



MOTION ORTHOPAEDICS

## Lower Extremity Post-Operative Instructions

Jason P. Young MD

**Diet:** Advance to solid food as tolerated

**Follow-up Appointment:** \_\_\_\_\_

**Bandages:** Do not remove your dressing for 24 hours. Most patients will be seen within 48 hours for a dressing change and instruction. If you have surgery on a Thursday or Friday, remove your dressing 48 hours after surgery. You can cover the small portal incisions with Band Aids. Some bloody drainage is typical for up to 4 days after surgery. Larger incisions can be left open to air or covered with a dry dressing. Do not apply ointment, creams or other cleansing agents to your incision. \*If you have a splint placed, please do not remove it – this will be done in the office.

**Blood Clot Prevention:** You will have TED hose on; please continue to wear these until instructed otherwise, which is usually less than 1 week (you may take breaks to wash/or pick up a second pair at a local drug store.) Typically, Aspirin 325mg (1 tablet per day for 2 weeks) is prescribed to help reduce your risk of a blood clot after surgery. Aspirin can be picked up over the counter. Please take as instructed. If you have risk factors for, or have experienced a prior blood clot, you may be placed on other blood thinning medications to be taken as directed.

**Bathing/Showering:** All incisions must stay dry until the sutures are removed. Please wrap extremity to keep dry during bath or shower. Saran wrap or "Press n' Seal" usually works nicely to seal the area. Soaking the wound is not allowed until 48 hours after sutures are removed.

**Activity:** Please follow your weight-bearing status. No sports, running, squatting, kneeling, or exercise machines until directed by physician.

- Partial Weight Bearing with Crutches       Non-Weight Bearing With Crutches

**Medications:** A local anesthetic and/or a nerve block may be administered prior to surgery help control your pain. This block may provide relief for 6-12 hours. You have also been given a prescription for a mild narcotic that should be used according to written instructions. You cannot consume alcohol or operate any machinery while taking these medications. In addition, these medications can cause nausea and constipation. You have been given a prescription for an anti-nausea medication (Zofran) to use if needed, and we highly recommend a stool softener (Colace - over the counter) as well to prevent constipation. **\*Please note:** we will **NOT** refill narcotic pain medications after hours.

**Comfort Measures:** Please elevate your leg at heart level for 2-3 days after surgery, and apply ice approximately 20 minutes per hour. Please do not place ice directly on skin; nothing thinner than a wash-cloth should be between the ice pack/machine and your skin, or frostbite can occur. If you are using a CryoCuff/Polar Care ice unit, you might find that freezing water in paper/styrofoam cups will make replacing ice more efficient. Remove the paper/styrofoam from the ice block prior to putting it in the cooler.

### Exercises:

- Begin range of motion once brace unlocked
- Straight leg raises: while lying down fit up your leg with the knee straight and hold heel 10 inches of the ground. Hold 10 seconds then repeat, 10 reps, 3 times per day.
- Heel Slides: While lying down slide your heel toward your buttock, bending the knee. Repeat 10 times, three times per day.
- Ankle Pumps: Move your foot up & down 30 times every hour for first 5 days after surgery.

**Problems:** Your leg may have swelling/pain for first several days. If you have increasing pain please try elevation, ice, and medication. If these measures do not help, please contact your surgeon.

### Please contact immediately with the following:

1. Severe pain
2. Temperature above 101F
3. Pain, redness, or significant swelling in your knee or calf.

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