

SIMON W. YOUNG

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Specialist Orthopaedic knee Surgeon, Associate Professor*

ANTERIOR CRUCIATE LIGAMENT RECONSTRUCTION +/- MENISCAL REPAIR Post-Operative Care

1. WOUND CARE

After the surgery you will have a padded crepe bandage on your knee, you can remove the bandage 48 hours after the surgery.

There are plastic dressings under the crepe bandage, some blood staining on these is normal. If there is heavy blood staining or leaking you can contact us, or you can get your GP's practice nurse to change the dressings.

You can shower with these plastic dressings on, although you should not point the water straight at them or soak in a bath or pool.

The sutures used are absorbable and do not need to be removed. The dressings stay on until you are seen in clinic.

Icing of the knee is helpful following surgery, especially in the first 72 hours. Use a bag of crushed ice or frozen peas for up to 30 minutes, 4-5 times per day.

2. ACTIVITY

Although the incisions are small, your knee has undergone significant surgery. During the first week ensure you get adequate rest and limit walking to what is necessary.

Elevate as much as possible and avoid long periods of time with the leg low down.

You can put full weight through the leg immediately. Use the crutches for as long as you need them for comfort and balance. You can stop using the crutches when it is comfortable to walk and your balance has returned (usually 1-2 weeks).

Sometimes, if a meniscal repair was also performed, you may be fitted with a brace. Weight-bearing is still allowed, but the brace needs to be locked out straight when walking. The brace can be unlocked to 0-90 when not walking. You can also unlock the brace to 0-90 when doing exercises (such as cycling) under the supervision of your physiotherapist. Most of the time, a brace is not required.

As it is sometimes difficult to get your knee fully straight after ACL surgery, avoid keeping pillows directly behind the knee. It is better to place the pillow under the calf.

3. PHYSIOTHERAPY

Physiotherapy is an important part of your recovery, and should start after the first two weeks following your surgery. **Simon Young will give you a copy of his ACL rehab protocol to take to your physiotherapist.**

FOLLOW UP

Wendy will typically arrange a follow up appointment 2-3 weeks after the surgery, please liaise with her to ensure the date and time is suitable for you.

If you have any concerns prior to your appointment please
phone 09 521 9849 or email ortho@axisportsmedicine.co.nz

After hours or if the query is urgent you can contact
Simon Young on 021 616 183 or email simon.young@auckland.ac.nz

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Questions & Answers

1. What medications do I take?

Your anaesthetist will prescribe post operative pain medication. Local anaesthetic has been placed in your knee. This will typically wear off 6-8 hours after the surgery so you can expect pain to increase after this so ensure you begin taking the painkillers at the first sign pain is increasing.

2. When can I drive?

You can drive when you can easily get into and out of the car without difficulty, when you have enough control of your leg that you can feel safe and confident behind the wheel and you are no longer taking strong pain medications. This is usually about 2 - 3 weeks for the left knee and 3 - 4 weeks for the right knee.

3. When can I return to work or school?

This depends upon the demands of your job, but plan to take at least 7 - 10 days off of work or school. You can be back to a desk job within a week or two but physically demanding jobs may take 3 - 4 months to return to.

4. When can I run?

Running is allowed after full range of motion, good strength and proprioception (balance) is attained. The earliest you can begin running straight ahead on a level surface is 8 to 10 weeks but often it takes 3 - 4 months. Your physiotherapist will help guide you.

5. Do I need a brace?

After simple ACL reconstruction a brace is not required.

Sometimes if a meniscal repair was also performed, you may be fitted with a brace, Simon will tell you if this is required. Weight-bearing is still allowed, but the brace needs to be locked out straight when walking. The brace can be unlocked to 0-90 when not walking. You can also unlock it 0-90 when doing exercises (such as cycling) under the supervision of your physiotherapist.

6. When can I return to sports?

Knee stability depends on both the ligaments and muscular control, and the knee remains at risk of re-injury until this good muscular control returns. You may return to "high risk" sports, ie those which require cutting and twisting (rugby, soccer, basketball) or are unpredictable (eg. skiing) only after you have regained your full range of motion, strength and balance. This usually takes a minimum of 6 months but may be longer, Simon and your physiotherapist will guide you.

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