

TEL **715.832.1400**757 LAKELAND DR. STE B **CHIPPEWA FALLS** WI 54729
TEL **715.723.8514**

1200 OAKLEAF WAY STE A ALTOONA WI 54720

Post-op Instructions for Lower Extremity Fracture

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

WOUND CARE

Dressings are to be kept clean and dry. A small amount of clear drainage or bleeding is normal. If the ace wrap feels too tight, you may loosen it and re-wrap it.

The splint should remain on until you follow-up in the clinic with your surgeon.

When showering, please place a plastic bag over the leg up to the thigh and secure it with tape, or wrap your knee with Glad Press & Seal plastic wrap. Pat the knee dry immediately with a clean towel if it does get slightly wet or you may use a blow dryer on cool to dry.

For patients with an incision that is visible, if you develop purulent drainage (thick white or greenish in color) from the wound, increasing redness, or if you are having a temperature of 101 of higher, please report these symptoms to your surgeon or the doctor on call.

PAIN/SWELLING

To lessen pain and swelling, you may ice after surgery. Put the ice in a zip lock bag or in a towel and place over the surgical site. Do not place ice or cooling devices directly on the skin for prolonged periods of time as it may damage the skin. We recommend 20 minutes, 4-5 times per day for the first 1-3 days.

Narcotic pain medication will be prescribed for use, if needed, after you leave the hospital in limited amounts. Try to wean down/off as soon as you are able. Use acetaminophen (Tylenol) and/or anti-inflammatories (ibuprofen or Aleve) as main medications for pain control as/if appropriate. Add the narcotic medication for additional pain control if needed. It can help to stagger your pain medications. 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 the weekends. Please plan ahead.

Also narcotic medications can cause constipation so you may want/need to use an over the counter stool softeners/laxatives as needed.

Swelling to some degree is common after surgery. To reduce swelling, elevation is very helpful. Elevate the foot above the heart level for the first 2-5 days after surgery. Elevation for 30 minutes ever 2 hours is a good initial recommendation. Excessive pain and swelling should be reported to your surgeon.

EXERCISES

Crutches and splint or brace are required following surgery. You should not put weight on the surgical leg until otherwise instructed by physical therapy or your physician.

If you have a splint it should be left on at all times. Do not remove prior to your follow up appointment.

If you have a brace in place follow the direction of the surgeon or physical therapist on allowed motion or brace settings. Your brace can be removed for cares and to work range of motion if appropriate.

DRIVING

To drive you must no longer be taking narcotic pain pills (plain Tylenol is allowed). Also, you must feel strong and alert.

FOLLOW-UP

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

Brent Carlson, MD Chippewa Valley Orthopedics & Sports Medicine 715-832-1400