

## Robert G. McCormack, MD, FRCS(c), INC.

Orthopaedic Surgery
Diploma in Sport Medicine
Associate Professor University of British Columbia



## Instructions for family physicians post-op anterior cruciate ligament reconstruction surgery

3 •
Re:
This patient had an arthroscopically aided anterior cruciate reconstruction on Post-operatively the patient can fully weight bear as tolerated using crutches for support until there is quadriceps control. I would appreciate it if you could help facilitate physiotherapy to start approximately one week post-operatively to decrease swelling and work on range of motion. Physiotherapy should also start some quadriceps exercises using a closed chain program.
If the physiotherapists have any questions they can contact my office and I will mail or fax a copy of our ACL rehab protocol. As far as the range of motion goes the expectation is that by 4 weeks the patient should have at least 100 degrees of knee motion. Hopefully, the range of motion will return to essentially normal by 6-8 weeks.
I have asked the patient to return to the office to see me at approximately 6-8 weeks to be sure the range is progressing. If there are any problems before then please let me know. With regards to the incision, I have asked the patient to see you to check this at approximately 1 week. I have used a subcuticular stitch for the skin closure. There is a longitudinal steristrip at the end of the incision that is over the top of the protruding end of the 3.0 dissolving stitch. At approximately 1 week this longitudinal steri-strip can be removed, and the suture cut at the skin level. I usually leave the remainder of the steri-strips in place to take some tension off the skin edges, and hopefully keep the scar narrower.
If there are any questions please do not hesitate to contact my office @ (604) 526-7885 or fax (604) 525-4006.
2012