

Paul C. Chin, MD, PhD 20639 Kuykendahl Road, Suite 200 Spring, TX 77379 Office: 832-698-0111 Fax: 832-698-0150

Post-Operative Instructions – Anterior Cruciate Ligament Reconstruction

- 1. Leave dressing on until you return to clinic.
- 2. Weight bearing as tolerated with crutches with brace locked in full extension. You may unlock the brace for sitting.
- 3. Physical therapy as per Dr. Chin's protocol. Therapist should call office for any questions.
- 4. **Begin anticoagulation regimen:** Aspirin 325 mg once per day x 4 weeks. If you have any difficulty using blood thinners or have bleeding in your stool, please alert us.
- 5. Begin anti-inflammatory regimen: EC-naprosyn 500 mg twice per day for 4 weeks.
- 6. Constipation can occur with pain medication. Take an over-the-counter laxative such as colace or senna as needed. Try to decrease pain medications as tolerated.
- 7. Please do not use bacitracin or other ointments under the bandage.
- 8. Use the cryocuff or ice packs as often as possible, and at least 20 minutes four times per day. An ace wrap may be used to help you control swelling.
- 9. Shower 2-3 days after surgery if the incisions are dry. Gently pat the area dry after shower.
- 10. Do not soak the knee in water or go swimming (pool or ocean) until your incisions are healed.
- 11. Driving: you should not drive while taking pain medication.
 - a. If surgery was on your right knee, driving is not permitted until you are able to ambulate without crutches (1-2 weeks).
 - b. If surgery was on your left knee, driving is not permitted until you are able to bend the knee according to rehab guidelines.
- 12. Discontinue pain meds when able.
- 13. If you develop a fever (101.5), redness or drainage from the surgical incision site, please call our office to arrange for evaluation.

Weight bearing instructions: Weight bearing as tolerated with crutches with brace locked in full extension. You may unlock the brace for sitting.

If you have any questions, please call our office.