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Orthopedic Surgery & Sports Medicine

Anterior Cruciate Ligament Reconstruction: What to Expect at Home

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Your Recovery

Anterior cruciate ligament (ACL) surgery replaces the damaged ligament with a new ligament called a graft. In most cases, the graft is a tendon taken from your own knee or hamstring. In some cases, the graft comes from a donor.

You will feel tired for several days. Your knee will be swollen. And you may have numbness around the cut (incision) on your knee. Your ankle and shin may be bruised or swollen. You can put ice on the area to reduce swelling. Most of this will go away in a few days. You should soon start seeing improvement in your knee.

You may be able to return to most of your regular activities within a few weeks. But it will be several months before you have complete use of your knee. It may take as long as 6 months to a year before your knee is ready for hard physical work or certain sports.

Surgery can help. But even after surgery, your knee may not be as strong as it was before the injury. You will need to build your strength and the motion of your joint with rehabilitation (rehab) exercises.

How soon you can return to sports or exercise depends on how well you follow your rehab program and how well your knee heals. Your doctor or physical therapist will give you an idea of when you can return to these activities. Most people can jog in about 4 months and run or cycle in about 4 to 6 months. You may need to wear a knee brace when you play sports.

This care sheet gives you a general idea about how long it will take for you to recover. But each person recovers at a different pace. Follow the steps below to get better as quickly as possible.

How can you care for yourself at home?

Activity

- Rest when you feel tired. Getting enough sleep will help you recover. Sleep with your knee raised, but not bent. Put a pillow under your foot. Keep your leg raised as much as you can for the first few days.
- You can use a brace and crutches to move around the house to do daily tasks. Don't put weight on your leg without these until your doctor says it's okay. Your thigh muscles will be weak, so take your time and be safe. You will have the crutches for 1 to 2 weeks.
- If you have a brace, leave it on except when you exercise your knee or you shower. (Not all doctors use braces.) Be careful not to put the brace on too tight. You will probably need to use it for 2 to 6 weeks.
- For about 12 weeks, do not do any strenuous activity. This includes not only sports, but also things like mowing lawns, raking leaves, and shoveling snow.
- You may shower 24 to 48 hours after surgery, if your doctor okays it. When you shower, keep your bandage and incision dry by taping a sheet of plastic to cover them. It might be best to get a shower stool to sit on. If you have a brace, only take it off if your doctor says it's okay.
- If your doctor does not want you to shower or remove your brace, you can take a sponge bath.
- Do not take a bath, swim, use a hot tub, or soak your leg for 2 weeks or until your doctor says it's okay.
- You can drive when you are no longer using crutches or a knee brace, are no longer taking prescription pain medicine, and have some control over your knee. For most people, this takes 1 to 2 weeks.
- How soon you can go back to work depends on your job. If you sit at work, you may be able to go back in 1 to 2 weeks. But if you are on your feet at work, it may take 4 to 6 weeks. If you are very physically active in your job, it may take 4 to 6 months.

Diet

- You can eat your normal diet. If your stomach is upset, try bland, low-fat foods like plain rice, broiled chicken, toast, and yogurt. Drink plenty of fluids.
- You may notice that your bowel movements are not regular right after your surgery. This is common. Try to avoid constipation and straining with bowel movements. You may want to take a fiber supplement every day. If you have not had a bowel movement after a couple of days, ask your doctor about taking a mild laxative.

Medicines

- Your doctor will tell you if and when you can restart your medicines. They will also give you instructions about taking any new medicines.
- If you stopped taking aspirin or some other blood thinner, your doctor will tell you when to start taking it again.
- Take pain medicines exactly as directed.
    - If the doctor gave you a prescription medicine for pain, take it as prescribed.
    - If you are not taking a prescription pain medicine, ask your doctor if you can take an over-the-counter medicine.
- If your doctor prescribed antibiotics, take them as directed. Do not stop taking them just because you feel better. You need to take the full course of antibiotics.
- If you think your pain medicine is making you sick to your stomach:
    - Take your medicine after meals (unless your doctor has told you not to).
    - Ask your doctor for a different pain medicine.

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Incision care

- If you have a bandage over your incision, keep the bandage clean and dry. Follow your doctor's instructions. Your doctor will probably want you to leave the bandage on until you come back to the office. If your doctor allows it, you may be able to remove the bandage 48 to 72 hours after your surgery.
- If you have strips of tape on the incision, leave the tape on for a week or until it falls off. Keep the area clean and dry.

Exercise

- Do your rehab exercises as instructed. Exercise in a rehab program is an important part of your treatment. It will help you improve your knee's range of motion and regain your muscle strength.
- If you are given a continuous passive motion machine, use it as directed. This machine will do some of the exercises for you. You will use it for about 2 weeks.

Ice and elevation

- Put ice or a cold pack on your knee for 10 to 20 minutes at a time. Try to do this every 1 to 2 hours for the next 3 days (when you are awake). Put a thin cloth between the ice and your skin. If your doctor recommended cold therapy using a portable machine, follow the instructions that came with the machine.

- For 3 days after surgery, prop up the sore leg on a pillow when you ice it or anytime you sit or lie down. Try to keep it above the level of your heart. This will help reduce swelling.
- If your doctor gave you support stockings, wear them as long as you are told to.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

When should you call for help?

Call 911 anytime you think you may need emergency care. For example, call if:

- You passed out (lost consciousness).
- You have chest pain, are short of breath, or you cough up blood.

Call your doctor now or seek immediate medical care if:

- You have pain that does not get better after you take pain medicine.
- You have tingling, weakness, or numbness in your foot or toes.
- Your cast or splint feels too tight.
- Your foot is cool or pale or changes color.
- You are sick to your stomach or cannot drink fluids.
- You have loose stitches, or your incision comes open.
- You have signs of a blood clot in your leg (called a deep vein thrombosis), such as:
    - Pain in your calf, back of the knee, thigh, or groin.
    - Redness or swelling in your leg.
- You have signs of infection, such as:
    - Increased pain, swelling, warmth, or redness.
    - Red streaks leading from the incision.
    - Pus draining from the incision.
    - A fever.
- You bleed through your bandage.

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Watch closely for any changes in your health, and be sure to contact your doctor if:

- You have a problem with your cast or splint.
- You are not getting better as expected.