

## Physiotherapy - Orthopaedics

# Posterior cruciate Ligament (PCL) Reconstruction: Advice and Exercises

### What to expect after surgery

A PCL reconstruction is performed to restore stability in the knee. It aims to stop the shin bone (tibia) from moving too far backwards on the thigh bone (femur). Whilst your reconstruction is healing a brace is needed to support it in the correct position.

### Pain and Swelling Management

A nerve block may be used during the operation which means that immediately after the operation your knee and leg may feel heavy and numb for a few hours. When the block is wearing off you will be given painkillers. Please take them as you are advised. You may have some discomfort for several weeks after the surgery but taking your prescribed painkillers regularly for the first few weeks will make you feel more comfortable and allow you to do your exercises.

You must rest, ice and raise your leg to reduce the swelling around your knee.

Raise your leg in a straight position and with the whole leg supported, in your knee brace.

Use an ice pack or ice wrapped in a cloth on your knee for 20 minutes at a time. Try to do this every 2 hours.



## Patient Information

### Wound

After your operation your knee will be bandaged; this is removed 24 hours after surgery leaving the smaller dressings which cover your wounds. If you have stitches, you will be given instructions by the nursing staff for their removal at your GP surgery. They will also give you the information regarding general wound care.

### PTS and dynamic PCL brace

You will be required to wear your PTS brace (knee splint) day and night for 2 weeks. The splint can be removed for initial movement exercises and washing only.

At 2 weeks the PTS brace is changed to the dynamic PCL brace, or once the swelling in your knee has settled to normal levels. You will be seen in the outpatient department or appliance clinic for the fitting of this.

The Dynamic PCL brace must be worn **day and night** until 12 weeks (then day time for up to 6 months as advised by Consultant)

### Weight bearing

0-2 weeks partial weight bearing using elbow crutches with the PTS brace.

2-6 weeks partial weight bearing using elbow crutches with Dynamic PCL brace.

Aim to be fully weight bearing by 8 weeks with Dynamic PCL brace.

### Exercises

The success of your operation will often depend on you following your rehabilitation programme.

Although your knee may be sore after the operation it is important that you start these initial exercises immediately after your surgery to make sure that you progress as expected. Please complete these exercises **5 times daily**, unless otherwise stated.

## Patient Information

### Prevention exercises – to prevent chest infections and blood clots post op

#### Deep breathing exercises

**Complete these hourly**

Take a deep breath in through your nose, hold for a couple of seconds, and then breathe out through your mouth.

Repeat this 3 times.

#### Foot and Ankle exercises

**Complete these hourly**

Move your ankles up and down fairly quickly for 10 seconds. Then complete circles one way for 10 seconds, and circles the other way for 10 seconds.

#### Static Glutes

**Repeat 10 times**

Squeeze your buttocks together and hold for 10 seconds.

Try to make sure the thighs stay relaxed and only your bottom muscles are working.



## Patient Information

### Knee Rehabilitation

#### Static Quadriceps

**Repeat 10 times**

Lie on your back with your knee straight. Pull your toes up towards you, push your heel away and tighten the muscles in your thigh, hold for 10 seconds.

During this exercise, you should feel your patella (kneecap) move upwards towards your hip. Due to the location of your surgery, this may feel uncomfortable but it is important to remember you will not be doing your knee any harm.



**Knee**

#### Flexion (bending) exercises

**Repeat 10 times**

Assisted passive flexion is best achieved by lying on your side, place a plastic bag, or something underneath your leg to help it slide. Use your hands to help slide your knee up towards your chest and then slide it back to the starting position (as shown), you must not use your muscles to help bend your knee as this can stretch the new ligament.



No active hamstring exercise for 6 weeks

Weeks 0-2 bend knee as pain allows 2-4 times per day

Weeks 2-6 aim to achieve 90 degrees of flexion by 6 weeks.

Week 7 onward build to full flexion

## Patient Information

### **Patella (kneecap) glides**

**Repeat 10 times in each direction**

Sit on the edge of a chair with your leg out straight, heel on the floor and your muscles relaxed. Hold your knee cap as in the picture below. Push the knee cap over towards your other knee, outwards away from the other knee, down towards your toes and up towards your hip.

You may hear or feel the kneecap click or clunk, this is normal and safe. The glides may be difficult initially due to swelling and the wound dressings. Keep your leg relaxed and make sure that you are moving your kneecap not just your skin.



### **Discharge and follow up**

When you have been assessed as medically and physically fit by your doctor (or their team) and physiotherapist you will be discharged. You will need to arrange for someone to drive you home you should try to have a responsible adult to stay with you for the first 24 hours.

Physiotherapy is essential after the operation and you will be contacted with an urgent outpatient physiotherapy appointment after your discharge. If you have not heard from outpatient physiotherapy within 1 week, please contact the department (details in next section).

Clinic appointments with the surgical team are usually at 2, 6 and 12 weeks, then at 6 and 9 months, tailored to your requirements.

## Patient Information

### Further Information

If you have any concerns regarding your wound between appointments and it:

- Becomes Red or inflamed (swollen or hot to touch)
- Begins to ooze or discharge
- Begins to bleed
- Starts to smell

Please use this number to leave a message 02476 968333. Any messages will be picked Mon-Fri 07:30-17:30 Sat-Sun 07:30-13:30.

For out of hours support you will need to go to A&E or the Urgent Treatment Centre.

**If you have any queries or concerns about your physiotherapy please telephone the Orthopaedic Therapy Department between 08:00 and 17:00:**

Rugby St Cross: 01788 663054

University Hospital Coventry and Warwickshire: 02476 965106

**Or Therapy Outpatient Department (Monday-Friday) between 08:30 and 16:30:**

Rugby St Cross: 01788 663257

University Hospital Coventry and Warwickshire 024 7696 6013

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact our physiotherapy department and we will do our best to meet your needs.

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To give feedback on this leaflet please email [feedback@uhcw.nhs.uk](mailto:feedback@uhcw.nhs.uk)

#### Document History

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