

# HOME CARE INSTRUCTIONS

## ANTERIOR CRUCIATE LIGAMENT RECONSTRUCTION WITH HINGED BRACE

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### WALKING / AMBULATING

- You will be supplied with a removable hinged brace. This hinged brace is necessary for the first 4 weeks. It needs to be worn at all times except for a short shower.
- You have been supplied with crutches to assist walking, but these should only be used for a day or two. Make sure you put all of your weight through the operated knee. If you do not weight bear through the operated leg it is liable to swell badly. Your knee may be somewhat sore and stiff on bending, but do the exercise as they will not damage your knee.
- During the first week try to spend time elevating the knee and using ice on it.

### PAIN / SWELLING

- Dr Clarnette has supplied a prescription for Panadol which is a pain reliever. Take as prescribed. Don't exceed the dose.
- You may also have been prescribed Voltaren 50 mg twice a day, this is an anti-inflammatory medication and will help to control pain and swelling and should be taken for 10 days. These tablets may induce gastric upset and should be discontinued if this occurs. There is also Endone, a strong pain reliever to use if required.
- Elevate the leg while sitting, preferably on a pillow or quilt cushion.
- Your leg may be slightly swollen. An ice pack applied to the area for no more than 10 minutes 2 – 3 times a day may help to relieve this.
- You should not notice any increase in discomfort or swelling in the knee, this is a sign you may be overdoing it. If the pain and swelling continues despite rest and analgesics, please contact Dr Clarnette.

### BANDAGING / DRESSING

- After your operation, there are a number of very small surgical incisions that have been sutured with dissolving sutures that will not need removing. The incisions are covered by a special adhesive glue and then a small white dressing which is covered by Opsite. The Opsite is like a clear plastic skin. The intention is that these dressings should remain on and undisturbed for 3 weeks. After 3 weeks the incisions should be healed so the plastic skin dressing (Opsite) and the small white dressing underneath this (Telfa) can be removed and the incisions will then be healed.
- Over the top of the dressing will be a layer of synthetic wool and Tubi grip. It is best to leave this undisturbed for the first 24 hours and then the Tubi grip can be removed and the wool can be removed and discarded. Have a short shower without the brace and the Tubi grip and then after the short shower replace the Tubi grip and put the brace back on. This process needs to be continued for 4 weeks.

### EXERCISES

- See below.
- Note that the exercises are done with the hinged splint on.
- The hinged splint prevents any hyperextension and will prevent a little bit of flexion, but doing the exercises with the splint on within the range of motion allowed by the hinges.

### RE-APPOINTMENT

- Routinely you will be given an appointment to see Dr Clarnette between 2-3 weeks after surgery.
- If this has not been made for you please contact Dr Clarnette's rooms in the next 2-3 days.

### PHYSIOTHERAPY

- A physiotherapist from the Wakefield Sports Clinic will visit you before discharge and will outline a plan for further appointments.

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## ANTERIOR CRUCIATE LIGAMENT

### DAY SURGERY AND INPATIENTS

Exercises are very important following an ACL reconstruction. The aim of exercise is to:

- Strengthen muscles
- Regain knee movement.
- Minimise swelling
- Eventually walk without limping.

You need to begin exercises immediately after surgery and continue three times daily. Try ten repetitions of each exercise. Icepacks are useful to minimize pain and swelling. Use them for 20 minutes every two hours when awake. Do not apply ice directly to skin but wrap in a damp towel. You will be given assistance to walk with crutches after surgery. You should try to place the foot of the operated leg on the ground and we will aim for a normal heel-toe gait.

If you can't do all of these exercises in the first few days, just do what you can without aggravating your pain levels. Gradually progress the exercises and call your physiotherapist if you are having trouble.

These exercises will last for the first two weeks. Once they are easy add more repetitions.

#### 1. ANKLE PUMPS & DEEP BREATHING

Do these HOURLY while awake for the first few days. Pump both feet up and down, and move them in circles. This helps prevent pooling of blood in the calf post-operatively.



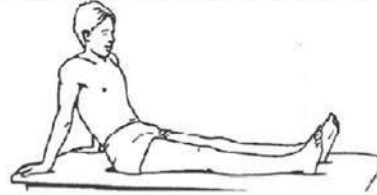
#### 2. KNEE FLEXION

Sitting on a chair or on the edge of the bed, slide your foot in and out as far as you can to bend the knee.



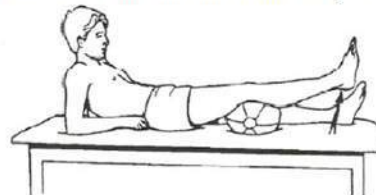
#### 3. STATIC QUADRICEPS

Push your knee flat into the bed, tightening the muscle on the front of your thigh. Hold for five seconds.



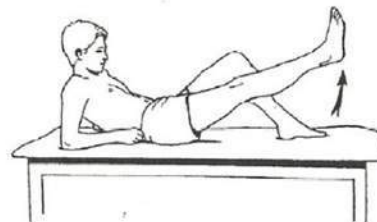
#### 4. INNER RANGE QUADRICEPS

With a rolled towel under your knee, push knee flat into the towel and lift heel off the bed to straighten the knee. Hold for five seconds and then slowly lower.



#### 5. STRAIGHT LEG RAISES

Lying on your back, brace your knee by bracing your quads and then lift the whole leg (keeping the knee straight) about 30cms off the bed. Hold for five seconds, then lower.



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### DAY SURGERY AND INPATIENTS

#### 6. GLUTEALS / BRIDGING

##### **Static Gluteals:**

Gently squeeze buttocks together, hold for five seconds.

##### **Bridging:**

Bend up non-operated knee and keep operated leg out straight. Push head, shoulders/elbows into the bed to lift your bottom off the bed. Hold for five seconds, then lower.



#### **NOTE:**

Whilst it doesn't take long to resume normal activities and discard crutches, your knee still needs to be protected from landing, running, twisting or heavy lifting. The graft itself does not reach full maturity until around nine months. Your surgeon will advise you regarding return to sport.

After two weeks you should find this exercise program easy. We aim for 90° flexion or more at this stage and walking should be normal, without a limp.

You will need to see your physiotherapist for more challenging exercises and these may include: home exercises, hydrotherapy, exercise bike, gym rehabilitation etc.

#### 7. WALKING

Ambulation with crutches will begin in the first one or two days. You will need crutches for the first one or two weeks.

When walking, try to fully straighten the knee when you take weight through the operated leg.

You are safely able to take as much weight through the knee as you feel comfortable.

Try to walk with a normal heel-toe pattern.

