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POSTOPERATIVE INSTRUCTIONS

ANTERIOR CRUCIATE LIGAMENT(ACL) RECONSTRUCTION and ILIOTIBIAL BAND TENODESIS/POSTEROLATERAL CORNER(PLC)

Brian J Cole, MD

DIET

- Begin with clear liquids and light foods (jello, soups, etc.)
- Progress to your normal diet if you are not nauseated

WOUND CARE

- Maintain your operative dressing, loosen bandage if swelling of the foot or ankle occurs
- It is normal for the knee to bleed and swell following surgery – if blood soaks onto the bandage, do not become alarmed – reinforce with additional dressing
- Remove surgical dressing on the second post-operative day – if minimal drainage is present, apply waterproof band-aids over incisions and change daily
- To avoid infection, keep surgical incisions clean and dry – you may shower by placing waterproof band-aids over incision areas. Please remember to change band-aids daily
- NO immersion of operative leg (i.e. bath) *Brace may come off to shower

MEDICATIONS

Do not drive a car or operate machinery while taking the narcotic medication

- Pain medication is injected into the wound and knee joint during surgery – this will wear off within 8-12 hours
- Most patients will require some narcotic pain medication for a short period of time
- **ORAL PAIN MEDICATIONS**
Some pain, swelling, and bruising is expected after surgery. It is usually most severe for the first 2-3 days. The following strategies are especially important during this time. Try to anticipate an increase in pain when the nerve block wears off, usually within 12-24 hours.
- **Medication** — You may have received a prescription for narcotic and/ or anti-inflammatory medication. Please take them as instructed. The medication is most helpful if taken 30-45 minutes prior to any planned activity or exercise. Try to anticipate a return of pain after the nerve block has worn off by taking medication before going to bed.
 - If needed, you can take an over-the-counter anti-inflammatory in addition to your pain medication.
Do not take these if you are on blood thinners or have a history of ulcers.
 - Ibuprofen (Advil/Motrin) – Maximum of 800 mg every 8 hours
 - Naproxen (Aleve) – 1-2 tablets every 8-12 hours

SIDE EFFECTS OF THESE MEDICATIONS INCLUDE DROWSINESS AND CONSTIPATION. **YOU SHOULD NOT DRIVE OR DRINK ALCOHOL WHILE TAKING THESE PAIN MEDICATIONS.**

➤ OTHER MEDICATIONS

- Scopolomine Patch
 - This is a patch placed on the skin behind your ear pre-operatively to help prevent nausea and vomiting. You can remove the patch tomorrow morning unless you are still nauseated, in which case you may leave it on for up to 3 days. Remove immediately if you begin experiencing eye pain, dizziness, or a rapid pulse.
 - Stool Softeners
 - Post-operative constipation can result due a combination of inactivity, anesthesia, and pain medication. To help prevent this, you should increase your water and fiber intake. Physical activity such as walking will also help stimulate the bowel. If you do experience constipation, you may try taking a stool softener such as Metamucil powder or Senokot.
- Please take an adult 325mg Aspirin daily for 4 weeks following surgery, unless medically contraindicated or directed

ACTIVITY

- Elevate the operative leg to chest level whenever possible to decrease swelling
- Place pillows under knees (i.e., do not maintain knee in a flexed or bent position), but rather place pillows under foot/ankle to elevate leg
- Use crutches to assist with walking – Must remain 50% weight bearing until follow up unless otherwise directed.
- Do not engage in activities which increase knee pain/swelling (prolonged periods of standing or walking) over the first 7-10 days following surgery
- Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable

BRACE (If prescribed)

- Your brace should be worn fully extended (straight) at all times (day and night – except for exercises) until otherwise informed by the physician after the first post-operative visit
- Remove brace for flexion (bending) exercises done in a non-weight bearing position (i.e. lying or sitting) – if doing straight leg raises, keep brace on and locked in full extension (straight)
- Remove brace during exercise

Ice Therapy

- Begin immediately after surgery
- Use icing machine continuously or ice packs (if machine not prescribed) every 2 hours for 20 minutes daily until your first postoperative visit – remember to keep arm supported while icing
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Exercise

- Begin exercises 24 hours after surgery (straight leg raises, quad sets, heel slides and ankle pumps) unless otherwise instructed
- Discomfort and knee stiffness is normal for a few days following surgery – it is safe and, in fact preferable to bend your knee (unless otherwise instructed by physician)
- Complete exercises 3-4 times daily until your first postoperative visit – your motion goals are to have complete extension (straightening) and 90 degrees of flexion (bending) at your first postoperative visit unless otherwise instructed
- Do ankle pumps continuously throughout the day to reduce the possibility of a blood clot in your calf (extremely uncommon)
- Formal physical therapy (PT) will begin after your first postoperative visit and you will be given a script for this at that time

CONTACTING OUR OFFICE

EMERGENCIES**

*Contact Dr. Garcia at 206-633-8100 if any of the following are present:

- Painful swelling or numbness (note that some swelling and numbness is normal)
- Unrelenting pain
- Fever (over 101° - it is normal to have a low grade fever for the first day or two following surgery) or chills
- Redness around incisions
- Color change in foot or ankle
- Continuous drainage or bleeding from incision (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting
- Calf pain

**If you have an emergency after office hours or on the weekend, contact the same office number (206-633-8100) and you will be connected to our page service – this will contact Dr. Garcia or one of his physician assistants. If he is unavailable. Do NOT call the hospital or surgicenter.

**If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

FOLLOW-UP CARE/QUESTIONS

*If you do not already have a post-operative appointment scheduled, please contact the office immediately at 206-633-8100 to speak our Administrative Assistant or visit our website www.grantgarciamd.com

*Typically post-operative appointments are made for 10-14 days following the date of surgery

*If you have any further questions, contact the office directly.