
Post-op Instructions for Proximal Hamstring Repair

These instructions are to compliment the information given by the nursing staff and physical therapists. They cover many of the common questions.

Wound Care

- Please leave the original surgical dressing in place for 3 days then remove and change daily or until no drainage is present. Leave the mesh dressing over incision in place. If you notice bleeding through this dressing, you may reinforce with dry gauze and tape over top of the dressing or change the dressing if needed.
- You may get the Prineo mesh dressing, that is directly over your incision, wet when showering 3 days after surgery. The shower should be brief, and the wound patted dry with a clean towel. No baths or soaking the incision until 2-3 weeks after surgery and scabs are absent.
- If purulent drainage (thick white or greenish in color) is coming from the wound, or the wound has increasing redness, or if you are having a temperature of 101 or higher, please report these symptoms to your surgeon or the doctor on call.

Pain and Swelling

- Ice your leg as frequently as possible. We recommend 4-5 times per day for 20 minutes per time. You may use either the ice bag given to you at the hospital or simply place ice in a zip lock bag, wrap it in a towel, and place it on the leg. Do not apply ice directly to the skin as it may damage the skin if left on for long periods of time.
- Narcotic pain medication will be prescribed for use after you leave the hospital. Wean off these medications as soon as possible. Narcotic pain medications should be reserved for breakthrough pain. Tylenol and anti-inflammatory medications (Aleve, Advil, Ibuprofen), unless contraindicated, should be mainly used for pain control. Do not take Tylenol at the same time as your prescription narcotic if it contains Tylenol. Do not exceed more than 3,000 mg of Tylenol in a 24 hour period. Narcotic medications can cause constipation and you may want to use an over-the-counter stool softener. If a refill of medication is needed, please call the office during regular business hours, Monday-Friday 8:00 a.m. to 5:00 p.m. In general, refills will not be made after hours or on weekends, so please plan ahead.
- Swelling and bruising, to some degree, is common after surgery. To reduce swelling, elevation is very helpful. Elevate the leg by placing 1-2 pillows beneath your knee for a duration of 30 minutes every 2 hours is a good recommendation for the first 2-5 days after surgery. Excessive pain and swelling should be reported to your surgeon.

Weight Bearing

- You should remain non-weightbearing with the use of crutches or a knee scooter until your follow-up appointment. Your hinged knee brace is set to keep your knee flexed to 90 degrees. Do not straighten your knee past this point until instructed by physical therapy and your provider.

Preventing Blood Clots

- Moving your foot/ankles up and down on a regular basis helps circulate blood from your legs to help prevent a blood clot.
- Most patients will be treated postoperatively with a blood thinner (Eliquis, Xarelto or Aspirin) daily for one month or possibly longer until full weight bearing.

Driving

- To drive you must no longer be taking narcotic pain pills (plain Tylenol is allowed). Also, you must feel strong and alert. You must be safe to drive in the brace at prescribed settings.

Physical Therapy (PT)

- You will start PT per your surgeon's orders likely 1-2 weeks postop. Modifications may be made on an individual basis. PT will follow a set protocol per your surgeon.

Follow-up

- Make sure an appointment has been scheduled for you with Dr. Crow approximately 10-14 days after surgery.

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