

## Post-Op Information: Distal Radius Fracture

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### WHAT CAN I EXPECT AFTER SURGERY?

- Your arm will be bandaged in a partial cast or splint covered with an elastic (Ace) bandage. You will be able and encouraged to move your fingers and elbow. If the splint feels too tight, it is okay to loosen and re-wrap the ace wrap but do not remove the cotton cast padding or hard splint.
- You should leave this dressing on until your return to clinic. You will need to cover it with a plastic bag or cast protector (available at any drug store, Target, Walmart or Amazon) for showering.
- After surgery, you will have pain, but it is VERY important to begin moving your fingers while in the splint from surgery (see the finger exercises below).
- Ice around your splint or in your elbow crease for 10-15 min every hour while awake to help with swelling.
- Please take Vitamin C 500 mg twice a day for 6 weeks after your surgery. There is some evidence this helps prevent nerve pain and nerve problems.
- Please also consider taking Vitamin D 1000 IU and Calcium 1200 mg each day. Vitamin D and Calcium are important for bone healing.

### PAIN MEDICATIONS:

- If you had a nerve block, start taking pain medication (Tylenol and Ibuprofen) as soon as you feel the sensation starting to return.
- The first night after surgery, set an alarm to evaluate your pain in the middle of the night and take at ibuprofen and Tylenol together. Also take a dose of the stronger pain medication (oxycodone) at this time if you feel the block starting to wear off.
- Please take ibuprofen (Advil or Motrin) and/or Tylenol (acetaminophen) for pain control.
  - Ibuprofen: up to 600 mg three times per day. We recommend you take this with meals.
  - Tylenol: up to 1000 mg (2 extra strength or 3 regular strength tablets) up to three times per day.
  - You can take these medications separately but It is also safe to combine these medications together.
- Do not combine acetaminophen with pain medications such as Vicodin or Percocet, as those medications also contain acetaminophen.
- We will give you a few doses of Zofran for nausea or vomiting which is a common side effect of anesthesia and narcotic pain medication (oxycodone).
- We will give you a prescription for narcotic pain medication (oxycodone) to use for the first week after surgery. You should use this only if the Ibuprofen and Tylenol is not adequately managing your pain.

- 2 days after surgery it is very important to decrease the amount of narcotic pain medication that you take by starting to spread the doses out (every 8 to 12 hours) and taking no more than one pill at a time. Save doses to use primarily at night during the first week to help you stay comfortable so you can sleep.
- Constipation is a common side effect from the anesthesia and pain medication- drink lots of water and take over the counter Colace and/or Senna as directed on the bottle while taking pain medication. Miralax can also be helpful.

## **FOLLOW-UP:**

- Approximately 2 weeks after surgery your wound will be checked, and your stitches will be removed. We will also get x-rays of your wrist to check the alignment.
- Please schedule a second follow-up appointment with your surgeon 6 weeks and 12 weeks after your procedure. We will also get x-rays at your 6-week postop appointment.

## **WHAT IS MY TIMELINE TO RECOVERY?**

Just as every person is unique, so is the way they recover from an injury or surgery. Here is a general timeline following an open reduction internal fixation (ORIF) for distal radius fracture:

- At your first post-op visit with Dr. Bhatt (10-14 days after surgery), your sutures will be removed and x rays will be taken.
- You will usually see the hand therapist for your custom splint between 7 and 14 days after surgery.
- Week 2-4 after surgery, continue to work on finger motion and begin wrist and forearm range of motion.
- Week 6-8 after surgery, motion should be improving and you can begin strengthening exercises.

## **RETURN TO WORK:**

- If you primarily do deskwork (typing, etc...), you may return to work in about a week.
- If you do more active work requiring occasional heavy lifting or repetitive handling of small objects, you may return to work with restrictions (no lifting >1-2 lbs, no repetitive grasp) 10-14 days after surgery.
- If you do heavy work such as construction, loading trucks, or landscaping, you may not be able to return to work for several months.

## **PLEASE CALL OUR CLINIC WITH THE FOLLOWING PROBLEMS:**

- Pain not controlled by elevation, ice, and pain medication.
- Numbness that lasts more than 24 hours after surgery and is worsening not improving.
- Fever more than 101.5 degrees F.

## SIMPLE FINGER MOTION EXERCISES:

Perform 10 reps at least 3 times a day. It may be painful to move your fingers at first, but the pain and swelling in your fingers should improve as you do the exercises. It's okay and encouraged to use your other hand to help move your fingers into the correct position.

**Straight:** All finger joints straight.

**Tabletop:** Bend the joints where your fingers meet your hand (MP joints), keep your other finger joints (IP joints) straight.

**Claw:** Straighten the joints where your fingers meet your hand (MP joints), bend your other finger joints.

**Fist:** Bend all three joints to bring your fingertips to your palm.

