Anterior Cruciate Ligament Reconstruction

**Your Pre-surgery Work Up**
A date will be made for you to be seen by a Physical Therapist (PT). At this time you will be given exercise instructions.

You will also have a date made for you to be seen in the Sports Medicine Clinic. You will be seen by the sports medicine RN, the physician assistant, and your surgeon. The sports medicine RN will talk with you about how to get ready for your surgery. You will have a physical exam and the surgery will be explained to you by the physician assistant and your surgeon. You will sign your consent forms.

Please review the Total Care online teaching tool for ACL reconstruction that was sent to you by e-mail when you scheduled your surgery.

You will be given prescriptions for pain medicine at your work-up. **Be sure to take these to your pharmacy and have them ready before the day of your surgery.** This medicine is for **after** your surgery. We will tell you how to take them.

On the day of your work-up, you will make an appointment for a clinic visit after surgery. Your first PT visit(s) should be scheduled at the same time you schedule your surgery. The first physical therapy appointment will be the day after surgery, unless you have surgery on Friday or with Dr. Scerpella – in which case it will be 3 days after surgery.

**Anesthesia for ACL Reconstruction**
Prior to surgery, staff will discuss your options such as having general or epidural anesthesia. You may also be offered a nerve block. The nerve block is done either before or after surgery. The nerve block will help lessen your pain for a few hours or more after surgery. It is important to stay on top of your pain by also taking the oral pain medicine as directed. If you have continued numbness or tingling once the block has worn off, let your know doctor.

After surgery you will be in your brace up to 6 weeks. Your doctor or PT will decide when you are ready to walk without your crutches.

**Patients having ACL reconstruction go home the same day.**

**Dr. Baer, Dr. Walczak and Dr. Spiker**
- PT should be scheduled for 1-3 days after surgery. Your dressing will be changed and the ice unit pad removed. You will be told how to do home exercises. **Schedule your PT appointments before surgery.**
- You can shower 3 days after surgery. Shower with your brace on covering it with a plastic bag. Tape or tie the top of the bag so you do not get the brace wet.
- After your 10-14 days post-op visit, you can shower out of the brace. You can then let the water run over the incisions while you shower.
- After you shower put the brace on and lock. Place new band aids on the incisions after you shower.
- Do not put the incisions under water for 3 weeks. No swimming, hot tub or tub baths.
- You will return to the clinic 10-14 days after surgery. Your stitches will be taken out at this time.
**Dr. Scerpella**

- PT should be scheduled for 3-4 days after surgery. Your dressing will be changed and the ice unit pad removed. You will be told how to do home exercises. **Schedule your PT appointments before surgery.** You can shower 3 days after your surgery. Shower in the brace, covering it with a plastic bag and taping or tying the bag at the top to keep the incisions and brace dry.
- Shower in the brace until you no longer need to wear the brace to control your leg.
- You will return to the clinic to see Dr. Scerpella about 10-14 days after your surgery (this will be scheduled for you before your surgery).

**All Patients**

A white TED stocking will be put on your other leg at the time of surgery. The TED stocking helps to prevent a blood clot from forming in your leg.

You may stop wearing the TED stocking after 24 hours or when you are up and around. Once you are walking often through the day, you no longer need to wear the stocking.

If you have pain, swelling, warmth or redness in your calf area in either leg, call the doctor. This could be a sign that you have a blood clot.

Do not plan any traveling in an airplane for at least 2 weeks after your surgery. Traveling in an airplane too soon after surgery may cause a blood clot in your leg.

**Do not** drive while you are taking the pain medicine. If the ACL surgery was done on your **right** leg, you should not drive until your brace is unlocked and you have regained good control of your leg muscles. This may be 2 weeks or more.

Your return to work or school varies for each person. Many people are off work for 7-14 days. Talk with your doctor about when you may return to work or school.

**Comfort**

Use the ice unit to help with swelling and pain. You may leave the ice machine on (lowest setting) through the first two nights after surgery. If too cold, you can turn the unit off for a few hours. Starting the day after surgery, you should use the ice unit 40-60 minutes on and three hours off as needed. Try to have the leg elevated with the knee and lower leg above your heart. Your knee should be straight. You will use the ice unit often during the first 1-2 weeks after surgery. The ice unit will help with pain after you have PT. You should take the ice pad off while doing your exercises to allow your dressings to air out.

Use your pain pills as instructed and be sure to eat something to avoid nausea. It is important to stay on top of your pain by taking these pain meds as directed. **Do not drive or operate machines while you are taking narcotics.** You may also take anti-inflammatory pills ibuprofen, naproxen or Ketoralac (Toradol) to help reduce the swelling and control your pain.

**Home Exercises**

You should begin your PT exercises the first day after surgery, as described to you by your physical therapist at your pre-op appointment.
How much weight can you put on your leg in the first few days?

- Patients under 16 years of age should use crutches at all times and be touch down weight bearing on the surgical leg (“toe touch weight bearing”). The brace should be on and locked whenever walking.
- Patients 16 years and older should use crutches at all times and are allowed to put as much weight on their surgical leg as they are comfortable with ---- ie no increase in pain or “unsteadiness” of the leg. This is called “weight bearing as tolerated”. The brace should be on and locked whenever walking.
- One exception to the guideline above is for patients who have had a meniscal root or a large meniscal repair. In these cases the surgeon will specify what the weight bearing status should be.

How to Use the Cooler

- First fill to the top of the blue mark with water.
- Next, fill to the top of the yellow mark with ice.
- Start with the dial turned to “max” flow rate. If it feels too cold, you can turn the dial down as needed.
- Connect the hose couplings. You’ll hear 2 “clicks.”
- Plug the adaptor in to start the unit working.
- Refill the ice and water every 4 hours during the first night after surgery.

To Disconnect

- Unplug the cooler.
- Press both couplings to separate the hoses. A few drops of water will drip from hoses.

If the cooler does not seem to be cooling properly:

- Check couplings to see if securely connected.
- Check hoses for bends/kinks.
- Check pad for bends/folds.
- Check the level of ice and water in the cooler.
- Check to make sure that the unit is plugged in.

When to Call the Doctor/Clinic

- Nausea/vomiting lasting more than 24 hours
- If you have not had a bowel movement in 3 days
- Pus like drainage
- Increased redness or warmth at the incision sites
- Excess swelling or bleeding
- Excessive drainage—bleeding from incision site does not stop after 10 minutes of firm pressure
- Extreme bruising
- Sudden shortness of breath
- Cramping or swelling in operative leg
- Leg or foot becomes cool or dark
- Leg or foot becomes numb or tingling
- Pain not relieved by pain pills, elevation, and ice
Phone Numbers
Please call if you have any questions or concerns.

Sports Medicine Clinic
Monday-Friday 8am-5pm
(608) 263-8850

After hours call the clinic number and your call will be forward to the paging operator.
Ask for the orthopedic resident on call.
Leave your name and phone number. The doctor will call you back.

24 Hour Toll Free Number
1-800-323-8942

The Spanish version of this Health Facts for You is #5061s.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person’s health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 10/2018 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing HF#5061.