

## POSTOPERATIVE INSTRUCTIONS

### Knee Ligament Reconstruction

#### DIET

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

#### WOUND CARE

- Keep your operative dressing in place. Occasionally, blood may soak through the bandages. Don't be alarmed, just add a new dressing (gauze) on top.
- Remove the dressing on the 3<sup>rd</sup> day after surgery and apply a dry dressing. Gauze or large band-aids work well.
- Keep your incisions dry until the sutures are removed. Cover with a plastic bag or plastic wrap such as Press N' Seal.

#### MEDICATIONS

- Local anesthetics (pain medications) are injected in the surgical site during surgery. Also, a nerve block by the anesthesiologist may be done just prior to surgery. These medications will wear off within 8-12 hours.
- Most patients will require narcotic pain medication after surgery for several days.
- You may be asked to take a daily Aspirin (325mg) for 2 weeks after surgery to further decrease the chance of developing a blood clot in the legs.
- Side effects of pain medication include: nausea, drowsiness, constipation.
  - Nausea-to help prevent nausea, take medications with food. If you are having difficulty with nausea or vomiting, please contact the office (Gretna: 504-391-7670; Marrero : 504-347-5421).
  - Drowsiness-Be careful in regards to drowsiness and do not drive or operate machinery after taking narcotic pain medication.
  - Constipation-to help prevent constipation take a stool softener, such as Colace® 100mg twice daily. If this does not work you may take a laxative or use an enema if needed. Ask your pharmacist.
  - Unless instructed otherwise, you may take Aleve® 1-2 pills in the am and the pm or Advil® 400mg 3 times per day if needed for pain control. This may also help you wean off the narcotic pain medication.
- Please resume all home medications, unless instructed otherwise.
- With new laws in place, you will need to pick up a paper prescription for any refill of a narcotic pain medication. This medication cannot be called into your pharmacy. **Pain medications will not be refilled after hours or on the weekends.**

## KNEE BRACE

- Wear your brace at all times, except for hygiene and exercises).
- The brace will be locked in extension in the beginning. The brace will remain locked in extension for walking and sleeping. Your physical therapist will unlock the brace when the time comes.

## CRUTCHES

- You will be given crutches after surgery. You may only need these for a few days after surgery or up to 6 weeks or more. You will be given instructions on length of need.
- You will be told how much weight you can put down, usually weight bear as tolerated or touch-down weight bearing.

## CPM

- If you were given a CPM, start on the day of surgery. The setting should be  $-5-45^{\circ}$ . Advance by  $5-10^{\circ}$  per day as tolerated up to  $90^{\circ}$ . Use the CPM at least 6 hours per day. You may sleep with your leg in the CPM. You may remove your brace or wear it in the CPM. The CPM helps reduce pain and swelling.

## ICE THERAPY

- Begin ice immediately after surgery and ice continuously over the bulky dressing. Once the bulky dressing is removed you may ice for 20 minutes every 2 hours. Ice can significantly reduce the amount of pain and swelling you experience. Do not put ice directly on your skin.
- The ice machine (cryo-cuff) is a convenient way to ice, but ice packs work as well.

## EXERCISE

- Formal physical therapy (PT) will not begin until the second week after surgery. You will be given the prescription for PT at your first post-operative visit. The day after surgery start working on your home exercise program.
- Perform 15 reps/set at least 3 times per day.



Heel slides-slide heel toward buttock and straighten.



Range of motion of the knee.



Quad sets. Tighten thigh muscles and push knee down to straighten.

#### ACTIVITY

- Sleeping will be difficult for most people for several weeks after surgery-this will get better. You will need to sleep with your brace on.
- Elevate the leg for several days after surgery to decrease swelling.
- Do not engage in activities which increase pain/swelling (squatting, running or lifting) until cleared by your physician, PA or PT.
- Avoid long periods of or long distance travel. It is recommended not travel long distances or fly for at least 2 weeks after surgery.
- NO driving until cleared by physician or PA.
- May return to sedentary work or school 3-4 days after surgery as pain permits. Many patients with sedentary jobs take 1 week off from work.

#### EMERGENCIES

- Contact the office (Gretna: 504-391-7670; Marrero : 504-347-5421) for any of the following:
  - Painful swelling or numbness, unrelenting pain, Fever over 101°F (it is normal to have low grade fevers after surgery), chills, painful redness around the incisions (a small amount of drainage is expected), excessive nausea or vomiting.
  - If you have difficulty breathing or another emergency that requires immediate attention, call 911 or go to the Emergency Room.
- If you have an urgent situation after hours or on the weekend, call the office at (Gretna: 504-391-7670; Marrero : 504-347-5421) to be connected to the answering service. The on-call provider will be contacted.

#### FOLLOW UP

- If you have any questions regarding your post-operative course or appointment, please call the office (Gretna: 504-391-7670; Marrero : 504-347-5421).
- The first visit after surgery is approximately 8-14 days after surgery.