ACL Reconstruction (Patellar Tendon Graft Technique)

Repairing a torn ACL can ease pain and restore stability and motion to your knee. Your anterior cruciate ligament, or ACL, is 1 of 4 ligaments that support your knee joint. It helps hold together your thigh bone, or femur, and your shin bone, or tibia.

During ACL reconstruction, a surgeon replaces the torn ACL with a piece of tissue from another part of the body or from a donor. One common option is to use tissue from your own patellar tendon. This tendon connects your kneecap, or patella, to your tibia.

First, you will be given anesthesia. This medicine will help you relax and not feel pain. You may fall asleep. Your surgeon will then make an incision, or cut, in the front of your knee to expose the patellar tendon. They will remove part of the tendon and some bone where it is attached. This piece of tissue is called a graft. It will replace your torn ACL.

Your surgeon will then make a few more small cuts in your knee. Into these cuts they will insert a camera and tools. The camera, or arthroscope, is a thin tube with a light attached. It lets your surgeon see inside your knee.

Your surgeon will remove your torn ACL. They will drill holes in your thigh and shin bones where the new ACL graft will be attached. With screws, staples, or other means, your surgeon will then secure the graft to the bones, making a new healthy ACL.

After surgery, your care team will put together an exercise rehab plan to help you fully recover.

