

POST-OPERATIVE INSTRUCTIONS TIBIAL PLATEAU ORIF

MEDICATION

- One of two pain medications, Norco (hydrocodone), or Percocet (oxycodone) will be prescribed to you. Take as instructed and as needed.
 - Pain medication may cause constipation. You may take an over the counter stool softener (Colace, Senekot, etc) to help prevent this problem.
 - You should take these medicines with food or they may nauseate you.
 - You may not drive or operate heavy equipment while on narcotics
 - Pain medication is refilled on an individual basis and only during office hours.
- If you have a nerve block, begin taking the pills as you feel your sensation returning to prevent a sudden onset of extreme pain (typically 10-12 hours after your surgery). **DO NOT WAIT UNTIL THE BLOCK COMPLETELY WEARS OFF.**
 - Most patients find it helpful to take two pills 10-12 hours after surgery and another two every four hours the first night after surgery, decreasing the amount as you feel the pain improving.
 - The first 48 hours are typically the worst for pain and gradually improves.
- If prescribed Lovenox or Xarelto for prevention of blood clots, begin the day AFTER surgery and finish all injections or pills.
- Take one regular aspirin (325 mg) once a day for 10 days unless you have been prescribed Xarelto, Lovenox, are on another blood thinner, or have a history of stomach ulcers.
- **Resume all home medications unless otherwise instructed.**
- Call immediately to the office (314-336-2555) if you are having an adverse reaction to the medicine.

WOUND CARE

- You may remove your bandages two days after surgery unless instructed otherwise. Do not remove the steri-strips covering the incisions. If they fall off, cover incisions with band-aids and change daily.
- Incisions may not get wet until after your first postoperative visit. NO submersion of wounds (bath, hot tub, pool) until a minimum of 3 weeks after surgery.
- To take a shower or bath with your dressing still on, wrap the leg in a large plastic garbage bag with tape at both ends. After you remove your dressings, wrap with plastic wrap or continue to use the bag. Pat dry if knee gets wet.

- Continue to use the bag or plastic wrap to keep incisions dry for at least 2 weeks after surgery.

CRUTCHES

- Toe touch weight bearing as tolerated with your brace on the involved leg is allowed unless instructed otherwise after surgery to help with balance and stability.
- Crutches will be needed until physical therapy and Dr. Grimshaw deem them unnecessary based on strength in the involved leg and you can walk with a **normal gait (heel to toe walking)**.

BRACE

- The post-operative brace, locked in full extension, is to be worn at all times until your first post-operative appointment.
- It is necessary for even the simplest tasks such as going to the restroom to protect your meniscus repair.
- Dr. Grimshaw will instruct you when to open the brace and discontinue the brace.

EXERCISE

- Following surgery three main goals exist:
 1. Full knee extension
 2. Quadriceps contraction and activation
 3. Control of pain and swelling.
- To help gain full knee extension, place a small rolled up towel under your ankle and push back of knee to touch the floor by contracting your quadriceps muscle.
- DO NOT put pillows under the knee while you sleep to help the knee from getting stiff.
- Elevate your leg for several days if you are sitting to help with swelling.
- Being up and around after surgery will help diminish the risk of blood clots.
- Therapy is a key aspect of recovery and should start within 2-3 days after surgery.

SLEEP

- Nighttime will probably be the most uncomfortable time
- You should sleep in your post-op brace until your first post-op visit where you will get additional instructions depending on your progress.
- You may slightly loosen the straps to aid in sleeping if you feel they are tight.

COLD THERAPY

- Ice should be used for comfort and swelling. Use it at least 20 minutes at a time. Many patients use it an hour on then an hour off while awake for the first day or two.
- **Never apply directly to exposed skin. Place a dish-towel or t-shirt between your skin and the ice.**
- After the two days, use 20-30 minutes every 3-4 hours if possible.

- A simple bag of frozen peas may be used as an inexpensive ice pack. Buy several bags of peas, place in a gallon size zip-lock bag making them about an inch thick and removing as much air as possible. Return to freezer, lying flat when done.

BRUISING

- The lower leg may become swollen and bruised, which is normal. This is from the fluid and blood from the knee moving down the leg and should resolve in 10-14 days.
- **If you experience severe calf pain and swelling, call the office immediately.**

EMERGENCIES

- If you have an emergency contact Dr. Grimshaw's office.
- Contact the office if you notice any of the following:
 - Uncontrolled nausea or vomiting, reaction to medication, inability to urinate, fever greater than 101.5 (low grade fevers 1-2 days after surgery are normal), severe pain not relieved by pain medication, redness or continued drainage around incisions (a small amount is normal), calf pain or severe swelling.
- **If you are having chest pain or difficulty breathing, call 911 or go to the closest emergency room.**

FOLLOW UP APPOINTMENT

- Please make your first post-op visit 5-7 days after surgery if not done so already.
- **If you have any questions, please call 314-336-2555.**