



ACL Reconstruction with Meniscus Repair: Post-Operative Instructions

- 1) **Review** the operative findings, procedures and photos.
- 2) Make sure **medications** are effective and not causing problems.
 - a) **Toradol (Keterolac)** for pain and inflammation. You may take one tablet every 8 hours. This medication should be taken **ONLY** for the first two days. If you have had any problems, allergies or stomach intolerance stop taking these medicines and please tell us!
 - b) **Keflex (Cephalexin)** this is an antibiotic to be taken as a prophylactic or preventative medicine once every 8 hours for 3 days. If you have a penicillin allergy this will be replaced by other options.
 - c) **Mupirocin Ointment**—continue to apply twice per day with Q-tip to nasal cavities (rim of nose/nostril) x 2 more days.
 - d) **Ultracet (tramadol/acetaminophen)** this is a pain medication that contains acetaminophen or Tylenol. You should not combine Ultracet with Tylenol to prevent overdosing of acetaminophen. It is okay to combine this medication with anti-inflammatory medications (NSAIDs) such as Advil or Aleve.
 - i) Directions for use: We recommend 1-2 tablets to be taken every 6 hours as needed for moderate-severe pain. You should not take more than 8 pills per day. **NOTE:** You may switch to extra strength Tylenol at any time if your pain is under reasonable control.
- 3) **Wound Care:**
 - a) Today we will change your dressings and remove the drain. We will re-dress the incisions with gauze and an ACE bandage for the first week. If you continue to bleed you will need to change the gauze from this dressing, otherwise leave the dressings on without changing.
 - b) The white stocking will stay on for 1 week.
 - c) **Please keep the incisions as dry as possible.** To shower you will need to cover the gauze and ACE wrap with a plastic bag so that the incisions do not get wet. We will waterproof the incision site once the sutures have been removed.
- 4) **Exercises and physical therapy:**
 - a) Continue **straight leg raises 4x/day.**
 - b) Start “Yoga stretch” for hamstrings: reach for surgical side toes and BREATHE.
 - c) Use the **ice machine** or “**Blue Packs**” **every hour.**
 - d) You will begin using the CPM 1-3 hours/day post operatively beginning 0°-30° at 24 hours. Range of motion will gradually increase 10° of flexion every other day as tolerated until comfortable and confident at 120° flexion.
 - e) The hinged knee **brace** will be locked at **0° for the first week.**



- f) Sutures will be removed at 1 week after surgery. After this, **range of motion** will gradually **increase as tolerated to 90°** in the brace.
 - i) The **brace** stays on for **3 weeks when you are up and about**.
 - g) Physical Therapy: You may begin **Physical Therapy 3 weeks after surgery**.
 - h) In most cases you will start the pedlar and/or biking progressions at or by 3 weeks.
- 5) **Crutches:**
- a) Make sure that you use **crutches for 3 weeks**.
 - i) You will be on a **partial weight-bearing (PWB)** status with the crutches.
- 6) **Follow Up Appointments:**
- a) Schedule a follow up visit in approximately 7-10 days for suture removal
 - b) The next appointment to follow will be at 6 weeks from your surgery date.
 - c) Expect to have an MRI prior to your 3-month follow up to check on healing.
- 7) **Notes etc:**
- a) Make sure you have all necessary notes and documentation for school or work.
- 8) **Issues: Remember, our goal is to make this process smooth and easy.**
If you have any questions, please ask us or call 310-310-2729.