Baylor Scott & White
ORTHOPEDIC ASSOCIATES OF DALLAS
A member of HealthTexas Provider Network

**Manoj P. Reddy, MD**
Sports Medicine & Shoulder Surgery
Orthopedic Associates of Dallas
469.800.7200 office | 469.800.7210 fax
DallasOrtho.com | ReddyOrtho.com

# ACL Reconstruction

## POSTOPERATIVE INSTRUCTIONS

**Patient** _____ **Surgery date** _____ **Side** ☐ Right ☐ Left

### WHAT MATTERS MOST IN THE FIRST 2 WEEKS

- **Get the knee fully straight.** Loss of extension is the most common problem after ACL surgery and is hard to recover later. Prop the **heel** on a pillow with nothing under the knee, 10–15 minutes several times a day.
- **Wake up the quadriceps:** quad sets every hour you are awake.
- Control swelling: ice, elevation, and limited time on your feet.
- **Never** sleep or rest with a pillow behind the knee.

## MEDICATION

### Pain medication

Narcotic/opioid medications (oxycodone, hydrocodone) are habit-forming. If needed, you will receive a one-time prescription sized for your surgery. Most patients need them for only 2–3 days; taking them longer than 6 days significantly increases the risk of dependence. **Do not drive, drink alcohol, or make important decisions while taking them.**

**Take 1–2 tablets every 4–6 hours as needed for pain.**

☐ Oxycodone ☐ Percocet (oxycodone/acetaminophen) ☐ Norco (hydrocodone/acetaminophen)

☐ Other _____

### Tylenol (acetaminophen)

☐ You may add Tylenol 325 mg, 2 tablets every 4–6 hours. Do not exceed 3,000 mg in 24 hours *from all sources*.

☐ Do NOT take extra Tylenol — your prescribed pain medication already contains acetaminophen.

### Anti-inflammatories (NSAIDs: ibuprofen/Advil/Motrin, naproxen/Aleve, meloxicam/Mobic)

NSAIDs can slow tendon and bone healing and increase bleeding risk; they are approved only for specific patients.

☐ NSAIDs approved ☐ NSAIDs **NOT** approved

### Blood clot prevention

☐ **Aspirin 81 mg once daily** for 4 weeks

☐ **Aspirin 81 mg twice daily** for 4 weeks

☐ Lovenox _____

☐ Continue your home blood thinner

☐ No blood clot medication needed for your procedure

### Nausea & constipation

You have prescriptions for **Zofran** (nausea — fill only if you have severe nausea) and **Colace** (stool softener while taking narcotics). Walking, fluids, fiber, and prune juice also help; MiraLAX is OK if no bowel movement in 2–3 days.

Other: _____

## ACTIVITY & HOME EXERCISES

### Ice / cold therapy

☐ **Cooling unit:** use in 4-hour intervals with 30-minute breaks for the first 1–2 weeks, then as needed. Keep a layer between the pad and your skin. **Do NOT** leave on overnight.

☐ **Ice packs:** 20 minutes on / 20 minutes off as needed for the first 2 weeks. Ice works through thick bandages even if you can't feel the cold.

**Do NOT use heat** on the knee.

**Nerve block:** If you had a nerve block, your leg may be numb or weak for up to 24 hours. Use your crutches/walker and brace, have someone with you when you first get up, and start your pain medication before the block wears off.

- **Ankle pumps:** 20 every hour you are awake.
- **Heel props:** heel on a rolled towel or pillow, knee unsupported, relax and let it straighten — 10–15 minutes, 4–6 times a day.
- **Quad sets:** tighten the thigh, push the knee down flat, hold 5 seconds. 10 reps every hour you are awake.
- **Heel slides / gentle bending** as allowed below. Patellar (kneecap) mobilization as shown by PT.
- No running, jumping, pivoting, or sports until cleared — return to sport is typically **9 months or later**, based on testing.
- **Driving:** not in the brace or while taking narcotics. Left knee (automatic car): often 1–2 weeks. Right knee: typically 4–6 weeks.
- **Work/school:** desk work or class in about 1–2 weeks with leg elevated.

## WEIGHT BEARING, CRUTCHES & BRACE

### Weight bearing

☐ Weight bearing as tolerated with the brace locked straight; crutches until you walk without a limp and have good quad control (usually 1–2 weeks).

☐ **Meniscus repair also performed:** follow the meniscus repair restrictions — ☐ partial ☐ touch-down weight bearing for _____ weeks; no bending past _____°.

☐ Other: _____

### Brace

**Keep your brace locked in full extension (0°) whenever you are walking or standing until your quad control returns** — usually 1–2 weeks. Your physical therapist will tell you when it is safe to unlock it.

| | |
|---|---|
| **At rest & exercises** | ☐ Unlocked: extension 0° to flexion _____° |
| **Sleeping** | ☐ Brace on, locked straight, for the first _____ weeks |

## SHOWERING & DRESSING CARE

### Showering

- You may shower **2 days after surgery**, protecting the incisions with a plastic bag or waterproof cover. Keep your back to the shower stream.
- If the incisions get wet, that is OK — pat them dry thoroughly. Do not scrub them.
- **No baths, pools, or hot tubs** for 3 weeks, and until the incisions are fully healed.

### Dressing

- Keep the Ace wrap and gauze on for **3 days**. Some bloody drainage on the bandage is normal.
- After 3 days, remove the gauze. **Leave the steri-strips (white tape)** in place; cover with Band-Aids or light gauze. Rewrap the Ace for swelling and comfort.
- No lotions, ointments, or creams on the incisions.

## PROCEDURES PERFORMED

☐ ACL reconstruction

☐ Meniscus repair: ☐ medial ☐ lateral

☐ Partial meniscectomy: ☐ medial ☐ lateral

☐ Lateral extra-articular tenodesis / ALL reconstruction

☐ Chondroplasty

☐ Other: _____

## DIET

- Eat lightly the day of surgery, then advance to your regular diet. Drink plenty of non-alcoholic, caffeine-free fluids.
- A well-balanced, protein-rich diet supports healing. Avoid new supplements in the early recovery period unless cleared by your surgeon.
- If you have diabetes, check your blood sugar more often — surgery and steroids given during anesthesia can raise it.

## PHYSICAL THERAPY

**PT is a critical part of ACL recovery.** Your prescription and protocol are in your post-op packet.

☐ Schedule your first PT visit within **3–7 days** of surgery. Bring the prescription and protocol.

☐ You will receive PT instructions at your first post-op visit.

## FOLLOW-UP

Your first post-operative appointment: **Date** _____ **Time** _____ **Location** _____

- To change your post-operative visit, call **469.800.7200**.
- Pain medication refills: call Monday–Friday, 8:30 am–3:00 pm. Allow 24–48 hours. Narcotic refills are not available after hours or on weekends.

**WHEN TO CALL US — 469.800.7200, DAY OR NIGHT**

- Fever over 101.5°F, or chills
- Redness spreading from the incision, red streaks, foul odor, or drainage that keeps increasing after day 3
- Calf pain, tenderness, or swelling
- Pain or swelling not relieved by your medication, ice, and elevation
- Foot or toes that is cold, pale, or blue, or numbness/weakness that is worsening (mild numbness around the incisions is expected)
- Bleeding that soaks through the dressing

If you cannot reach the on-call surgeon promptly and you are concerned, go to the nearest Emergency Room.

**CALL 911 IMMEDIATELY FOR CHEST PAIN OR SHORTNESS OF BREATH.**

## SPECIFIC INSTRUCTIONS

_____

_____

_____

**Please read these instructions carefully before calling the office — most common questions are answered here. Thank you!**