

Discharge Instructions: ACL Reconstruction Surgery

What to Expect After Surgery

- It is normal for your **knee to feel warm** and appear **swollen** for several weeks. Swelling may increase with activity and improve with rest and elevation.
- You may notice **numbness or sensitivity** around the incision—especially on the outer side of your knee. This can last for several months.
- These symptoms are part of the normal healing process. If you are unsure whether something is normal, please contact your orthopedic surgeon or care team.

Icing / Cold Therapy

Cryotherapy reduces pain and swelling and can improve sleep and reduce your need for pain medications.

- **How to Ice:** Apply ice or a cold therapy device for **20–30 minutes every hour**, especially during the first 48 hours after surgery.
- **Always protect your skin** by placing a cloth or T-shirt between your skin and the ice/cooling unit.

Safety Tip: Cold therapy can cause skin injury if used improperly.

Check your skin **every 20 minutes** while icing. Stop if you notice:

- Burning
- Redness or discoloration
- Blisters or welts
- Increased pain or unusual skin changes

Swelling

Swelling is expected after ACL surgery and may continue for several weeks.

- **Elevate your leg above heart level** as much as possible during the first few days to help reduce swelling.
- Perform ankle pumps frequently to promote circulation and decrease the risk of blood clots.

Dressing Care

- You will go home with a **compression stocking (TED hose)** and a dressing over your knee.
- **Do not remove the dressing** unless instructed by your orthopedic surgeon or physical therapist.
- Keep the dressing **clean and dry** at all times.

Compression Stocking (TED Hose)

- Wearing the TED hose helps manage leg and foot swelling.
- It's okay to **remove the stocking** for comfort, cleaning, or to wash it—but **wear it as much as possible** until your follow-up visit.

Weight Bearing and Brace Use

- You must use your **knee brace and crutches** after surgery.
- You may gradually increase weight-bearing **while wearing the brace**, as comfort allows.

- Your physical therapist will guide you on when and how to begin walking without crutches and advancing mobility.

Bathing / Showering

- Keep your incision(s) **clean and completely dry** until your follow-up appointment.
- Avoid tub baths, pools, or soaking until cleared by your surgeon.

Driving

You may resume driving when:

- You are **no longer taking narcotic pain medications**.
- You have **full control of your leg**, can **brake safely**, and can **walk without a limp**.

This typically occurs **3 to 6 weeks** after surgery, depending on which leg was operated on and your progress.

Medications

You will likely receive a prescription for a **narcotic pain medication**.

- Take only as directed and **only as needed** for pain.
- Narcotics cause **constipation**—drink plenty of water and eat a high-fiber diet.
- **Do not drive, operate machinery, or drink alcohol** while taking narcotics.

When to Call Your Surgeon

Contact your orthopedic surgeon immediately if you experience:

- Fever **above 101.5°F**
- Chills
- Persistent or increasing pain
- Redness or warmth around the incision
- Significant or worsening knee swelling
- Numbness or tingling in the leg or foot
- Unusual bleeding or drainage

Emergency Warning Signs

Seek emergency care immediately if you experience:

- **Chest pain**
- **Shortness of breath**

These could be signs of a **life-threatening blood clot** or pulmonary embolism.