following surgery – if blood soaks onto the ACE bandage, simply reinforce with additional gauze dressing for the remainder of day and check again. The ACE bandage can be laundered in normal fashion and reused.
- Remove surgical dressing 48 hours after surgery – large band-aids can be placed over the incisions, covering them completely. It is okay to shower directly over the band-aids as long as the incisions stay dry until your first post-operative appointment in clinic. **LEAVE THE STERI-STRIP TAPE IN PLACE OVER INCISIONS UNTIL FIRST APPOINTMENT**

MEDICATIONS

- Pain medication is injected into the wound and joint during surgery – this will wear off within 8-12 hours. It is recommended to begin the prescription pain medication provided to you upon arriving home, and continue every 4 hours for the first 1-2 days after surgery.
- If you are having problems with nausea and vomiting, contact the office to possibly have your pain medication changed or something additional prescribed for nausea (504-897-6351) – ask for Dr. Cancienne's team to be paged).
- Common side effects of the pain medication include nausea, drowsiness, and constipation. To help minimize risk of side effects, take medication with food - if constipation occurs, consider taking an over-the-counter stool softener such as Dulcolax or Colace.
- Do not drive a car or operate machinery while taking the narcotic medication.
- Unless you have previously been instructed to avoid aspirin products for other medical reasons, please take one (1) 81 mg baby aspirin twice daily for 28 days following surgery. This is to help minimize the risk of blood clot (extremely rare).
- ***Do not take NSAIDs (Aleive, Ibuprofen, Advil, etc.) for 6-12 weeks after your surgery until cleared by Dr. Cancienne***

ICE THERAPY

- Icing is very important in the initial post-operative period and should begin immediately after surgery.
- Use the ice machine (when prescribed) as directed for the first week after surgery. Ice at your discretion thereafter.
- Use ice packs for 45 minutes every 2 hours daily until your first post-operative visit. Elevate the extremity while icing when able.
- When using "real" ice, avoid direct skin contact >20 minutes to prevent damage/frostbite of the skin.

ACTIVITY

- **Maintain no more than heel-touch weight bearing of the surgical extremity, unless instructed otherwise.**
- 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.
- Do not engage in activities which increase knee pain/swelling over the first 7-10 days following surgery.
- NO driving until off narcotic pain medication.
- Okay to return to work when ready and able. Please notify office if written clearance is needed.
- If you are planning air travel within 10 days of your surgery, please consult with Dr. Cole's office to discuss whether anticoagulation (medication to prevent blood clot) is necessary.

EXERCISE

- **Maintain no more than heel-touch weight bearing of the surgical extremity, unless instructed otherwise.**
- 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.
- Do not engage in activities which increase knee pain/swelling over the first 7-10 days following surgery.
- NO driving until off narcotic pain medication.
- Okay to return to work when ready and able. Please notify office if written clearance is needed.
- If you are planning air travel within 10 days of your surgery, please consult with Dr. Cancienne's office to discuss whether anticoagulation (medication to prevent blood clot) is necessary.

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 the first post-operative appointment.
- Brace straps may be loosened during use of ice machine if desired.
- Brace should be removed for exercises beginning first postoperative day and for periods of rest.
- If combined cartilage procedure was performed and you have been prescribed a CPM machine, the brace should be removed during CPM use as well.

EMERGENCIES**

- Contact our office M-F 8:00AM – 5:00PM at 504-897-6351
- Painful swelling or numbness (note that some swelling and numbness is normal)
- Unrelenting pain
- Fever (over 101° – it is normal to have a low-grade fever for the first day or two following surgery) or chills
- Redness around incisions
- Color change in distal arm and/or hand
- Continuous drainage or bleeding from the splint (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting
- If you have an emergency that requires immediate attention proceed to the nearest emergency room.

FOLLOW-UP CARE/QUESTIONS

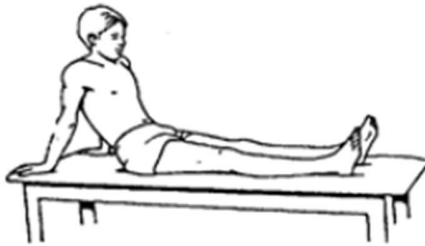
- If you do not already have a post-operative appointment scheduled, please contact our office at 504-897-6351 to schedule.



- Typically, the first post-operative appointment following surgery is 10-14 days following surgery
- If you have any further questions please contact us during office hours

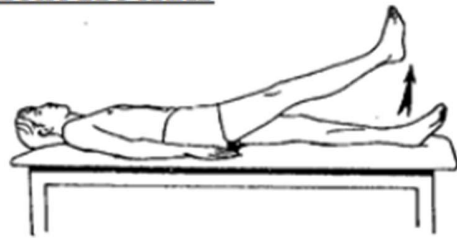
KNEE POST OPERATIVE EXERCISES

QUAD SETS



Tighten muscles on top of thigh by pushing knee down to floor or table.
Hold 1-2 seconds. Repeat 10-15 times
Do 3 sessions per day.

STRAIGHT LEG RAISE



Tighten muscle on front of thigh then lift leg 8-10 inches from floor keeping knee locked.
Hold 1-2 seconds. Repeat 10-15 times
Do 3 sessions per day.

CALF PUMPS



Relax leg. Gently bend and straighten ankle. Move through full range of motion. Avoid pain.
Hold 1-2 seconds. Repeat 10-15 times
Do 3 sessions per day