

Patient name:
Date of Surgery:
Surgery performed:

Tyler McGregor D.O. General Ortho and Sports Medicine South Bend Orthopaedics Rehabilitation Protocol and Post-Operative Instructions: ACL Reconstruction + Meniscal Repair

FIRST POST-OP WEEK

- A well-padded post-operative dressing will be placed in the operating room. Keep this clean and dry until removed by PT/OT at your first appointment.
- Crutches will be provided. You will be partial weight bearing for approximately 6 weeks after surgery. No more than 25% of your body weight should go through your operative leg when walking.
- A hinged knee brace will be placed in the operating room. This should be worn at all times, including sleeping, unless doing certain PT exercises or showering. The brace should be locked in extension when walking but will permit for 0-30° of knee flexion when unlocked.
- **Quad sets and ankle pumps** perform 10 repetitions of each, 10 times a day, starting the day after surgery.
- Take your pain medication as prescribed, as needed for pain.
- PT/OT ~ 5 days postoperatively
 - o Removal of postoperative dressing
 - o Reaffirming correct performance of quad sets and ankle pumps, and crutch use
 - o Edema control via compression, manual mobilization and/or cold therapy.
- Formal therapy to occur once per week, with patient performing routine on own daily.

FIRST POST-OPERATIVE APPOINTMENT ~ 10-14 days after surgery

- Motion/incision check, suture removal.
- The brace range of motion may be increased to 60° of flexion, brace is still to be locked in extension while ambulating.
- **3 WEEKS POST-OP** Scar mobilization techniques may be initiated by PT/OT.
- **4 WEEKS POST-OP** Range of motion brace limits increased to 90° by your PT/OT.
 - Increase weight-bearing to 50% of your body weight.

6 WEEKS POST-OP – hinged knee brace discontinued, 2nd postop visit

- Progress to weight bearing as tolerated on the surgical leg, wean off crutches.
- Once full range of motion and a satisfactory healing time frame has been obtained, a work
 conditioning program is recommended for manual laborers, jobs that require heavy lifting, or lots of
 time spent on their feet.
 - Physical Therapy visits may increase to 2 or 3 formal visits weekly during this period.





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12 WEEKS POST-OP – 3rd postoperative visit

- Re-introduction of sport-specific activity. A strengthening protocol with therapy bands, cables, free weights, pivoting, cutting, acceleration/deceleration activities, and plyometrics must be followed in a stepwise and progressive fashion.
- It may take 6 months or more to return to full function for those with high demand employment, or athletic activities.

Further follow-up may be scheduled based on patient progress, and clearance needed to return to full activity.