

ACL DISCHARGE INSTRUCTIONS

Diet • Resume regular diet as tolerated.

Medication • Take 1-2 tablets every 4-6 hours as needed for pain.
 Percocet Vicodin Norco Tylenol #3
 Aspirin 325 mg: Take 1 tablet every 12 hours for 3 week.
 You have been given a prescription for Phenergan. Fill this prescription **ONLY IF** you have severe nausea.
* Restart your daily medication unless you are instructed to do otherwise

You will be given a prescription for pain medicine when you are discharged from the hospital. Take the medicine as needed according to the directions on the bottle. Possible side effects include nausea, dizziness, headache, vomiting, constipation and urinary retention. If you experience these side effects please call our office for assistance. Discontinue the medication if you develop a rash, shortness of breath, itching, or difficulty swallowing. If these symptoms become severe you should seek immediate medical attention.

Refills on pain medication are authorized during office hours only (8am-5pm; Mon-FRI.). Meds will not be refilled on weekends.

Activity

- You have been given a cooling unit to ice your knee. This can be used all at times for the first 1-2 weeks, and then as needed. Do not let the ice pad directly touch your skin. **DO NOT** use heat.
- Apply ice, even though bandages are thick and you may not feel the cold. Apply ice to the 3 times per day for 30 minutes for the first 1 week until your knee is feeling comfortable again. **DO NOT** use heat.
- Pump your foot up and down 20 times per hour, every hour you are awake.
- Place a rolled towel under the ankle of your operative leg 3 times per day for 20-30 minutes for the first week to encourage full knee extension.
- **DO NOT** place a pillow underneath the knee for comfort. To elevate your leg, it must be straight with pillows under your ankle.
- You may begin straight leg raising exercises with your brace on. While lying down, pull your foot all the way up, tighten your quadriceps muscle and lift your heel off of the ground. Hold this position for 2 seconds, and then let the leg back down. Repeat the exercise 10 times, at least 3 times a day.

Walking

- Bear weight as tolerated on the operative leg . Keep your brace locked when walking. Use crutches to assist with weight bearing.
 - DO NOT** bear weight. You may stand but **DO NOT** walk with full weight on the operative leg.
 - You may put 30% partial weight on your leg with your crutches
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Showering

- You may shower 5 days after surgery unless told otherwise. **DO NOT** immerse the knee under water and **DO NOT** rub the incision. Reapply new gauze pads, your ace wrap, and your brace after showering.
- You may **NOT** shower or get the dressings wet until after your doctor visit. Cover the bandages appropriately when washing to keep them from getting wet. Dressing Care
 - Keep the dressing dry.
 - You can expect some light wound seepage through the bandage. **DO NOT BE ALARMED**. Fluid seepage is normal. If the dressing does get soaked: Remove and replace with dry gauze and an ace wrap. **NEVER** remove paper tapes (steri-strips) or your sutures. You may drain more when the pain pump is pulled out. Re-apply your brace.
 - If the ace wrap is uncomfortable, you may remove it and rewrap it. Re-apply your brace.

Dressing removal:

- Remove brace and all dressings 48-72 hours after surgery. **NEVER** remove paper tapes (steri-strips) or your sutures. Apply fresh gauze and ace wrap. Wrap lightly over the wound. Re-apply the brace.
 - You should remove the pain pump when it is empty at about 48 hours. You may see increase drainage.
 - If you begin physical therapy, the dressing may be removed by the therapist.
 - DO NOT** remove the dressings until you are seen in our office.
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Arthroscopic Findings

- Torn ligament ACL PCL Other _____
 - Torn meniscus (cartilage) medial (inside) lateral (outside)
 - Joint lining irritation (synovitis)
 - Focal articular cartilage injury
 - Arthritis: Mild Moderate Advanced
 - Loose body or bodies
 - Other: _____
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Procedure Performed

ACL Reconstruction with _____ graft

- Partial meniscectomy (cartilage removal)
- Meniscus repair: limit bending your knee to 90° for 4-6 weeks.
- Joint surfacing smoothing (chondroplasty)
- Microfracture
- Articular cartilage (joint surface) repair

