

Paul C. Chin, MD, PhD

20639 Kuykendahl Road, Suite 200

Spring, TX 77379 Office: 832-698-0111 Fax: 832-698-0150

Post-Operative Instructions – Posterior Cruciate Ligament Reconstruction

- 1. Leave dressing on until you return to clinic.
- 2. Do not place any weight on the operative leg. Use crutches at all times.
- 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. Use the cryocuff or ice packs as often as possible, and at least 30 minutes four times per day. An ace wrap may be used to help you control swelling.
- 8. Shower 2-3 days after surgery if the incisions are dry. Gently pat the area dry after shower.
- Do not soak the knee in water or go swimming (pool or ocean) until your incisions are healed.
- 10. Driving:
 - a. If surgery was on your right knee, driving is not permitted until after Dr. Chin releases you from crutches (4-6 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.
- 11. Discontinue pain meds when able.
- 12. 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: no weight on leg for 2 weeks.

Brace Instructions: No flexion for 2 weeks, keep brace in full extension. No active flexion of knee for 6 weeks.

If you have any questions, please call our office.