



## **RICHARD A. MCCORMACK, M.D.**

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## Post-Operative Instructions: **PCL RECONSTRUCTION**

### **Activity**

- Try and rest the first few days following surgery. When sitting or lying down be sure to keep your leg elevated up above the level of your heart to help decrease swelling.
- Ice or the cryo-cuff can be used as much as possible for the first 3-4 weeks to help decrease swelling.
- Crutches are required for the first 4 weeks after surgery. You should put partial weight on the leg for the first 6 weeks after surgery.
- You have been placed in a knee immobilizer. You will wear this for the first 2 weeks following surgery, at which point you will be switched to a hinged knee brace. The immobilizer needs to be locked (straight) in extension when standing or walking for the first two weeks after surgery. The immobilizer also must be worn while sleeping at night. You may remove your brace 4-5 times a day while seated or lying down, and begin to bend and straighten your knee.
- Driving is not recommended when taking narcotic pain medication.
- Return to (sedentary) work or school the day after surgery if pain is tolerable. Return to heavy labor or excessive ambulatory activities will be determined by Dr. McCormack

### **Dressings**

- Remove the dressing and gauze wrap 48-72 hours after surgery. Clean the surrounding skin with water or rubbing alcohol and cover the sutures loosely with band-aids or a clean dressing. Be sure not to vigorously rub over any of the incision sites as they are still healing.
- Small amounts of bloody drainage, numbness at incision site, knee swelling, and bruising are normal findings following surgery.
- Do not use bacitracin or any ointments under band-aids.
- If there are small white tape strips that have been placed across your incision, do not remove them.
- Keep your sutures clean until your first follow-up visit. If you wish to shower, do not scrub the area of the incision. Dab the incision dry after showering. **DO NOT SOAK** your knee in a bath tub.

## Medication

- You have been prescribed one of the following pain medications:
  - o **Tylenol #3** – Please take 1 to 2 tabs every 4-6 hours as needed for pain. DO NOT take more than 6 tablets per day
  - o **Percocet** – Please take 1-2 tabs every 4-6 hours as needed for pain.
- As the pain gradually improves you may transition over to Extra-Strength Tylenol which is a strong non-narcotic alternative for pain.
- Try to avoid anti-inflammatory medication (eg. Advil, Alleve) for the first few weeks following surgery as certain studies have shown them to adversely affect healing.
- If you have any side effects (i.e. Nausea, rash, trouble breathing) from medication discontinue its use and call our office.

## Physical Therapy

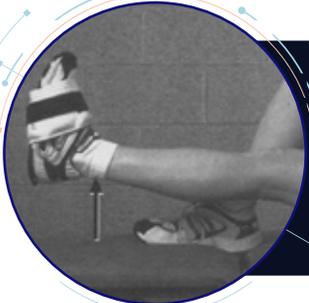
- Schedule Physical Therapy to begin approximately one week after surgery. You will receive your physical therapy prescription at your first post-operative visit.
- A list of home exercises has been enclosed for you to do during your first week following surgery.

## Follow Up

- Follow up the day after surgery to review the findings of the surgery and to discuss the postoperative plan
- Sutures will also be removed in the office 2 weeks after surgery
- Call the office immediately if you develop a fever (>101.5), chills, excessive incision drainage, calf pain, or increased numbness in leg.
- If you have any questions or concerns please feel free to call the office.

## Home Knee Exercises

### Straight Leg Raise in Brace



With your leg straight, lift your heel 12 inches from the ground and slowly back down. No weight is needed on the foot during the first 2 weeks after surgery.

3 sets of 15 reps as tolerated

### Isometric Quad Contractions

While lying on your stomach, place rolled up towel under ankle. Straighten knee against towel and hold for 15 seconds, stop, and then repeat.

3 sets of 15 reps as tolerated