

Anterior Cruciate Ligament

Information & advice for Surgical Day Unit patients

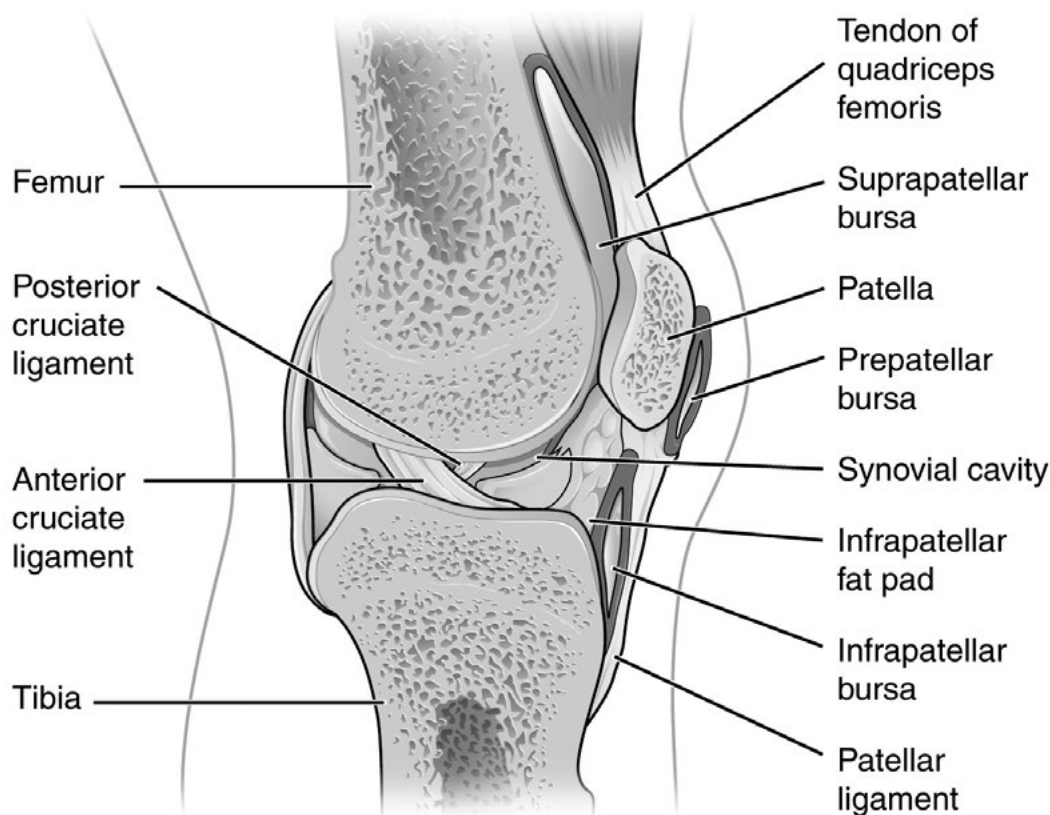
Physiotherapy

This leaflet has been designed to give you some important information following your Anterior Cruciate Ligament (ACL) reconstruction surgery, with particular attention to your rehabilitation.

The Anterior Cruciate Ligament (ACL)

Your ACL is located in your knee and is important for the stability of the knee joint. It is attached to your tibia and femur and prevents the forward movement (anterior translation) of the tibia. It also helps prevent excessive rotation.

It is injured through non-contact (changing direction rapidly, stopping suddenly or landing from a jump incorrectly) or through direct contact (a football tackle). If ruptured, the knee becomes unstable and ACL reconstruction is undertaken using a graft either from the hamstring (tendon from the back of the thigh) or patellar tendon (from the knee).



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Benefits/Risks of Exercise

Following your operation, it is helpful to perform the exercises to help with increasing the movement in your knee.

You can start the exercises straight away, and they should be performed a few times a day.

Day 0 – Day 3

Static Quads



Lie on your back, keeping your legs straight. On your operated side, push your knee towards the bed or floor by contracting your quadriceps (thigh) muscles. Hold for 5 – 10 seconds, relax and repeat

Gluteal Squeeze



Lay on your back, squeeze your buttocks firmly together. Hold for approximately 30 seconds, relax and then repeat

Isometric Hamstrings



Lie on your back with your knees slightly bent. Slightly straighten your operated leg so your heel is against the floor. Push your heel towards the floor as if you are trying to bend your knee but ensure no movement is actually occurring. Hold for 5 – 10 seconds, relax and repeat

Ankle ROM



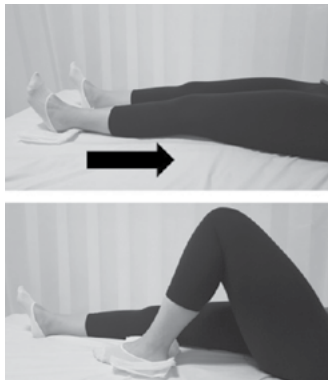
You can do this in sitting or standing, depending on which is more comfortable for you. On your operated side, move your ankle so your toes are pointing towards the floor and then towards the ceiling, repeat this movement. Next, on your operated side turn the sole of your foot to point one way and then the other, repeat this movement

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Knee Flexion



Lie on your back, starting with your legs straight. On your operated side, bend your knee by sliding your heel towards your buttocks and return to the start position. Please note if you are in a brace, how much you can bend your knee will be limited

Knee Extension



Lying face down on a bed, have your feet over the edge of the bed. Let the weight of your feet straighten your knees. If you can use your foot on the non-operated side to gently put pressure on your heel on the operated side, encouraging your operated knee to straighten.

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Symptoms to Report

Signs of infection

Some redness and swelling is expected after surgery but if you develop one or more of the following symptoms then please contact your GP or the surgical day unit as soon as possible:

- Increase in swelling and redness around your wound that you do not think is part of the normal healing of your wound.
- It feels hot.
- Discharge of green or yellow fluid from the wound.
- You generally feel unwell or have a fever (temperature higher than 38°C).

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Other Information

Crutches

It is likely you will be given crutches following your surgery and you will be taught how to use them based on your weight bearing status. Your weight bearing status will either be full weight bearing, partial weight bearing or non-weight bearing. You should continue to use the crutches until advised by your physiotherapist.

Brace

Following your surgery you may be given a brace to wear that limits the movement in your knee. It is important you wear your brace at all times, even when you sleep, you may only remove it for showering but you must take extra care not to bend the knee more than it would when it is in the brace.

Pain Relief

After your surgery, your knee may be sore and you will likely be given painkillers. If the painkillers you have been given are not sufficient, please contact the surgical day unit or your GP.

R.I.C.E

Following your surgery, it is recommended you apply the R.I.C.E principle:

R = rest is just as important as completing your exercises to avoid excessive swelling.

I = ice packs or a cold compression will help with swelling and may also help with pain. Wrap frozen peas or crushed ice in a damp, cold cloth and place on the knee for up to 15 minutes.

C = compression

E = elevation will help with reducing any swelling. It is important your leg is straight and your heel above hip height for effective elevation.

Working

You should have been given a sick note by the hospital if required after your surgery. The length of this sick note will depend on a number of factors including the work you perform. For any concerns, please liaise with the surgical day unit team using the contact details below or your own GP.

Driving

Your surgeon will advise you when you can start driving again but it will be a minimum of six weeks or whenever you can comfortably put weight through your operated leg. Your physiotherapist will be able to provide guidance on when you may be able to start with a small journey but it is your responsibility to ensure you are in control of the vehicle at all times.

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Hobbies

It is important to discuss returning to your usual activities with your surgeon and physiotherapist as it will depend on the surgery you have had and the type of activity you would like to return to.

Next Steps

An outpatient physiotherapy appointment will be booked at your preferred hospital. If you have not had a letter or telephone call confirming when this appointment will be within two weeks, please call us using the contact details below.

Contact Details

If you have any questions or concerns, you can contact us on one of the following numbers.

Physiotherapy (City & Sandwell Hospital) – 0121 507 2664, option 3.

Hospital Switchboard – 0121 553 3801, ask for operator.

Further information

NHS Website

Knee ligament surgery

<https://www.nhs.uk/conditions/knee-ligament-surgery/>

(Website accessed 18 August 2021).

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Sources used for the information in this leaflet

American Academy of Orthopaedic Surgeons. (2014). Management of anterior cruciate ligament injuries: evidence-based clinical practice guideline. Available at: <https://www.aaos.org/globalassets/quality-and-practice-resources/anterior-cruciate-ligament-injuries/anterior-cruciate-ligament-injuries-clinical-practice-guideline-4-24-19.pdf> (Accessed 18 August 2021).

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