**Anterior Cruciate Ligament (ACL) Reconstruction – Mr Gordon (BW)**

Antibiotics: IV on induction

Tourniquet: Thigh, Kimberly – Clarke blue wrap, sealed with Leukoplast, sterile 6 inch Esmarch, 250mmHg once draped and all instruments set up

Position: Supine, heels over end of bed, buttock by table edge, calf pumps (no sandbag)

Supports: Side support by tourniquet, cylinder foot support at end of table

Skin Prep: Alcoholic Chlorhexadine in Sterile 50x50cm Isolation Bag (3M Steridrape 1003 or Medline DYNJSD 1003) (for foot) then with swabs to above knee

Drape: Wrap foot, stockinette, 6’’ crepe, Optape, Tagederm,

Scope: Knee scope

Local anaesthetic: Beginning of operation

Max dose 0.5% Marcaine (ask anaesthetist) made up to 200 mls with irrigation fluid in bowl (2 x 50 ml Luer lock syringes), 18G spinal needle

Equipment: Sterile 6 inch Esmarch

Blades: 1 x #11, 1 x #10

Plastic quiver

2 x Right angled clamps (Leyhey)

2 x marker pens

2 x 3L cold saline set 100cm above knee on drip stand, free drainage, chamber giving set  
Knee shaver + suction tubing + 5.5mm Cuda (Conmed) with foot pedals

ArthroWand 90 degree (ASHA Ambient STV90, hand buttons) + suction tubing + second suction machine

Acufex Set (Smith & Nephew)

RCI screws (Smith & Nephew) (or BioRCI in possible osteotomy cases),

Femur: Always7x25mm (reverse thread for right knee), tibia +/-0.5 tunnel diameter

Arthroscopic instruments (on standby)

Sutures: 1 x No. 1 vicryl (VCP 9378)

1 x No. 2 vicryl (VCP 9365)

2 x No. 5 Tycron (3027-79, needles cut off)

1 x No. 2 Nylon / PDS (needles cut off)

3/0 Monocryl (MCP 3213H)

½ “steristrips, cut in half

Dressings: Tagaderm / Opsite

6” Velband

6” Crepe bandage

Post op: Full weightbear, full range of motion, day case after physio review

Clinic 2/52 for wound check