

**Anterior Cruciate Ligament Reconstruction
Postoperative Orders
Dr. Allan Hunt**

1. You were under general anesthesia and received sedation. Please rest and relax the day of surgery. Be aware of possible dizziness and exercise caution when you are on your feet.
A responsible adult must be with you for the first 24 hours following surgery for safety.
 - a. Do not drive for 24 hours after surgery or while using narcotic pain medication.
 - b. Do not operate power machinery.
 - c. No important decision-making or signing of legal documents for 24 hours.
 - d. Do not use alcoholic beverages for 24 hours or while taking narcotic medications.
 - e. If you are unable to urinate, feel uncomfortable and it has been 8-10 hours since you last urinated, go to an urgent care or an emergency room
2. Diet- Start with a light meal, such as soup, and advance as tolerated.
3. Activity
 - a. For the first 48 hours after surgery keep your leg elevated above the level of your heart as much as possible. Keep ice packs on your knee continuously during this time. Only get up to walk for going to the bathroom, sitting at the table to eat, and going to bed.
 - b. Bear as much weight on your operative leg as you can tolerate immediately.
 - c. Use your crutches as needed. They are to help you balance, as well as for your comfort.
 - d. You will use your knee immobilizer for up to 2 weeks after surgery. It is to prevent you from falling. Please wear it at night to bed for 3 weeks after surgery. This is so your knee will be straight in the morning making it easier for you to rehabilitate.
 - e. Start ankle pumps and quad sets 10 times every hour while you are awake.
4. Do not put a pillow under your knee. This will keep your knee flexed making it harder to achieve full extension. You may put pillows under your calf.
5. Medications
 - a. Resume all of your home medicines.
 - b. OxyContin- take 1 tablet every 12 hours as needed. This is a long-acting narcotic that gives good baseline pain relief.
 - c. Norco- take 1-2 tablets every 4-6 hours as needed. This is a short-acting narcotic to be used if you have breakthrough pain. Do not take Tylenol while you are taking this medication as it has Tylenol in it.
 - d. Naproxen- take 1 tablet twice a day with food. This is an anti-inflammatory that helps prevent some of the swelling associated with surgery.

- e. Compazine- take 1 tablet every 8 hours as needed. This is an anti-emetic medication that can help resolve some nausea and/or vomiting associated with anesthesia and other medications you are taking.
 - a. The use of narcotic pain medications can cause constipation. We suggest you use an over-the-counter stool softener while taking the Norco or OxyContin.
 - b. We suggest that you take a single aspirin daily for the first 10 days after your surgery to help prevent blood clots. There is a very low risk of developing blood clots, but we still would like you to use the aspirin for prevention for 10 days.
 - f. These pain medications may be taken in any combination according to how much pain you are having.
6. Wound care-
- a. Leave the dressings on your knee until 3 days after your surgery. You may then remove all the tape and gauze from your knee.
 - b. You may get some bleeding through your dressing immediately after your surgery. This is very normal and nothing to be alarmed about. Simply reinforce your dressing if this happens.
 - c. There are some small paper tapes over your wounds. Leave these in place until your follow-up appointment.
 - d. You may shower over your wound the day you remove all the dressings. Do not scrub it- just let the water run over it and gently pat it dry.
7. Physical therapy
- a. Make sure you have an appointment with a physical therapist. If you do not, please call 952-456-7000 and get in as soon as possible. Please tell the scheduler you will bring the therapy referral with you to your first appointment. This referral is attached to your paperwork.
 - b. Continue the exercises the therapist gives you at home.
8. Follow-up- Please make sure that you have a post-operative appointment set up for 10-14 days after your surgery with either Dr. Hunt or Mr. Nick Meath, and in 6-8 weeks after your procedure with Dr. Hunt. Please call 952-456-7000 to schedule if you have not done so.
9. TENS unit- Use as directed. You will have leads placed beneath your sterile dressing at the time of surgery. Once you start getting increasing pain in your knee, connect your unit to the leads and turn it on. You may increase the level of intensity as needed. You may use it as often as needed. There is no danger of electrical burn as the unit runs on a 9 volt battery. If you have any questions about your TENS unit, please contact our DJO Global representative, Dan Lemire at 651-208-0762.
10. Driving
- a. You may start driving as soon as you are off narcotic medications during the day.
 - b. We also ask that you be able to move your foot from the gas to the brake pedal in a manner needed to stop quickly. Please practice in an area with little traffic or

somewhere you are familiar with before driving anywhere with higher volumes of cars.

- c. Please call your insurance company to make sure you are covered during this perioperative period.
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- 11. Please call if you experience any of the following:
 - a. Fever over 101 degrees for more than 24 hours
 - b. Foul drainage, redness or warmth at the operative site
 - c. Large amounts of bleeding or drainage
 - d. Severe or uncontrolled pain
 - e. Persistent nausea or vomiting
 - f. Hives, rash or medication intolerance

*** Call 911 or go to the nearest Emergency Room if you experience shortness of breath, redness, warmth and extreme pain in the calf. These are signs of a blood clot.***