**Patient Discharge Instructions**

The following information relates to your discharge from your ACL Reconstruction procedure.

**Medication**

You may be given on or more of the following:

- **Lortab® (hydrocodone/acetaminophen)**
  Take 1-2 every four to six hours as needed for pain. Do not take with acetaminophen (such as Tylenol®) as Lortab® already contains acetaminophen.

- **Percocet® (oxycodone/acetaminophen)**
  Take 1-2 every four to six hours as needed for pain. Do not take with acetaminophen (such as Tylenol®) as Percocet® already contains acetaminophen.

- **Aspirin**
  Take one 325mg tablet each day for 30 days if no history of problems with aspirin.

**Bandages**

Bandages should be removed the third day after surgery unless instructed otherwise. Leave steri-strips in place. Leave suture in place. If wounds are dry, they do not need to be covered. You may prefer a light, clean dressing to reduce irritation from pants or brace. If you have sutures on the outside of the skin (some are dissolving under the skin, some are outside the skin) you may want to cover the ends with an adhesive bandage so they do not catch on clothing.

**Showering**

If the wounds are dry (no bleeding or draining), you may shower the third postoperative day, after bandage removal. Take a brief shower. It is alright to let water run over the wounds, but do not scrub. Pat dry with a clean towel. You may wish to place a clean gauze over the wounds after showering. Do not soak in a pool or tub until your wounds have been checked by the doctor and cleared.

**Ice**

You may ice the knee as needed. Use a schedule of 20 minutes with the ice on, followed by at least 20 minutes with the ice off. This will prevent injury and frostbite. Keep a layer between the ice and your skin. A regular icing schedule, particularly in the first week, often helps with pain control.

**Crutches**

Initially after surgery, you may need to use crutches either for comfort or because you have been instructed to do so. With crutches, the majority of your weight should be on the hands (not the armpit). Use extra caution around uneven or slippery surfaces. If you have been given crutches “as needed” or “for comfort only,” you may want to progress to a single crutch as you improve. For single crutch use, place the crutch on the opposite side from your surgery to keep your weight balanced.

**Ted Hose**

You should wear the Ted Hose for 2-3 weeks to help control swelling and reduce the risk of blood clots.
Activity Level
After surgery, begin ankle pumps, quad sets and straight leg raise exercises the evening after surgery (see below). Also begin work on range of motion of the knee. Note if you were given limitations to motion on your instructions.

Return to Work
Light duty/desk work may be resumed 3-10 days after surgery, depending on comfort. Individual response varies greatly. You should consider starting back with half days to “test the waters.” Any other work-related activities should be cleared with Dr. Scholl.

Follow-up Appointments
Call for your follow-up appointment 6-10 days after surgery. Dr. Scholl has clinic on Mondays, Tuesdays and Thursdays.

Physical Therapy
Physical therapy is one of the most important factors in recovery after ACL surgery. It is important to begin within 1-3 days after surgery. Dr. Scholl has a specific ACL rehab protocol which your therapist should have. If they do not have this protocol, have them call the office and we will fax it to them or they can find it online at www.EnduranceOrtho.com. If you or your therapist have questions about instructions, please call the office for clarifications.

Please Call the Office if You Experience any of the Following:
Temperature above 101.5˚ (mildly elevated temperatures are common).
Increasing pain, not relieved by medication.
Increasing drainage from the wound.
Increasing redness (not related to bruising).
Significant swelling and/or pain in the calf.

For emergencies, such as difficulty breathing, go to the emergency department or call 911.