

Pediatric IT Band Graft Anterior Cruciate Ligament (ACL) Reconstruction

This handout explains what you can expect if your child needs IT Band Graft ACL reconstruction.

Your Pre-Surgery Work-Up

Once we know that surgery is the best option for your child:

1. A visit will be set-up to see a Physical Therapist (PT). At this visit you will get exercise instructions.
2. A visit will be set-up to be seen in the Sports Medicine Clinic. There your child will see the sports medicine team. This includes the nurse (RN), the physician assistant (PA), and your surgeon. At this visit you and your child will:
 - talk with the nurse about how to get ready for surgery.
 - have a physical exam.
 - have the surgery explained to you by the physician assistant and your surgeon.
 - sign the consent forms.
3. Please review the Total Care online teaching tool for ACL reconstruction. This was sent to you by e-mail when you scheduled your surgery.
4. You will get prescriptions for pain medicine the day of your surgery. We will tell you how to take them.
5. The day you schedule your surgery you will also schedule your post operative PT. The first PT visit will be 1-3 days after surgery.

Anesthesia for ACL Reconstruction

Before surgery, staff will talk with you and your child about options for anesthesia. You may also be offered a nerve block. The nerve block is done in the operating room while your child is sleeping. The nerve block will help lessen the pain for a few hours or more after surgery. It is important to stay on top of the pain by also taking the oral pain medicine as directed. If your child has continued numbness or tingling once the block has worn off, tell the doctor.

After surgery your child will wear a locked brace and use crutches for 6 weeks. Gradual range of motion exercise will also happen in the first 6 weeks.

Patients having ACL reconstruction using the IT band are scheduled to stay overnight, but that may not always be needed.

Important to Know

- PT should be scheduled for 1-3 days after surgery. The dressing will be changed and the ice unit pad removed. You and your child will be told how to do home exercises.

Schedule your PT visits before surgery.

- Your child can shower 3-4 days after surgery. Shower with your brace on and cover it with a plastic bag. Tape or tie the top of the bag so you do not get the brace wet.
- Your doctor Will tell you when you can shower without the brace. This tends to be 1-2 weeks after surgery. When the brace is off, your child should be very careful not to fall, slip

- or put too much pressure on the leg.
- Your child will return to the clinic within the first one 1-2 weeks after surgery to have their incisions checked and to be sure your child has started therapy.
- After the 1-2 week post-op visit, your child can shower with the brace off. Let the water run over the incisions in the shower.
- Do not submerge or soak the incisions in water for 3 weeks. This means, do not swim, use a hot tub or take a bath.
- If your child has pain, swelling, warmth or redness in the calf area in either leg, call the doctor. This could be a sign that you have a blood clot.
- Do not travel in an airplane for at least 2 weeks after surgery. It is preferred that you wait 6 weeks before flying on an airplane. Flying in an airplane too soon after surgery may cause a blood clot in your leg.
- Going back to school varies for each person. Most often kids miss about 1 week of school; though some may miss up to 14 days. Talk with your doctor and physical therapist about when you may go back to school.

Comfort

Use the ice unit to help with swelling and pain. The ice machine on (lowest setting) can be left on through the first 2-3 nights after surgery. If too cold, turn the unit off for a few hours. Starting the day after surgery, use the ice unit 40-60 minutes on and three hours off as needed. Try to have the leg elevated with the knee and lower leg above the heart. Your child's knee should be straight. The ice unit will be used often for the first 1-2 weeks after surgery. The ice unit will help with pain after you have PT. Take the ice pad off while doing exercises to allow the dressings to air out.

Take pain pills as instructed and be sure to eat something to avoid nausea. It is important to stay on top of the pain by taking these pain meds as directed. Anti-inflammatory medicines such as ibuprofen, naproxen or Ketoralac (Toradol) can also be taken to help reduce the swelling and control the pain.

Home Exercises

Your child should start PT exercises after the first physical therapy visit, as described to you by your physical therapist. It is important to not overdo exercises or activity in the first 6-8 weeks.

How much weight can you put on your leg in the first few days?

Your child should use crutches at all times and be touch down weight bearing on the surgical leg ("toe touch weight bearing"). The brace should be on and locked whenever walking.

How to Use the Cooler

1. First fill to the top of the blue mark with water.
2. Fill to the top of the yellow mark with ice.
3. Connect the hose couplings. You'll hear 2 "clicks."
4. Plug the adaptor in to start the unit.
5. Start with the dial turned to "max" flow rate. If it feels too cold, turn the dial down as needed.
6. Refill the ice and water every 4 hours during the first night after surgery.

To Disconnect

1. Unplug the cooler.
2. Press both couplings to separate the hoses. A few drops of water will drip from hoses.

If the Cooler Does Not Work

1. Check the couplings to see if they are securely connected.
2. Check hoses for bends/kinks.
3. Check pad for bends/folds.
4. Check the level of ice and water in the cooler.
5. Check to make sure that the unit is plugged in.

When to Call the Doctor/Clinic

If your child has any of these symptoms, call the doctor:

- Nausea/vomiting lasting more than 24 hours.
- No bowel movement in 3 days.
- Pus like drainage.
- Increased redness or warmth at the incision sites.
- Excess swelling or bleeding.
- Excessive drainage—bleeding from incision site does not stop after 10 minutes of firm pressure.
- Extreme bruising.
- Sudden shortness of breath.
- Cramping or swelling in operative leg.

- Leg or foot becomes cool or dark.
- Leg or foot becomes numb or tingling.
- Pain not relieved by pain pills, elevation, and ice.

Phone Numbers

Please call if you have any questions or concerns.

Pediatric Orthopedic Surgery Clinic

Monday-Friday 8am-5pm

(608) 263-6420, option 1

After hours call the clinic number and your call will be forward to the paging operator. Ask for the orthopedic resident on call. Leave your name and phone number. The doctor will call you back.

24 Hour Toll Free Number

1-800-323-8942

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 5/2019 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing HF#5061p