

General Post-Operative Instructions

You have been given some form of Anesthesia today, therefore:

- DO NOT drive or operate heavy machinery until cleared by the surgeon to do so. This includes not driving or operating machinery while taking prescription pain medication.
- DO NOT drink alcoholic beverages for 24 hours and while taking prescription pain medication.
- DO NOT make any important personal, legal or business decisions for 24 hours.
- Females on hormonal birth control should use a second method of birth control for 30 days following surgery since some medications given during surgery could decrease the effectiveness of your birth control medication.

ACTIVITY:

- Ice and Elevate the Operative extremity near continuously x 5 days then as needed. Use pillows or the blue Carter pillow to elevate the extremity above heart level.
- If you had Shoulder Surgery then use the sling for comfort. You may however, remove the sling and actively flex and extend your fingers wrist and elbow 5 minutes 5X/day, but keep the upper arm next to your side. Flexion and extension of the fingers, wrist and elbow can be done passively (meaning the nonoperative hand is moving the operative arm thru these motions) or actively (Operative fingers, wrist and elbow are moving by their own power, independently).
- You should not drive until you are allowed to actively reach with the Shoulder and Upper Arm.
- If you had any UPPER EXTREMITY SURGERY (shoulder, elbow, wrist,hand) then DO NOT push off (such as pushing yourself out of bed) or Weight-bear on the operative side until allowed to do so by the surgeon.
- If you had Hip/Knee/Ankle/Foot surgery, then your Weight-bearing status is:
 - ____Weight-bear as tolerated
 - ____Partial Weight-bearing (50 pounds)
 - ____Toe-touch Weight-bearing (toes down on ground for balance purposes only)
 - ____Non-weight-bearing
- Be sure to actively flex and extend your toes and ankles on both sides every 15 minutes while awake to prevent the development of a blood clot and to help with the swelling.

DIET:

- Eat lightly for 24 hours after surgery. Nausea is common because of pain, pain medication and anesthesia which can slow down the motility of the Gastrointestinal (GI) tract. Pain medication is better tolerated when taken with a small amount of food rather than on an empty stomach. Fluid intake is most important after surgery. Start by taking water, sports drinks (Gatorade, Powerade, Pedialyte etc.), clear soda or Jell-O, then advance to a regular diet.

MEDICATIONS:

- Pain medication will be prescribed for you. Use the pain medication as prescribed over the first 48 hours. Depending on the type of surgery, you may be prescribed a Low Opioid Protocol which includes a minimal amount of narcotic and also meds like Gabapentin or Toradol (strong anti-inflammatory/pain pill) which could be used instead of the narcotic as the initial pain subsides. This approach has been very effective in decreasing the need for narcotics after surgery.
- You may take Tylenol or Extra-strength Tylenol in place of the pain pills as an alternative.
- Do not take Aspirin or NSAIDS like Aleve, Advil, Ibuprofen, Motrin etc. These meds may cause extra bruising and in theory may slow down the healing process. However at surgeon discretion, if this is the only type of medication that you tolerate, then surgeon may allow it (this is still preferable instead of using Narcotics). In addition if you take Aspirin or another Anti-coagulant for cardiac/heart/blood clot risk/stroke then your usual regimen for this is usually restarted on Postoperative Day #2--depending on your bleeding risk etc. This restart date may be adjusted at Surgeon discretion.

WOUND CARE:

- If you have a soft dressing then leave it in place for 5 days and then remove. At that point you can wash the incision with soap and water only in the shower, dry thoroughly and then reapply a sterile gauze dressing to the incision daily and as needed. If there is any drainage, then this may require more frequent dressing changes.
- If you were placed in a splint or a cast then leave it on until your first follow-up appointment. Should you have increasing/constant pain, finger swelling, increasing numbness or any problems with the splint/cast then call immediately or go to the Emergency Room.
- A sling may be provided for your comfort. If you had Shoulder Surgery, then you may remove the sling and actively flex the Operative-side fingers wrist and elbow at least 5 minutes 5X/day but keep the upper arm next to your side and otherwise stay in the sling. If you had Elbow Surgery and are in a splint, then the sling is provided for your comfort when up and ambulatory (walking) but could be removed (the Sling, not the Splint) as necessary.

IV SITE:

- You have had an intravenous catheter removed from your arm, hand or foot. It is important that you pay special attention to this in order to prevent an infection.
- FOLLOW THESE STEPS:
 - Keep Band-aid or dressing on arm/hand/foot for at least 8 hours. Do not leave wet Band-aid on at any time!

- o Observe the area for signs of infection such as fever, redness, pain, swelling or discharge. If these symptoms occur, then see your surgeon or go to Chambersburg Hospital Emergency Room.

FOLLOW UP APPOINTMENT:

- Call the Orthopaedic Surgery Office at 717-263-1220 TODAY to Schedule/Confirm a Follow Up appointment usually 2 weeks after the surgery. This appointment is usually arranged for you when the surgery is scheduled.
- Most patients will see my Physician Assistant at the first Postoperative appointment and then will usually see me for the remaining follow-up appointments. My Physician Assistants are well versed in my routine and the plan is outlined in your Operative Report. If they have any concerns, they do not hesitate to call me.
- My Shoulder and Elbow arthroscopy patients (Rotator cuff repairs, Labral repairs, Loose body removals etc.) should have an appointment on the Monday or Tuesday after surgery (4-5 days postop) so that I can change the dressing and instruct you in the early PROM (Passive Range of Motion) stretching routine.