



Town Center

ORTHOPAEDICS

ASHBURN • CENTREVILLE • FAIRFAX • RESTON

PHONE: 703-435-6604

Post-Operative Instructions Following Lower Extremity Surgery

1. WHEN DO I COME IN FOR MY FIRST FOLLOW-UP VISIT?

If an appointment has not already been scheduled, please call the office the day following surgery to schedule an appointment for approximately one week after your surgery.

2. WHAT SHOULD I EXPECT AFTER SURGERY?

After surgery, it is normal to experience some discomfort. A pain medication prescription was sent to your pharmacy. Please use the medication regularly as directed for the first twenty-four hours and then as needed after the first day. Tylenol (Acetaminophen) may be used with or instead of the prescription medication.

If you have been prescribed Celebrex (Celecoxib), you should not take additional anti-inflammatories. If you have not been given a Celebrex prescription, do not use an anti-inflammatories, unless instructed otherwise.

A low-grade temperature (99-101 degrees F) is common. Please call the office if your temperature is consistently elevated over 101.5 degrees.

3. HOW LONG SHOULD I KEEP MY OPERATIVE SITE DRY AND WEAR THE BANDAGE?

The bandage, splint or brace should be kept dry and in place for 48 hours. For the first 48 hours, it is best to take baths so that the dressing, splint, or brace may remain dry.

If there is a splint or brace in place, do not remove it unless instructed otherwise. If there is a dressing in place, please remove and discard the bandages forty-eight hours after surgery. In this case, there will be several stitches or staples along the incision. Keep these and your incision dry until these are removed.

4. WHAT EFFECTS MIGHT I NOTICE FROM THE ANESTHESIA?

If you had general anesthesia, some fatigue and lethargy may be noticeable for a day or two. Occasionally, nausea may occur. Eating light foods will help. Resume your regular diet as the nausea resolves.

If you had a block, soreness in the area of injection is common. The soreness should resolve by three to four days following the surgery. If, by that time, it has not resolved or it is getting worse, please call my office or call the hospital and ask for the anesthesia office.

5. WHAT CAN I DO TO HELP REDUCE SWELLING AND DISCOMFORT?

Limiting your activities and resting with the surgical site elevated above your heart are the best methods of reducing swelling and discomfort and will speed up your recovery. You may have a cool therapy device. If so, the company's representative should have provided you with instructions on its proper use. If not, please call their office for assistance. If you cannot reach them, please call my office. If no splint is covering the surgical site, ice may also be used. Fill a plastic bag with ice cubes and place it over the shoulder with a towel between the skin and the ice bag. Leave the ice in place for 15-30 minutes. This may be done every hour while awake.

You may also want to take pain medication before going to sleep.

With regard to your activity level, use common sense as your guide. You should have received instructions on the permitted amount of weight you can put on your operative leg. If unsure, do not weightbear on the operative leg until you have clarified the restrictions with me. Otherwise, advance in your daily activities as tolerated. In addition, any painful activities are to be avoided.

6. WILL I HAVE AN EXERCISE PROGRAM TO FOLLOW?

If physical therapy is to be used, a physical therapy prescription will be emailed to you. If so, and you have not already scheduled therapy, please arrange for this to begin **as soon as possible**. If you need assistance locating a therapist, please call our office for assistance.

7. WHAT ELSE CAN I EXPECT

1. Bruising and swelling of the shoulder region is common. This is caused by bleeding from the bone and soft tissues (cut during the procedure) into the tissue just deep to the skin.
2. Some patients develop numbness, stiffness, and/or swelling in the ankle and foot following surgery. Numbness and weakness is most often initially due to the anesthesia block, if administered. Later, this is usually due to swelling and immobilization of your leg and usually resolves shortly after the swelling subsides and therapy begins. If numbness in these areas persist, please call our office.