

# Post-operative Instructions Following Anterior Cruciate Ligament Reconstruction (ACL)

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1. **Pain Management** You will be given a prescription for pain medications upon discharge from the hospital. You can expect to have pain for the first week or so after surgery. Pain medication should be taken to help alleviate the pain so that you are comfortable and can participate in Physical Therapy.
2. **Anticoagulation:** You should take one adult Aspirin per day for two weeks following your surgery. Do not take the aspirin if you have been told to avoid aspirin or if you have a history of stomach ulcers or bleeding. You should also wear the TEDS stockings until you follow-up in the office for your first postoperative visit. This will help with circulation and help to prevent a blood clot.
3. **Dressing/Wound:** You must keep your dressing dry and clean. It can be removed the second day following surgery, but the Steri-strips (white adhesive strips) should remain in place until your follow-up appointment. Cover the wound with a dry, sterile gauze dressing. The wound is sealed with the Steri-strips. The blue stitch will be removed at your postoperative visit. You can shower on the second day and can get the leg wet and wash it, but do not soak your leg (no bath tub / swimming pool). Check your incision daily for any signs of infection near the incision (redness, excessive swelling, or drainage). Should you have any concern about your wound, contact Dr. Berkson.
4. **Mobility** The amount of weight you put on your leg depends on the type of graft used. If you have had a patellar tendon allograft (cadaver) or hamstring graft you must wear the brace and use your crutches (partial weight-bearing) for six (6) weeks. If you have had a patellar tendon autograft (your own patellar tendon) you must wear the brace for six (6) weeks but can stop using your crutches as soon as you can.
5. **Braces** Your brace will be set to allow the knee to bend and straighten to a certain degree. Use the brace whenever you are up and about waking. Also keep on at night to avoid any accidents of falling. The brace should be taken off while in CPM (continuous passive motion) machine.
6. **Ice/Polar Care:** For pain, discomfort, or swelling, you can use the Polar Care for the first week. After the first week it can be used as needed (at the end of day or after therapy). The Polar Care unit *can* get *too* cold. Be sure to check your skin to make sure that there is no problem from the use of the cold therapy.
7. **Exercises:** You can begin the exercise program on the day of surgery as instructed by the protocol given preoperatively.
8. **CPM:** If necessary, the office may make arrangements to have a CPM machine delivered to your home prior to surgery. You should use the CPM for at least 10-12 hours per day. Start at 40 degrees flexion and 5 degrees hyperextension and progress to 100 degrees flexion as quickly as tolerated, preferably within 48 hours. You should remove your brace while in the machine.
9. **Postoperative Visit:** Call Dr. Sanders's office the following day after surgery to schedule your postoperative appointment. Your appointment should be approximately 10-14 days after your surgery. If you have any questions or if any problem arises following your surgery.
10. **Problems?** Sometimes the knee remains painful and swollen for several weeks, depending on the problem you have and the amount of surgery that was done. This is usually nothing to worry about. However, severe and worsening pain, redness, drainage, or fever could indicate infection (after the first day or two) and you should contact Dr. Sanders. **If you have any concerns, please call Dr. Sanders at 423 697 8781 or 423 624 2696.**