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## Anterior Cruciate Ligament Reconstruction Postoperative Instructions

### ACTIVITY

- Rest for the first few days following surgery. When sitting or lying down be sure to keep your leg elevated up **above the level of your heart** to help decrease swelling.
- Utilize Ice as much as possible for the first 3-4 weeks to help decrease swelling (15-20 minutes at a time 3-4 x daily).
- Crutches are recommended for the first week following surgery to help provide support and aid in ambulation. You may weight bare as tolerated on the operative extremity.
- You will be placed in a **hinged knee brace**. You will likely have to wear this for the first 4-6 weeks following surgery. Brace will need to be locked (straight) in extension when standing or walking. It should be **worn at all times** (including sleeping) except for hygiene. You may also remove the brace several times per day while seated or lying down to begin to bend and straighten your knee. Goal is to achieve full knee extension, in addition to flexion to 90 degrees by 2 weeks following surgery.
- No driving permitted until directed by your physician and you are no longer taking any narcotic medication
- Return to work or school 3-4 days after surgery if pain is tolerable. Return to lifting/heavy labor or excessive ambulatory activities will be determined by Dr. Busse.

### DRESSINGS

- Remove the outer dressing and gauze wrap **2-3 days following surgery**. You may shower at that time. Let warm, soapy water run over the incisions, but do not scrub over any of the incision sites as they are still healing. You may place band-aids over the incisions after you remove the dressing if you prefer them covered.
- **DO NOT bathe, hottub, soak or submerge** the incision in water for at least 4 weeks following surgery as this increases the risk of infection.
- Small amounts of bloody drainage, numbness at incision site, knee swelling, and bruising are normal findings following surgery.
- **DO NOT apply** bacitracin, ointments, or any creams over the incision for at least 4 weeks following surgery.

## MEDICATION

- You will be prescribed **oxycodone** for pain medication. Please take 1-2 tabs every 4-6 hours as needed for pain.
- In addition to narcotic pain medication, it is advised that you take scheduled **NSAID (non-steroidal anti-inflammatory) and Tylenol (acetaminophen)**. Alternate the two medications for the first 5 days following surgery. As your pain gradually improves you will wean off the narcotic pain medication and take NSAID/Tylenol on an as needed basis.
  - Tylenol (acetaminophen) – take no more than 4,000 mg in a 24 hour period. Do not take if you have liver disease.
  - Ibuprofen (Advil) – take no more than 2,400 mg in a 24 hour period. Do not take if you have kidney disease, history of ulcers, history of GI bleed, or are currently taking a blood thinner.
- You may be given a prescription for **Aspirin 325 mg** which you should take daily with food to decrease risk of postoperative blood clot formation.
- You will also be given a prescription for **Senokot** to take 1-2 tabs daily as needed for constipation. If you find that you are still constipated despite the medication, there are other over the counter medications that you can try: Miralax, Fleet enema, or bisacodyl suppository.
- If you have any side effects (ie. Nausea, rash, difficulty breathing) from a medication discontinue use and call our office.

## FOLLOW UP

- You likely have already been scheduled for your first postoperative visit. If you have not received any appointment please contact the office to **schedule an appointment for 10-14 days after you surgery**.
- You will be seen by Dr. Busse's Physician Assistant- Ashley Roerig. Sutures will be removed at that time if necessary. In addition, you will be able to ask any questions that you may have.
- Call the office immediately if you develop a fever (>101.4), chills, excessive incision drainage, calf pain, or persisting leg numbness.

## PHYSICAL THERAPY

- If you have not already scheduled your physical therapy appointments, please call 952-808-3000 to schedule. Make your first PT appointment **within 7-10 days following surgery**.
- Frequency of PT: 1-2 x per week. Brace will be locked in extension while standing or walking for up to 4 weeks following surgery. Goal of PT: **Weeks 1-3** utilize brace and crutches until you can weight bare while keeping the knee fully extended. ROM as tolerated with goal of 120 degrees of flexion with full extension. **Weeks 3-6** full weight bearing without crutches. ROM as tolerated. You will begin functional strengthening. **Week 6-8** advance functional strengthening. **Weeks 8-10+** Begin to return to normal activities.