

Michael S. Bogard, DO

ORTHOPAEDIC SURGEON

— Sports Medicine Specialist —

POSTOPERATIVE INSTRUCTIONS

Anterior Cruciate Ligament Reconstruction

** Please note that the instructions provided below are general guidelines to be followed; however, any written or verbal instructions provided by Dr. Bogard or his staff supersede the instructions below and should be followed.

PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION IF NECESSARY - DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE SURGERY CENTER OR VIA PHONE/EMAIL TO DR. BOGARD'S STAFF AFTER ARRIVING HOME

DIET

- Begin with clear liquids and light foods (jellos, 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 and ankle occurs.
- It is normal for the knee to bleed and swell following surgery. If blood soaks onto the ACE bandage, do not become alarmed, reinforce with additional dressing.
- To avoid infection, keep surgical incisions clean and dry for the first 7 days following surgery – you may shower by placing a large plastic bag/saran wrap over your brace beginning the day after surgery.
- Wait until your 1st post-operative appointment to have Dr. Bogard's team remove the surgical dressing.
- Please DO NOT place any ointments, lotions or creams directly over the incisions.
- Once the sutures are removed at least 7-10 days post operatively, you can begin to get the incision wet in the shower (water and soap lightly run over the incision and pat dry).
- DO NOT place the incisions under water (bath, pool) until given approval by Dr. Bogard

MEDICATIONS

- Local anesthetics are injected into the wound and knee joint at the time of surgery. This will wear off within 8-12 hours and it is not uncommon for patients to encounter more pain on the first or second day after surgery when swelling peaks.
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle.
- Common side effects of the pain medication are nausea, drowsiness, and constipation. To decrease the side effects, take the medication with food. If constipation occurs, consider taking an over-the-counter laxative and be sure to drink plenty of water.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medications changed.
- Do NOT drive a car or operate machinery while taking narcotic medication.
- Please avoid alcohol use while taking narcotic pain medication.

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- If you are having pain that is not being controlled by the pain medication prescribed, you may take an over-the-counter anti-inflammatory medication such as ibuprofen or naproxen in between doses of pain medication. This will help to decrease pain and decrease the amount of narcotic medication required. Please take as directed on the bottle.
- Take one 81 mg aspirin tablet twice daily (once in the morning, once in the evening) for 4 weeks following surgery to lower the risk of developing a blood clot after surgery. Please contact the office should you develop severe calf pain or significant swelling of the calf or ankle.

ACTIVITY

- Elevate the operative leg to chest level whenever possible to decrease swelling.
- Do not place pillows under knees (i.e., do not place the knee in a flexed or bent position), but rather place pillows under the foot/ankle.
- Use crutches to assist with walking – you are able to bear as much weight as tolerated on operative leg unless otherwise instructed. You must weight bear with the brace locked in **full extension** after surgery.
 - DO NOT WALK WITHOUT THE BRACE ON.
- Do not engage in activities which increase knee pain/swelling (prolonged periods of standing or walking) for the first 7-10 days following surgery.
- Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks.
- DO NOT drive until instructed by Dr. Bogard.
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable.

BRACE

- Your brace should be worn fully extended (straight) at all times (day and night – except for exercises) until otherwise instructed after the 1st post-operative visit.

ICE THERAPY

- Icing is very important in the initial postoperative period and should begin immediately after surgery.
- Use icing machine continuously or ice packs (if machine not prescribed) for 30-45 minutes every 2 hours daily until your 1st post-operative visit – remember to keep leg elevated to level of chest while icing. Care should be taken with icing to avoid frostbite to the skin.
- You do not need to wake up in the middle of the night to change over the ice machine or ice packs unless you are uncomfortable.
- If you have opted for the BREG Polar Care Wave cold/compression therapy unit, please follow the directions as directed.
 - More information with instructional video can be found at:
<https://www.breg.com/products/cold-therapy/devices/polar-care-wave/>

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 to bend your knee in a non-weight bearing position when performing exercises unless otherwise instructed.

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- Avoid flexing past 90 degrees until the 1st post-operative visit.
- Complete exercises 3-4 times daily until your 1st post-operative visit – your motion goals are to have complete extension (straightening) and 90 degrees of flexion (bending) at your 1st postoperative appointment unless instructed otherwise.
- Perform ankle pumps continuously throughout the day to reduce the risk of developing a blood clot in your calf.
- Formal physical therapy (PT) typically begins as soon as possible, ideally the next day after surgery. Otherwise, a prescription and protocol will be provided at your 1st post-op visit.

****EMERGENCIES****

- Contact Dr. Bogard's office at **858-703-1000** 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 or chills for the 1st day or following surgery)
 - 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 office at **858-703-1000** and you will be connected to our pager service.
- 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 our scheduler at **858-703-1000** to schedule.
- Typically the 1st post-operative appointment following surgery is 10-14 days following surgery
- Your 1st post-operative appointment will be scheduled with Dr. Bogard, he will do a wound check, go over therapy protocols and answer any questions you may have about the procedure.
- If you have any further questions please contact **858-703-1000**.
- Non-urgent questions after hours or on the weekends can be best sent via email to:
info@bogardortho.com