



*Diplomates American Board of Orthopaedic Surgery • Members American Orthopaedic Society for Sports Medicine  
Fellows American Academy of Orthopaedic Surgeons*

**Deborah A. Faryniarz, M.D., Inc.**

*Sports Medicine and Shoulder Fellowship,  
The Hospital for Special Surgery,*

*FORUM, Society of Fellowship Trained  
Women in Orthopaedic Surgery*

**Grady L. Jeter, M.D., Inc.**

*Member Arthroscopy Association of North America,  
International Society of Arthroscopy,  
Knee Surgery and Orthopaedic Sports Medicine,  
Founding Member Ikeuchi International Society for Arthroscopy and  
Musculoskeletal Endoscopy*

**Martin Trieb, M.D., Inc.**

*Member Arthroscopy Association of North America*

## **Postoperative Instructions** **Posterior Ligament Reconstruction**

**Brace:** Should be locked at 15 degrees with toe-touch weight bearing with crutches (usually 4 weeks) with progressive bending as directed by Dr. Faryniarz and your PT.

### **Ice**

- Apply an ice pack or Game Ready icing machine to the knee as often as possible for the first 3-7 days to reduce pain and swelling. You may ice as often as 30 minutes every hour but not less than 3x/day. If using Game Ready, use the no pressure or low pressure setting.

### **Medications**

- Pain medication injected into the joint during surgery will wear off within 8-12 hours.
- Most patients require a narcotic (i.e. Percocet or Vicodin) for a short period of time. Please follow the prescription directions.
- Common side effects of pain medications include drowsiness, nausea, and constipation. To minimize side effects, take medications with food. You may take an over-the-counter laxative (i.e. Colace) if needed. Do not drive or operate any machinery while on narcotics.
- You may take anti-inflammatory medication (400 mg Motrin/Advil) between doses of narcotics to help control pain. Take with food to avoid stomach upset. Do not take if you have a history of ulcers.
- If you experiencing any problems or uncomfortable side effects, please contact our office.

### **Wound Care**

- Remove the dressing, but not the Steri-strips, two days after surgery. You may cover the wound with Band-aids if any drainage is present. It is normal to have some drainage and swelling after surgery. If the dressing becomes soaked, you may reinforce it with additional dressing.
- Avoid any ointments around the incisions.
- Keep wounds clean and dry for the first 5 days. If you wish to shower during this time, cover your knee with a large plastic bag or take a sponge bath. After 5 days, you may shower, but do not soak in a bathtub or hot tub until after the first post-op visit.
- Your post-op appointment is on your surgery instruction sheet (usually 7-14 days after your surgery). If you need to reschedule, please call my assistant at (408) 559-3888.
- **If you develop a fever (temperature > 101.5), excessive drainage, redness around the incision, calf pain, or difficulty breathing notify Dr. Faryniarz at (408) 559-3888.**

### **Activity**

- You should start physical therapy the first week after your surgery. Please call our office if have not received an appointment or physical therapy prescription.
- You may begin gently moving the knee and doing straight leg raises your first post-op day with the goal of bending 90 degrees and fully straightening your knee by your first visit unless otherwise instructed.
- **NO** driving is allowed until instructed by Dr. Faryniarz.
- If pain permits, you may return to (sedentary) work or school 3-4 days after surgery as long as you can keep your leg elevated (foot above knee and knee above hip).
- Elevate operative leg to chest level whenever possible to reduce swelling.
- Do not engage in activities which increase knee pain or swelling for the first 10 days after surgery.
- Avoid prolonged sitting (without leg elevated) or long distance travel for 2 weeks.