Additional Clinical Content for Medical Topic(s)

29888

## 29888 - Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction

w3Aproject=medlineplusev388) (https://vsearch.nlm.nih.gov/vivisimo/cgi-bin/query-meta?

Day 0	Day 50	Day 100	Day 150	Day 200
Today			RTW Prescription	Best Practice Average

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A

Average 213 Days

Benchmark against the actual outcomes data

B

Best Practice 208 Days

Manage toward the best practice duration

All Classes	
Sedentary	
Light	210 200 200 200 200 200 200 200 200 200
Medium	
Heavy	
Very Heavy	

Scenario	Activity Level	Duration in Days		
Severe (grade III - tear), ACL repair, sedentary/modified work	Modified	35 Days		
Severe (tear), ACL repair, manual/standing work	Regular	180 Days		

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Tab V

Anatomy and Background

Description of Procedure

Alternatives to Procedure

History and

## Anatomy and Background

Anterior cruciate ligament
 (ACL) repair may be performed
 to restore knee stability,
 function, and prevent long-term
 degeneration (eg, arthritis) of
 the knee.(1 (citation.aspx?
 citationtype=GT&citationid=25313'
 (2 (citation.aspx?

Physical Examination

Imaging, Laboratory, and Other Tests

Risk Factors

Comorbidities

Collaborating for Recovery citationtype=G I &citationid=25334

- The knee is a weightbearing joint that enables both flexion and extension of the lower leg.
- The 4 main ligaments that hold the bones of the knee in place are the ACL, lateral collateral ligament, medial collateral ligament, and posterior cruciate ligament.
- The ACL is composed of 2 bundles that contribute to knee stability; injuries most often involve both bundles.
- The ACL is the most commonly injured ligament of the knee.(3 (citation.aspx? citationtype=GT&citationid=27132)

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