

Post-Operative Instructions

Knee Arthroscopy, ACL Reconstruction with Bone-Patellar Tendon-Bone Autograft

Day of surgery

- A. Diet as tolerated
- B. Icing is important for the first 5-7 days post-op. While the post-op dressing is in place, icing should be done continuously. Once the dressing is removed on the third post-operative day, ice is applied for 20-minute periods 3-4 times per day. Care must be taken with icing to avoid frostbite. Alternatively, Cryocuff or Game-ready ice cuff can be used as per instructions.
- C. Pain medication as needed every 4-6 hours (refer to pain medication sheet).
- D. Make sure you have a physical therapy post-op appointment scheduled during the first week after surgery.

First Post-Operative Day

- A. Continue icing
- B. Pain medication as needed.

Second Post-Operative Day Until Return Visit

- A. Continue icing
- B. Unless otherwise noted, you can bear as much weight on the affected leg as you can tolerate. Most patients use crutches for the first 2-3 weeks.
- C. Call our office to confirm your first postoperative visit, which is usually about 1-2 weeks after surgery. If you are experiencing any problems, please call our office.

Third Post-Operative Day

- A. You may remove surgical bandage and shower this evening. Apply 4x4 (or similar size) waterproof bandage to these wounds prior to showering and when showering is complete apply fresh waterproof bandage. Please ensure that the bandage is large enough to completely cover the incision. You will need to follow this routine for 2 weeks after surgery.



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Rehabilitation Protocol: Anterior Cruciate Ligament (ACL) Reconstruction with Bone-Patellar Tendon-Bone Autograft

Name: _____ Date: _____

Diagnosis: _____ Date of Surgery: _____

Phase I (Weeks 0-4)

- **Weightbearing:** As tolerated with crutches (maybe modified if concomitant meniscal repair/meniscal transplant or articular cartilage procedure is performed)
- **Hinged Knee Brace:**
 - Locked in full extension for ambulation and sleeping (**Weeks 0-1**)
 - Unlocked for ambulation and removed while sleeping (**Weeks 1-4**)
- **Range of Motion** – AAROM → AROM as tolerated
- **Therapeutic Exercises**
 - Quad/Hamstring sets
 - Heel slides
 - Non-weightbearing stretch of the Gastroc/Soleus
 - Straight-Leg Raise with brace in full extension until quad strength prevents extension lag

Phase II (Weeks 4-12)

- **Weightbearing:** As tolerated -- discontinue crutch use
- **Hinged Knee Brace:** Discontinue brace use when patient has achieved full extension with no evidence of extension lag
- **Range of Motion** – Maintain full knee extension – work on progressive knee flexion
- **Therapeutic Exercises**
 - Closed chain extension exercises
 - Hamstring curls
 - Toe raises
 - Balance exercises
 - Progress to weightbearing stretch of the Gastroc/Soleus
 - Begin use of the stationary bicycle

Phase III (Months 3-8)

- **Weightbearing:** Full weightbearing
- **Range of Motion** – Full/Painless ROM
- **Therapeutic Exercises**
 - Advance closed chain strengthening exercises, proprioception activities
 - Begin use of the Stairmaster/Elliptical
 - **Can Start Straight Ahead Running at 3 months**

Phase IV (Months 8-10)

- Gradual return to athletic activity as tolerated
- Maintenance program for strength and endurance

Comments:

Frequency: _____ times per week **Duration:** _____ weeks

Signature: _____ **Date:** _____

Pasadena Orthopedics

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