

Dr Brendan Ricciardo

MBBS (UWA) FRACS FAOrthA
Orthopaedic Surgeon

Hip, Knee & Shoulder Surgeon
Sports & Trauma Surgery



Coastal
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ACL RECONSTRUCTION

Discharge

You will usually remain in hospital overnight, but it is possible to go home the same day as surgery.

Post-Operative Appointment

Your first post op clinic review is 2 weeks after surgery. If you would like to confirm or change this appointment please contact my PA Tammy on 9230 6333 or tammy@coastalorthopaedics.com.au. If you live in Regional WA then this appointment can sometimes be made with your GP (please discuss this with Brendan).

Pain Relief / Medications

You have been prescribed a range of pain killers by the Anaesthetist. You should take them as prescribed. In general, you should take paracetamol regularly as first line, followed by anti-inflammatories if prescribed or directed and then strong painkillers such as Tramadol, Tapentadol or Oxycodone for top-up pain relief. You can cease them as soon as the pain allows. Check with your nurse prior to discharge if you are unsure. You may be prescribed medication for DVT prevention depending on your risk profile. This may involve a daily injection (Clexane) or oral Aspirin for 2-6 weeks.

Swelling / Icing

Post op swelling of the knee is expected. It should reduce gradually over a few weeks. Regular icing of your knee, combined with elevation, is the best way to reduce the swelling. You should continue icing your knee as long as it remains swollen, which can be several weeks. If the swelling gets worse or if there is redness around the wound or fever, please contact my rooms immediately or attend your local Doctor. After hours you can contact the hospital ward from which you were discharged.

Bandage / Dressings / Sutures

Your knee bandage will be removed the morning after surgery and a tubigrip compression stocking applied. You will be discharged from hospital with dressings covering your knee wounds. Leave these dressings in place until your two week review when we will remove them. The dressings are waterproof. Showering is fine but bathing/swimming is not. Should your dressing lose its seal or become saturated, please contact my rooms for advice. You have dissolvable sutures under the skin that do not require removal.

Crutches

Crutches are recommended for 2 weeks. You will have use a knee brace for 2-3 days (until your quad muscles start working again and allow you to take weight through the knee without it collapsing). Full weight bearing through the operated leg is allowed immediately following surgery. If you have had additional surgery performed then Brendan may adjust the recommended time in the brace and crutches.

Physiotherapy

Please refer to the 'Rehab' section of my website www.drbrendanricciardo.com.au for exercises you should perform following surgery and continue after discharge from hospital. You will be reviewed by a physio in hospital the morning following your surgery. You should avoid sleeping with a pillow under your knee, even if it feels more comfortable. For elevation place a pillow until your ankle.

Return to Work / Driving

It is reasonable to target a return to office work at 2-4 weeks. Continued leg elevation in the early stages of return to work is recommended. For physical work the target is 2-3 months. If surgery is on our left knee and you have an automatic car, then it is possible to return to driving after a few days. For right knee surgery and all manual cars it is more likely to be 4-6 weeks.



Fellow of the Royal Australasian
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