

**What you need
to know to
recuperate from
your surgery
successfully.**

Illinois Sportsmedicine and Orthopaedic Centers

OFFICE HOURS
Our switchboard is open
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**Anterior
Cruciate
Ligament
Reconstruction
Post-Operative
Information**

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Anterior Cruciate Ligament Reconstruction Post-Operative Information

Weight Bearing: You will use crutches to help you ambulate. You can put the foot down with light pressure on the operated leg on the day of surgery. When putting the foot down, you must put the heel down first, before the toes. You will have a removable brace on your knee. If it feels tight, you can loosen or remove it. Do not worry if you reapply it and it seems to fit differently. An exact fit is not required. We will schedule a physical therapy visit immediately following your first office visit.

Icing Your Knee: To help decrease pain you should ice your knee. Most patients receive an ice machine they can use at home. When you are having pain, you can keep the cold pads applied to the area continuously. If you do not have an ice machine, fill up a large zip lock plastic bag with ice. Put a clean thin towel or bandage on your knee then place the bag of ice on top. Do not put ice directly on your skin. Most patients use cold more or less continuously for the first week. Swelling in the knee is expected after surgery and a normal part of the healing process. It will resolve on its own gradually after surgery.

Recovery: You will go home on the day of surgery. At home you should elevate your operated leg on the equivalent of three or four pillows. If your dressing is bloody, don't worry. This is common as the fluid used to inflate your knee leaks out of your knee tinged with blood. You should schedule a visit to our office on the day after surgery. At that time we will change your dressing and you will see the physical therapist. We will also schedule another office visit for three or four days later, at which time your staples will be removed and steri-strips applied. These tapes stay on for eight more days. After that time you may shower, but you must keep the incisions dry until then. You will also see a physical therapist at this time who will begin you on range-of-motion exercises. Do not perform any exercises on your own until after you have been properly instructed by the therapist. You will gradually increase the weight you put on your operated leg and decrease the amount you put on your crutches. In time you will progress to using only one crutch (the one on the opposite side from your operation). Most patients progress to the use of no crutches after the fifth or sixth post-operative week. You should have full extension (straightening) and 90 degrees of flexion (bending) by the end of the second post-operative week. We will begin strengthening exercises for your knee later. At six months you will usually be ready for unrestricted activities including sports.

Pain Control: You will have hydrocodone with acetaminophen unless you are allergic. Take these as directed on the bottle. Never take more than 9 of these pills in a 24 hour period no more often than every 3 hours. Do not take if you are drowsy as the medication can cause respiratory suppression. Do not take aspirin, ibuprofen (Advil), Aleve or after surgery

as these medications cause bleeding and slow healing. However, you may take daily aspirin for your heart if it has been previously prescribed. The ice machine is also very effective for pain control. The pain should decrease steadily after surgery. An increase in pain can mean that you are doing too much, too soon. Call the office immediately if you have an increase of pain behind the knee or in the calf below the knee. This may be a sign of a blood clot in your leg.

Diet: You may eat whatever you wish. Do not push yourself to eat if you feel nauseated. It is important to drink a moderate amount of fluid. Many patients do not have much of an appetite for 24 hours after the surgery. As long as you are consuming fluids (Gatorade, clear non-caffinated soda or chicken broth are best) this is not a problem. Your appetite should gradually return.

Body Temperature –

Fevers: Your normal body temperature of 98.6 may increase normally by one degree in the evening. Thus, a true fever is usually over 100 degrees. Fevers are normal after surgery due to chemicals released by bleeding. Fevers in the first four post-operative days do not indicate the presence of an infection. Fevers over 100 degrees after the first four post-operative days may indicate infection. Infection is exceedingly rare after arthroscopic surgery. If your fever is over 101 degrees you may wish to take Tylenol if you are excessively hot, but in general the Tylenol (acetaminophen) in your pain prescription will provide sufficient temperature control. If your temperature is over 100 degrees on or after the fifth post-operative day, call me.