

Post-Operative Instructions **ACL & MCL Reconstruction + Meniscus Repair**

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 ice pack as needed.
- 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 @ 626-517-0022 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 or contact us via the internet at pasadenaorthopedics.com.

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.

Rehabilitation Protocol: ACL & MCL Reconstruction + Meniscus Repair

Name: _____

Date: _____

Diagnosis: _____

Date of Surgery: _____

EARLY PHASE (Weeks 0-4)

- **Weight Bearing and Range of Motion**
 - 0-6 weeks: toe-touch weight bearing w/ crutches
 - ROM: A/AAROM 0-90° as tolerated
- **Brace Use:**
 - Locked in full extension at all times other than PT
- **Therapeutic Elements:**
 - Modalities as needed
 - Patella Mob; SLR's with electric stim.; co-contractions, prone hangs
 - Estim; Cocontractions
 - *No abduction of hip or leg at any time.*
- **Goals:**
 - a/aa/ROM: 0-0-90
 - Control pain/swelling
 - Quad control

RECOVERY PHASE (Weeks 5-8)

- **Weight Bearing and Range of Motion:**
 - Discontinue crutches at week 6
- **Brace Use:**
 - At all times, unlocked for AROM; discontinue at week 8
- **Therapeutic Elements:**
 - Continue above
 - Gentle hip abduction with no resistance below knee
 - Wall-sits 0-45
 - Mini-squats with support 0-45
 - Carpet drags (not with PCL reconstruction!!)
 - Pool therapy
 - Treadmill walking by 8 weeks
- **Goals:**
 - a/aa/ROM: 0-0-110 by 6 weeks and free by 8 weeks
 - SLR x 30
 - No effusion

STRENGTHEN PHASE (Weeks 8-12)

- **Weight Bearing and Range of Motion:**
 - Full
- **Therapeutic Elements:**



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- Continue above with increased resistance
- Step-downs
- Treadmill
- Stretching
- Begin prone hangs and HSL
- **Goals:**
 - Walk 1-2 miles at 15 min/mile pace



REINTEGRATION PHASE (Months 3-5)

- **Weight Bearing and Range of Motion:**
 - Full
- **Brace Use:**
 - None
 - If return to sport, fitting for custom brace by 5 months
 - **Can start jogging/running at 6 months**
- **Therapeutic Elements:**
 - Slide boards
 - Begin agility drills
 - Figure 8's
 - Gentle loops
 - Large zig-zags
 - Swimming
 - Begin plyometrics at 4 months
- **Goals:**
 - Treadmill (walk 1-2 miles at 10-12 min/mile pace)
 - Return to competitive activities

Comments:

Frequency: ____ times per week

Duration: ____ weeks

Signature: _____

Date: _____