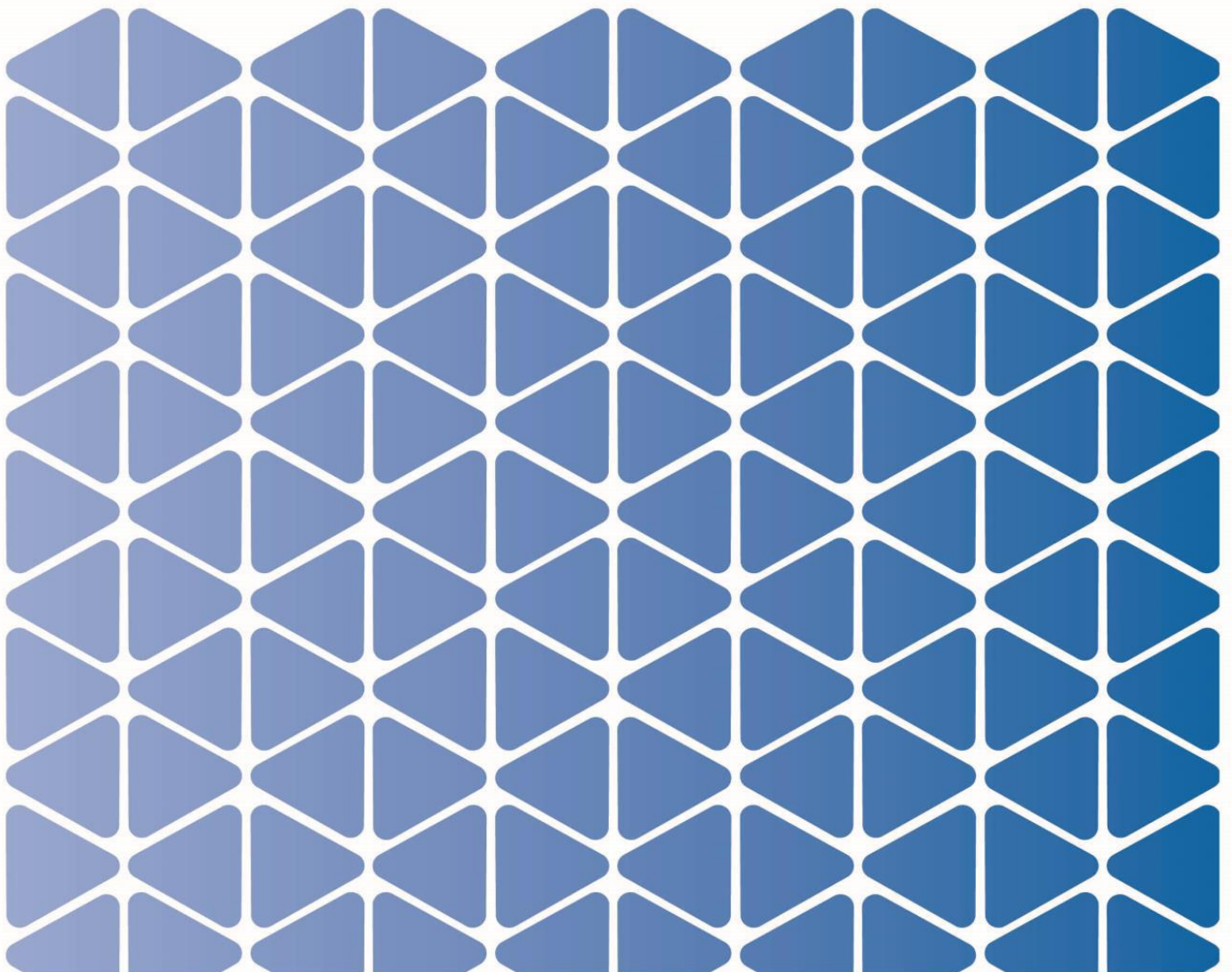




PATIENT INFORMATION

ANTERIOR CRUCIATE LIGAMENT (ACL) RECONSTRUCTION

POST-OPERATIVE PHYSIOTHERAPY ADVICE AND REHABILITATION



Following your Anterior Cruciate Ligament (ACL) reconstruction it is important that you participate fully in your rehabilitation to ensure the best outcome. Your advice and exercises will vary dependent upon the surgical technique used in your procedure. This will mean that you will either be allowed to weight bear on your operated leg or not. Your Physiotherapist will advise you on the specific details of your post-operative instructions and these will be marked off in the sections below. **Do not carry out any exercises or advice which has not been marked off unless advised otherwise by your Consultant or Physiotherapist.**

Generic rehabilitation advice

Regardless of which surgical team has carried out your operation, the following advice applies to your rehabilitation:

Protection of the ACL reconstruction

During the rehabilitation period, the new ligament can be put under strain if the lower part of the operated leg is not supported when lifting the leg. This means that after the operation:

- ❖ **You should support the lower part of the operated leg with your hands, or your 'good' leg to get on and off your bed;**
- ❖ **You should NOT do a 'straight leg lift' exercise with your operated leg.**

These points will be explained to you in more detail by your Physiotherapist.

Swelling management

Your knee will swell after the operation. To help reduce this you should:

- ❖ **Keep your leg elevated (ankle higher than hip) when you are resting;**
- ❖ **Do not walk long distances (i.e. no longer than 15 minutes at a time) for the first week after your surgery.**

Once you have removed your outer bandage you should apply 'cold' to your knee. Cover your knee with cling film or a plastic bag and place a large bag of frozen peas or crushed ice, wrapped in a damp towel, around the knee for 15 minutes.

You must remember to use the towel and plastic cover to prevent ice burns and protect the wounds. Try to do these 3 times each day, but never exceed 15 minutes at a time.

Resting positions

When resting after doing your exercises, or walking with your crutches, you should rest with your knee straight. This is very important; do not put any support under the knee such as a pillow which keeps the knee partly bent.

Out-patient Physiotherapy follow up

Your Physiotherapy out-patient appointment will be arranged for you at your local hospital where your Physiotherapist will guide you through the stages of rehabilitation and progress your exercises. Your rehabilitation can take up to 12 months in total depending on the level of function you are working towards. Return to work, exercise and normal function should be guided by your Clinician / Physiotherapist.

Post-operative advice

Physiotherapist - please fill out information as appropriate below and tick relevant boxes.

Mobility

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Weight-bearing pathway

You will be allowed to take full weight through your operated leg as pain allows however you should use crutches for around 1-2 weeks to help prevent you from developing any unusual walking patterns.

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Non weight-bearing pathway

You will be required to be non-weight bearing for the first _____ weeks following surgery to protect the reconstructed ligament. This means you cannot put any weight onto the operated leg and you will need to use crutches in order to do this safely. Your Physiotherapist will teach you how to walk with crutches and go up and down stairs non weight-bearing.

Brace

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You do not require a knee brace.

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You are required to wear a knee brace for _____ weeks.

Range of movement allowed:

(Your brace will be set to these limits)

Your Physiotherapist will show you how to put your brace on and off. It must be worn all the time, including overnight but can be removed temporarily for washing so long as you do not move your knee further than the brace would allow. You should wear the brace directly on your leg as wearing it on top of clothes will affect the support the brace will provide to your knee. You should also check your skin at least daily for any signs of rubbing.



Additional post-operative instructions

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Avoid hyperextension (excessive straightening of your knee) for _____ weeks.

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Avoid excessive cyclical loading for _____ weeks.
(e.g. cycling)

Exercises




Please only complete the exercises that have been ticked by your Physiotherapist. **If you are required to wear a knee brace, you must wear it for all exercises ticked below. Do not force your knee to move past the limits of the brace.**


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Circulation exercises
Sitting or lying on your back.
Move your ankles up and down 10 times, every waking hour to help the circulation in the legs.

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Active knee extension
Lie on your back with one knee bent and your operated knee straight.

		<p>Pull the toes on the straight leg up towards you and press the back of your knee into the bed/floor (as appropriate) using your front thigh muscles.</p> <p>Hold the tension for 5 seconds then relax.</p> <p>Repeat 10 times every waking hour.</p>
<input type="checkbox"/>		<p>Active knee flexion</p> <p>Lie on your back with your legs straight with a board or surface that slides (e.g. a magazine or plastic bag) underneath your leg and a rolled sock underneath your heel.</p> <p>Bend your knee slowly by sliding your heel towards your buttocks and return to the starting position. Repeat 10 times every waking hour.</p>
<input type="checkbox"/>		<p>Self-assisted knee flexion in sitting</p> <p>Sit up straight on a sturdy chair. Cross your ankles, with the assisting leg on top of your operated leg.</p> <p>Slide the foot of your operated leg on the floor to bend your knee, assisting the movement with your other leg. Do not force the movement if you have been instructed to wear a brace. Return to the starting position.</p> <p>Repeat 10 times every waking hour.</p>
<input type="checkbox"/>		<p>Passive knee extension</p> <p>When resting after doing your exercises, or walking with your crutches, you</p>

		<p>should rest with your knee fully straight. This is very important; do not put any support under the knee. If lying down, rest with a rolled towel under your heel. If sitting, rest as shown in the picture below. This is also a good position for when applying ice to your knee (see generic information for full details of ice therapy).</p>
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Queries

If you:

- ❖ Have any queries about any of the advice contained in this booklet;
- ❖ Are unable to carry out your exercises in accordance with this booklet; or
- ❖ Have persistent pain or swelling, or worsening of your symptoms

Please contact the Physiotherapy Department at the hospital where you had your surgery between 8:30am and 4:30pm Monday to Friday on the direct dial numbers below:

Worcestershire Royal Hospital

01905 760622 / 760187

Alexandra Hospital

01527 512114

Kidderminster Hospital and Treatment Centre

01562 513066

If you are concerned about your knee, you can also contact A+E or your own GP.

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a

member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday: 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.