

Anterior Cruciate Ligament (ACL) reconstruction (inpatient exercises)

Introduction

The following exercises apply to all Anterior Cruciate Ligament (ACL) reconstructions performed at the Royal Berkshire NHS Foundation Trust.

On the day of the operation you will return to the ward with a cotton wool and crepe bandage on your knee. Your consultant may also recommend a cricket pad splint for some patients.

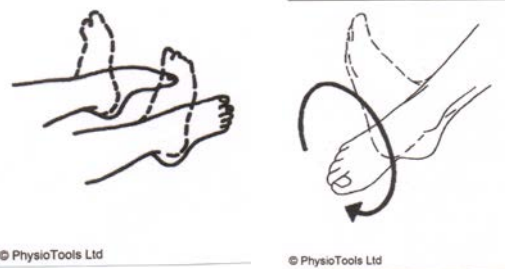
The following exercises should be done at least four times a day.

Circulatory exercises

Point and bend your ankles.

Circle your ankles in both directions.

Do a minimum of 20 of each exercise.



Static quads

Push your knee down into the bed as hard as you can by tightening the muscles on the front of your thigh.

Hold for a count of ten, relax.

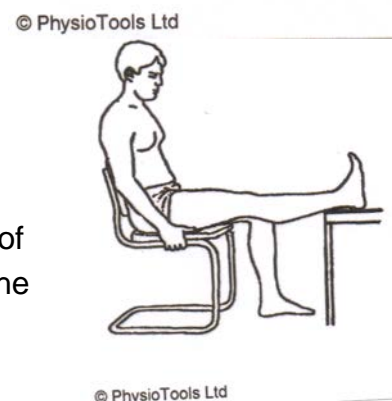
Repeat 10 times.



Hyperextension

Your physio will stretch your knee into full hyperextension (to match your good leg).

When you go home this can be done for you by a responsible adult or you can rest your heel on a large book or the armrest of the sofa so that your knee is unsupported and let it relax into the same position.



Patella mobs

Your physio will show you how to move your knee-cap to prevent it from becoming stiff.

Straight leg raise

Brace your knee as straight as possible, raise the leg with the knee straight about 6 inches off the bed. Hold for 5-10 seconds then lower gently to the bed. Repeat 10 times.

If you have a splint, do this exercise with the splint on initially. When you are confident doing this you can gradually loosen the splint so that the knee is gradually having to do more and more to hold the knee straight, until you can do it without the splint.



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Heel slides

Slide your heel up the bed so that your knee bends, hold for a few seconds and then slide it down again.

Repeat 10 times.

You will gradually be able to bend the knee further and further. It is important when you are bending your knee that your heel is in contact with something (at home the back of a tray with a little talc is a good idea as it cuts down on friction), you should not sit on the edge of the bed with your leg dangling.



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Heel digs

With your leg bent up in front of you dig your heel into the mattress as hard as you can.

Hold for a count of 10.

Relax, repeat 10 times.



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Mobilising

You should be able to mobilise within a few hours of surgery dependent on how you are feeling and the strength of your straight leg raise. You will be given and taught the correct use of crutches. You must walk putting some weight through your operated leg, walking with the leg dangling or hopping is detrimental to the graft causing it to become lax.

Discharge criteria.

- Independently mobile with crutches on the flat and on stairs.
- Straight leg raise (in the splint if you have one).
- Full passive hyperextension.
- Independent with all of the exercises.

Your knee may well still be swollen and you can use an ice pack at home.

A small bag of frozen peas or sweetcorn or a gel pack wrapped in a damp tea towel placed over your knee for 10 minutes can be used regularly throughout the day as long as there is at least 20 minutes between each treatment. If you refreeze the peas or sweetcorn to use again please do not eat them.

You will be referred for outpatient physio where these exercises will be progressed.

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If you have any enquiries about your outpatient physiotherapy please contact the Outpatient Physiotherapy Department on: 0118 322 7811

This document can be made available in other languages and formats upon request.

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