



PATIENT POST-OPERATIVE INSTRUCTIONS

General and Post Fracture Surgery

1. DRESSINGS AND SUTURES

- The dressings/splint on your extremity should be left in place until instructed by Dr. Ghattas.
- **If you have a splint on, keep the splint on until seen for your first follow up appointment.**
- If you don't have a splint on, after 3 days you can remove your dressings and shower normally but do NOT scrub the incisions.
- Apply Band-Aids over the incisions to help them heal once the initial dressing has been removed.
- Do NOT soak the limb (ie. hot tub / bath, etc) until your wound is healed, which is typically at 2-3 weeks.

2. ACTIVITY

- Activity allowed in the immediate post-operative period will be specified by Dr. Ghattas based on your specific procedure.
- If instructed, Keep the operated limb immobilized in the sling or splint at all times until your first follow up appointment.

3. PHYSICAL THERAPY

- Post-Surgery, you may be provided with a detailed PT protocol, which you should take to your physical therapist. Your protocol will depend on the specific procedure performed.
- Your first physical therapy session with a *registered physical therapist* will be determined on your first post-op visit.
 - Take your PT prescription and Dr. Ghattas' physical therapy protocol to your first physical therapy visit.
- It is recommended that you attend physical therapy 2-3 times per week for the first 4-6 weeks after surgery, with exercises performed daily at home.
- Not everyone needs Physical therapy; this will be on a case by case basis if Dr. Ghattas feels you would benefit.

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4. PAIN

- Local anesthetic has been placed into your surgical incision – this will wear off 6-8 hours after surgery.
- You have been provided with a prescription for several different medications that when used together will provide the most effective pain relief after your surgery.
 - Read each bottle carefully and follow instructions:
 - 1) Zofran 8mg – 1 PO 6 hours PRN for nausea and vomiting
 - 2) Percocet (5mg/325mg) – 1-2 tabs every 4-6 hours as needed for breakthrough pain
 - OR Norco every 4-6 hours as needed for pain.
 - 3) Muscle relaxer (metaxalone or Flexeril)
- Once you no longer require Percocet or Norco for pain control, switch to Extra-Strength Tylenol as required, but do not take Tylenol with the Percocet, as you could damage your liver.
- Use an ice pack or cold therapy delivery system for 20 mins every hour while awake to help with pain and swelling.
- Narcotic Pain medication can often cause constipation, so you will need a stool softener such Dulcolax or Colace which you can get over the counter

5. BLEEDING AND SWELLING

- It is common to have some spotting through the dressings following surgery. Place an additional dressing over the area if this occurs.
- The incisions may continue to “leak” fluid after removal of the initial dressing – this is common and should not raise concern. Place an additional bandage or Band-Aids over the incisions to help them heal. Keep the incisions clean and dry.
- Swelling is also expected after surgery. Keep the limb elevated above the level of the heart and ice it. This will significantly help with pain as well.

6. DIET

- Resume your regular diet following surgery – drink plenty of fluids!
- Add additional fiber to your diet to help relieve the constipation associated with the pain medication.
- If you have diabetes, it is very important to maintain normal glucose levels after your surgery.

7. RED FLAGS

- Complications after surgery are very rare but can occur. If you develop any of the following symptoms go to your nearest emergency department for assessment:
 - Increasing calf pain / swelling that does not improve with elevation and ice
 - Shortness of breath
 - Chest pain
 - Redness and purulent drainage around the incision

8. POST-OPERATIVE VISIT

- Your first post-operative visit is scheduled for: _____