

## **Post-Operative Instructions** **ACL Posterolateral Corner Reconstruction**

### **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.
- 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 to confirm your first postoperative visit, which is usually about 1-2 weeks after surgery if you have not been given a time. 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.

### **4 months Post-op**

- A. Please call the number below to schedule a custom knee brace fitting. This functional knee brace shall be worn for 1 year after returning to sports.

## Rehabilitation Protocol: ACL and PLC (Posterolateral Corner) Reconstruction

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.**
    - **No prone hangs if PCL reconstruction!!**
  - **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, open to 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:**



- Continue above with increased resistance
- Step-downs
- Treadmill
- Stretching
- Begin prone hangs and HSL (if PCL reconstruction)

● **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:** \_\_\_\_\_