



GENERAL ORTHOPEDIC POST-OPERATIVE INSTRUCTIONS

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WOUND CARE AND HYGIENE

- Leave dressings in place until postoperative day #3 unless otherwise directed. Then dressings may be removed with the wound redressed as needed with a dry, clean, and/or waterproof dressing.
- Do not remove any steri strips (adhesive paper strips over the incision), if present. These will be removed at follow-up visit.
- If suture material is visible, do not attempt to cut or remove. If suture material is non-absorbable, it will be removed at follow-up visit.
- You may begin to shower once the initial dressing is removed. Allow the water to run over the wounds but avoid aggressive washing or scrubbing of the surgical area.
- No soaking or submerging wounds in water (bath, pool, lake, etc.) for at least the first two weeks following surgery. Ask your care team when you may begin to soak or submerge.
- Drainage is expected over the first few days postoperatively. If draining persists after postoperative day #3, call your care team.

MEDICATIONS

- Typically, you will be prescribed pain medication to be taken during the initial postoperative period. Take this medication as needed and any additional medications as directed.
- You may also take Tylenol, Ibuprofen, or Aleve to aid in pain control. Sometimes, your pain medication may already include Tylenol. Refer to the package instructions for Tylenol to ensure you do not take an amount that exceeds the safe dosage of Tylenol daily. Excess Tylenol can cause liver damage.
- Pain medication may take 30 minutes to take effect and lasts typically no longer than 4-6 hours.
- Do not drink alcohol or drive while on narcotic pain medication such as hydrocodone or oxycodone.
- It is not expected that you will be pain free during the early postsurgical period. Medication, ice, elevation, and rest are intended to reduce your pain to a manageable level.
- Pain medication may cause constipation. You may elect to utilize an over-the-counter stool softener.

- Refill of pain medication is typically discussed at your follow-up visit. The majority of patients will not require a refill of pain medication after surgery. In some cases, medication may be continued through 4 to 6 weeks after surgery. Wean off narcotic medication when able.
- You may be prescribed a medication for prevention of a blood clot, or deep venous thrombosis. Take as directed daily.

DIET

- Gradually return to your normal diet. Be mindful that you may experience nausea related to surgery, anesthesia, or medications. Anti-nausea medication may be prescribed after surgery. If vomiting or nausea persists despite medication, call your care team.
- Take medication with food when possible to reduce the risk of nausea or upset stomach.

ICE

- Ice regularly during the early recovery period 20 minutes at a time with a minimum of a 15 minute period of rest from icing in between.
- Do not directly apply ice or frozen objects to skin. Use a barrier to protect the skin from temperature related damage.
- At times, an ice machine or device will be utilized for cold therapy after your surgery. Use as directed.
- Cold therapy is an important means of pain relief and swelling reduction for the first several weeks following surgery.

ACTIVITY

- If a splint was provided, do not remove or get wet until follow-up visit. Further splint care instructions will be provided.
- If a brace or immobilizer was provided, you may need to readjust or tighten the straps once the dressings are removed to ensure appropriate fit.
- Follow appropriate weight bearing instruction and range of motion instructions as provided on day of surgery.
- You should not drive while taking pain medication. Your care team will instruct you when it is otherwise safe to begin driving after surgery.

WHEN TO CALL YOUR CARE TEAM

- Contact your care team for any of the following:
 - Fever in excess of 101.5 degrees
 - New pain, swelling, or redness at either leg or calf area
 - Shortness of breath, chest pain, persistent nausea/vomiting
 - Persistent or excessive drainage from your surgical site
- Numbness may be associated with peripheral nerve block or local anesthetic injection at the surgical site.

FOLLOW UP INSTRUCTIONS

- If you do not have a follow-up appointment scheduled with your care team, contact the office to set up a return visit around 10-14 days after your surgery.
- If physical therapy was discussed, call the office to schedule physical therapy sessions. These sessions typically begin around 7-10 days after surgery.

OTHER INSTRUCTIONS
