



**SEAN E. JEREB, MD**  
ORTHOPEDIC SPORTS MEDICINE SURGEON

## **POST-OPERATIVE INSTRUCTIONS: KNEE LIGAMENT/ACL RECONSTRUCTION**

### **DIET**

- First meal should be clear liquids and light foods. (i.e. toast, crackers, soup, jello)
- Progress to normal diet if you are not nauseated

### **MEDICATION**

- One of three narcotic pain medications, Norco (hydrocodone), Ultram or Tylenol #3 will be prescribed to you. Take as directed.
- Common side effects of the pain medication are nausea, drowsiness and constipation – to decrease the side effects take the medication with food. An over the counter stool softener may be taken to prevent constipation.
- If you are having problems with nausea and vomiting, you may take Zofran as directed which has also been prescribed to you.
- If you have a nerve block, begin taking the pain medication the night of surgery to prevent a sudden onset of extreme pain. Do not wait until the block completely wears off.
- You may not drive or operate heavy equipment while taking narcotic pain medicine.
- If prescribed Lovenox for risk of blood clots, begin the day AFTER surgery.
- DO NOT take any medication containing Advil, naproxen or Ibuprofen for six weeks after surgery as this may impair graft healing.
- Resume all home medications unless otherwise instructed.
- Call the office immediately if you are having an adverse reaction to the medication.

### **WOUND CARE**

- Maintain your bandages after surgery. You may loosen them if you feel they are too tight.
- 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 if needed.
- Dressing can be changed 48 hours after surgery.
- To avoid infection, keep surgical incisions clean and dry, do not apply any ointments (i.e. Neosporin, Bacitracin, Triple antibiotic) cover surgical incisions with regular bandage- you may shower by placing a large garbage bag over your leg (with brace) 48 hours after surgery. NO immersion of the operative leg (i.e. bath, pool).



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**CRUTCHES**

- Full weight bearing as tolerated on the involved leg is allowed unless instructed otherwise after surgery to help with balance and stability.
- Crutches will be needed until physical therapy and Dr. Jereb deems them no longer necessary based on strength in the involved leg and ability to walk with a normal gait (no limp).

**CPM**

- The motion machine should be used **without** your brace for 3-4 hours each day as tolerated.
- Start at 0-40 degrees the day after surgery and increase 5 degrees per day as tolerated unless instructed otherwise. If this becomes too painful, you may decrease the flexion to a more tolerated degree and attempt to increase the following day.
- DO NOT sleep in the machine or exceed 120 degrees of flexion.

**BRACE**

- The post-operative brace, locked in full extension, is to be worn at all times while not in the CPM machine. This includes sleeping and showering.
- Dr. Jereb will instruct you when you are allowed to unlock and discontinue the brace.
  - o The brace is generally unlocked at your first post-operative visit.

**COLD THERAPY**

- Ice or cryo-cuff should be used for comfort and swelling liberally for the first 24 hours.  
**Never apply directly to exposed skin.**
- After the first day, use cold therapy 15-20 minutes every 2-3 hours.
- Always use after physical therapy to help with swelling and pain.



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**EXERCISE**

- Following the surgery three main goals exist:
  1. Full knee extension
  2. Quadriceps contraction and activation
  3. Control of pain and swelling
- Keep the leg elevated for several days to help with swelling.
- DO NOT put pillows under the knee at any time.
- Depending on your limitations after surgery, several exercises will be beneficial for you at home: quad sets, ankle pumps and straight leg raises will be demonstrated to you and should be done 3-4 times per day.
- To help gain full extension, place a small rolled up towel under your ankle and push the back of your knee to touch the floor by contracting your quadriceps muscle.
- Being up and around after surgery will help diminish the risk of blood clots.
- Formal physical therapy (PT) will begin 3 days post operatively; a preliminarily physical therapy script will be provided to you the day of surgery with Dr. Jereb's protocol.
- To schedule an appointment at BOS rehabilitation department please call **847- 885-0078**.

**EMERGENCIES**

- Contact Dr. Jereb's office (847-285-4200) if any of the following are present:
  - o Uncontrolled nausea and vomiting, painful swelling or numbness, unrelenting pain, fever  $>101.5^{\circ}$  (low grade fevers 1-2 days after surgery are normal), redness or continuous drainage around incisions (a small amount is normal), color change in foot or toes, **calf pain**
- **If you are having chest pain or difficulty breathing, call 911 or go to the closest emergency room.**

**FOLLOW-UP CARE**

- Please make your first post-op visit no later than 7-10 days after surgery if not done so already
- **If you have any questions or concerns please call clinical assistant at 847-285-4317.**