

Ankle Fracture Repair Post-Operative Orders

Dr. Abigail Hamilton, MD

You received a block and light sedation. Please rest and relax the day of surgery. Be aware of possible dizziness and exercise caution when you are on your feet. A responsible adult must be with you for the first 24 hours following surgery for safety.

- Do not drive for 24 hours after surgery or while using narcotic pain medication.
- Do not operate power machinery.
- No important decision-making or signing of legal documents for 24 hours.
- Do not use alcoholic beverages for 24 hours or while taking narcotic medications.
- If you are unable to urinate, feel uncomfortable and it has been 8-10 hours since you last urinated, go to an urgent care or an emergency room

Diet:

• Eat your usual diet. Start with something light like soup and crackers.

Wound Care:

- Keep bulky operative dressing in place until you are seen for your first post-operative visit. Do not get this dressing wet. If you do, please call the clinic to arrange for it to be changed.
- You may shower after your operative dressing is removed at follow-up.
- Do not scrub the area; just allow water/soap to wash over you.
- Pat incision dry afterward, do not rub.
- Do not bathe/swim/soak incisions until they are completely healed (approximately 4 weeks after surgery).

Wearing a Splint:

- The splint you are wearing is there to hold your ankle in place while you heal your surgical wounds.
- Never put anything in your splint for any reason, especially to scratch an itch. This can unintentionally open small wounds in the skin, which are a portal for infection to enter your body. This is an extremely serious problem. Please heed this warning.
- Stay away from sand, gravel, etc. This can get into the splint and cause the problems mentioned above.
- Do not attempt to remove your own splint.
- Your splint is not safe to get wet. Please keep it dry at all times. If you get your splint wet, contact our office immediately. It may need to be replaced.
- Swelling is painful in a splint. Elevation above the heart for extended periods is the preferred method to relieve swelling. Icing can also help, but in a splint it can require extended periods of icing to achieve successful swelling reduction. Both elevation and icing work together.

- If the splint is tight and restricting blood flow causing the toes to turn blue and cold, and this is not relieved within 30 minutes of maximum possible elevation above the heart, this would be considered an emergency. You cannot wait to care for this problem. Proceed directly to the Meadowbrook Park Nicollet Orthopedic office between 8:30 and 4:00 pm. If you experience this problem outside of these hours, go to Methodist's Emergency Room or urgent care to have your splint loosened.
- Do not remove any of the padding from inside your splint.
- If your splint becomes loose, as swelling reduces, and you can move around easily inside of it, please make an appointment as soon as possible to have it replaced with a splint that will fit better.

<u>lce</u>:

We recommend that you ice for 48-72 hours post-operatively on a consistent basis and then
afterwards as needed. You may use ice packs. Apply for 20-30 minutes and then remove for a
break period of at least 30 minutes to prevent frost-bite to skin. While the bulky operative
dressing is in place you may leave on for longer duration as long as it is not in contact with your
skin but with the dressing.

Weight Bearing Status:

- With an ankle fracture fixation, you will be placed in a splint or an aircast boot.
- You need to wear this full time for at least 6 weeks. It should only be removed for showering and for your exercises after you see physical therapy.
- You should not bear weight with your leg until cleared at follow-up to do so.

Physical Therapy:

- Formal physical therapy will be ordered by your orthopedic surgeon the day of your surgery. You should start formal physical therapy approximately two weeks after surgery.
- Make sure you have an appointment with a physical therapist. If you do not, please call 952-456-7000 and get in as soon as possible. If you need a referral to be seen outside of the TCO system, please call Sarah Lagarde at 763-302-2107 and she can fax a referral to the location you plan to be seen. If you are being seen within the TCO system, the referral is placed electronically.
- Continue the exercises the therapist gives you at home.

Pain Control:

Day of Surgery

- You have been given a regional anesthetic block prior to your operation. This will wear off in the evening following your surgery.
- You should elevate the ankle as much as possible above the level of your heart to minimize swelling. Decreasing swelling significantly improves your pain control.

Medications:

- Resume all of your home medications
- You will be prescribed a short acting narcotic for home (oxycodone, dilaudid, percocet or norco). Please take this as needed. If you are prescribed oxycodone or dilaudid, it is OK to take Tylenol

with this medication and doing so will help with pain. If you are prescribed Percocet or Norco, these medications already contain Tylenol and you should not take Tylenol while you are taking these medications. We will refill short acting narcotic pain medications as needed. Please call Sarah at 763-302-2107 to help arrange with appropriate lead time (call when you have 10-15 pills left as opposed to 0). Narcotic prescriptions require an original signed prescription and cannot be called or faxed into a pharmacy so you will have to arrange having someone with a photo ID come to clinic to pick up the prescription in person. This does not have to be the patient.

- Taking an anti-inflammatory medication (NSAID) is recommended. These include ibuprofen, motril, advil, naproxen, aleve. Please take as directed if prescribed or follow dosing instructions on the bottle if you are taking an over the counter medication.
- Zofran (odansetron)- take 1 tablet every 6 hours as needed. This is an anti-emetic medication
 that can help resolve some nausea and/or vomiting associated with anesthesia and other
 medications you are taking.
- These pain medications may be taken in any combination according to how much pain you are having.
- The use of narcotic pain medications can cause constipation. We suggest you use an over-the-counter stool softener while taking these medications (Colace, sennakot).

Driving:

You may resume driving when approved by your orthopedic surgeon.

Return to Work:

You may return to work as soon as you are comfortable. This is dependent on your job type.
 You will not be able to bear weight for 6-8 weeks. Return to work notes if required can be obtained from your orthopedic surgeon at your first post-op appointment.

Follow-up Appointment:

• Please make sure that you have a post-operative appointment set up for 10-14 days and in 6-8 weeks after your surgery with Dr. Hamilton. Please call 952-456-7000 to schedule if this was not arranged at the time you booked surgery or if you have any need to change a date/time of the appointment.

****<u>Signs & Symptoms to Immediately Report</u>****

Call **911** and go to the nearest hospital if you are having chest pain or trouble breathing.

Call the office at: 763-302-2107 or 952-456-7000 to report any of the following:

- Persistent fever (101 or greater)
- Sudden increase in pain and swelling
- Wound redness or drainage
- Increased skin temperature around incision
- Deep calf pain and swelling

Nurse	Responsible Adult