

PATIENT INSTRUCTIONS FOLLOWING ACL RECONSTRUCTION

- You will wake up in the recovery area of the hospital theatres
- There will be a heavy bandage on your knee
- There will be a nurse there to look after you and monitor your recovery
- You will be kept comfortable but, if you are in pain, tell the nurse and you will receive additional pain killers
- Your surgeon will see you in recovery, or back on the ward, to tell you about your operation and to answer any questions you may have

DISCHARGE FROM THE RECOVERY AREA AND/OR HOSPITAL

- If you have recovered sufficiently from the procedure to go home safely, you will be discharged in the company of a carer on the day of the surgery (or the following day)
- You will be given a prescription for pain-killers and advised by your anaesthetist how best to take these medications. You should be able to control your pain with oral medications only.

BETWEEN DISCHARGE AND YOUR FIRST POST-OPERATIVE REVIEW

- Rest and ice your knee for the first 48 hrs. Apply ice for 20 minutes at a time every 3-4 hours, if required.
- TAKE THE ANALGESIA AS PRESCRIBED BY THE ANESTHETIST
- Keep your knee elevated when not walking around, above the level of your heart. It may be easier to recline or lie down.
- You will be allowed to weight bear through the operated knee as tolerable, with or without the assistance of crutches, unless told otherwise.
- Phone Dr. Porter's rooms to confirm the date and time of your post-operative review, and make an appointment to see your physiotherapist within a few days of surgery to commence the rehabilitation.
- The only exercises you will be able to perform prior to seeing your surgeon or physiotherapist, post-operatively are those shown below
- It is common for some bruising to appear below the level of the bandage, sometimes "tracking" down to the ankle, and for there to be some alteration in sensation in the shin area.

PHONE DR. PORTER'S ROOMS TO CONFIRM YOUR POST-OPERATIVE APPOINTMENT ON ____/____/_____

INSTRUCTIONS

- Do only those exercises prescribed by your surgeon (below) or physiotherapist.
- The exercises should not cause any sharp pain - if they do, please discuss it with your physiotherapist at your next visit
- Exercises are to be performed 4-6 times a day for the first 2 weeks.

INSTRUCTIONS ABOUT THE DRESSINGS (unless told otherwise, the following will apply)

Under your bandage there will be a layer of "soft band" – cotton wool bandage, and under that the dressings covering the wound. The wounds will be closed with "dissolvable" sutures. If you are seeing the surgeon for your post-operative review within 6 days, leave all the bandages intact until then. If your appointment is 7 days or more later, you can "de-bulk" the bandages

after 5 days i.e. remove the bandage and the cotton wool. It is common for there to be some blood visible under the bandage, as well as some bruising from the harvest site at the attachment of your hamstrings. Leave the dressings covering the wounds until you attend for your follow up appointment.

POTENTIAL COMPLICATIONS

Contact your surgeon's rooms, your own GP, the hospital where your procedure was performed or a local A&E department should you develop:

Severe pain not controllable with ice, elevation and the medication prescribed; significant bleeding, swelling, numbness, loss or power or color changes in the operated limb; fevers, chills or night sweats; chest pain or shortness of breath; or other symptoms that are worrying you.

1. Calf Pumps

Pull toes & ankle up, then push toes and ankle down.

Repeat: 20 times



2. Heel Slides

While sitting slide your heel back towards your bottom.

Hold: 5 seconds.

Repeat: 10 times



3. Co-contraction

Contract your hamstrings by pushing your heel into the bed and then co-contrast your quadriceps while holding the hamstring contraction. This exercise may also be performed with a rolled towel behind the knee and attempt to squash the towel while keeping your heel on the bed.

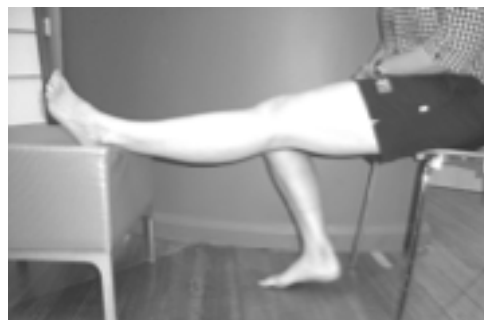
Hold: 5-10 seconds, repeat 10 times



4. Passive Knee Extension

Place heel up on a chair while sitting. Allow your leg to straighten out completely.

Hold: 1-5 minutes



5. Heel Raises

Keeping both feet on the ground. Rise up onto your toes using a wall/Bench to stabilize if needed.

Repeat: 15 times x 3



POST-OPERATIVE REVIEW

- At this appointment Dr. Porter will check the wounds and redress them as appropriate. You will also be instructed on what exercises you are allowed to perform.
- Dr. Porter will let you and your physiotherapist know if there are any deviations from the standard post-ACL reconstruction rehabilitation program.

RETURN TO WORK

- For office duties may be 3-10 days, depending upon work environment and transport etc.
- For laboring tasks may be 6 weeks to 6 months, depending upon work place flexibility, alternative duties available etc.

RETURN TO DRIVING

- This is usually possible within 2-3 weeks of surgery

RETURN TO SPORT

- Upper body weights within 5-14 days

- Stationary cycling at 2-3 weeks (when you have sufficient range of motion)
- Water based training at 2-3 weeks, but no breast-stroke or egg-beater kick
- Road cycling at 6-8 weeks
- Running at 8-12weeks
- Return to pivoting sports 6-9 months at the earliest