

## POST-OPERATIVE INSTRUCTIONS

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_

On \_\_\_\_\_ you underwent the following procedure: \_\_\_\_\_.

Please read these instructions to insure an optimal post-operative period.

IF YOU HAVE ANY QUESTIONS OR CONCERNS CALL OUR OFFICE AT **(925) 400-6900** DURING NORMAL BUSINESS HOURS  
**M-F 8-4:30PM**. IF YOU REACH THE VOICEMAIL YOUR CALL WILL BE RETURNED WITHIN ONE HOUR.

**AFTERHOURS**, LEAVE A DETAILED MESSAGE FOR NON-URGENT MATTERS OR, IN AN EMERGENCY, TO BE CONNECTED TO  
THE DOCTOR ON CALL.

### Diet

You may continue your regular diet after surgery. Studies show that a high protein, low sugar diet can help wound healing.

### Medication

You have been prescribed one or more of the following medications:

- Oxycontin CR 10mg, 1 tab every 12 hours for \_\_\_\_\_ days
- Norco 7.5/325 (Tylenol), 1-2 tabs every 4 to 6 hours as needed for **severe** pain.
- Tylenol #3 1 tab every 6 hours as needed for **mild** pain.
- Vicodin 5(hydrocodone)/500 (Tylenol) 1-2 tab every 4 to 6 hours as needed for pain maximum 8 a day.
- Keflex 500 mg, 1 tab every 12 hours to help prevent infection, **until prescription is finished**
- Cipro 500 mg 1 tab every 12 hours to help prevent infection, **until prescription is finished**
- Clindamycin 600 mg 1 tab every 12 hours to help prevent infection, **until prescription is finished.**
- Lovenox 40 mg 1 injection subcutaneously (SQ) daily, until discontinued by doctor.
- Aspirin Enteric Coated 325mg 1 by mouth twice a day until discontinued by doctor.
- Zofran 4 mg 1 tablet every 6 hours, as needed for nausea.
- Atarax 50 mg one tablet every 6 hours, to potentiate (turbo-charge) pain medication.
- Other: \_\_\_\_\_

### Important Notes:

1. Narcotic pain medications may cause constipation. If this occurs, you can use an over the counter laxative.
2. You may continue taking all previous home medications except \_\_\_\_\_  
\_\_\_\_\_.
3. Please refrain from using non-steroidal anti-inflammatory medications (NSAIDs) in the *6-week post operative period*. Examples- Ibuprofen, Motrin, Advil, Aleve, Naprosyn, Celebrex, etc. These medications can prevent bone healing and can complicate the course of rehabilitation.
4. **DO NOT** add Tylenol to the above medications. As noted above, some pain medications contain Tylenol and combining them can cause **overdose and liver damage**.

### Pain Medicine Refills

Please contact our office during business hours M-F 8-4:30p at least **48-72 hours before** you run out of medication.

\*\*\*\*Please note\*\*\*\*after hours clinic and On-Call physicians **WILL NOT** refill medications.

### Tobacco Use/Smoking

Research has shown that tobacco use/smoking can lead to a delay in wound/incision healing and complications and delay of bone fusion and fracture healing and **must be stopped** in the post operative period.

### Blood Clots

The incidence of blood clots, also known as a DVT (deep venous thrombosis), after foot and ankle surgery is very rare.

However, it is important to understand any warning signs and proper protocol:

1. Be aware of new or rapid swelling of the extremities, with or without pain, which can be a sign of the formation of a blood clot.
2. This is a dangerous complication and if you notice any increasing swelling in the calf and especially above the knee, call the hospital for immediate evaluation.
3. During office hours you can call our office at **(925) 400-6900** for further instructions.
4. On the weekend or after office hours please call our office and ask the answering service to speak to the Orthopedic doctor on-call. **If you have trouble breathing, you should go to your nearest Emergency Room.**

### Weight-Bearing

- DO NOT** put your full weight on the operative leg. Use crutches or a walker for ambulation. You do not have to "hop" on your good leg while on crutches/walker. You may place the operative leg do on the floor for **balance only**; as if you are "walking on eggshells".
- You may **weight-bear as tolerated** using the post op hard-soled shoe or CAM walker/boot in addition to crutches or a walker for balance if needed.

## Dressing

1. **DO NOT** under any circumstance remove the sterile dressing unless instructed by the physician or medical assistant to do so. Some bleeding on the post operative dressing is normal and expected.
2. Keep the dressing clean and dry until the first post op visit to Dr. Andersen's office. If the dressing gets wet or soaked, call the office to schedule an earlier appointment or for instructions.

Showering Instructions: You may shower, with a plastic bag/wrap fitted very tightly over the injury.

PLEASE NOTE: THE DRESSING CANNOT GET WET—keep your foot/leg outside the shower when possible.

## Swelling

To help with swelling after your surgery, please read and follow these instructions:

The foot is susceptible to swelling (edema) after a surgical procedure—swelling can cause various degrees of discomfort or pain. A majority of this swelling reduces with the elevation of the foot/swollen extremity.

1. Elevate the foot above the heart with pillows or blankets while lying flat, not while sitting on a chair with the foot on a stool. Elevate the foot whenever possible—the more the better.
2. The amount of swelling will start to diminish 6 weeks after surgery. However, with even the most minor of surgeries some swelling may persist for 6 months to 1 year.
3. If the swelling doesn't cause symptoms, no treatment is indicated. If it is bothersome, then compression stockings are recommended: over-the-counter support hose, TEDS (prescription needed) or measured Jobst (prescription and measurement needed).
4. Be advised that 'water pills', or diuretics, will not effectively reduce the swelling and use of them could deplete your salt level and cause problems with the heart or kidneys. **It is not advised to take diuretics for the purpose of swelling reduction.**

## Occurrence of Infection

Be aware of signs of infection, which can include: fever, chills redness and drainage from the wound or increasing pain.

1. If you have any of these symptoms call our office at **(925) 400-6900**. On the weekend or after office hours please call our office and ask the answering service to speak to the Orthopedic doctor on call.

## Follow Up Appointments:

Please call our office to schedule your first post op visit, which will be 2 weeks following your surgery. Sutures/staples will be removed if they look ready to come out. If you have already been given a CAM walking boot please bring this with you to your first post-op visit.

### **Time off work**

Prior to your surgery make sure you make arrangements with your employer for the time period Dr. Andersen has provided for you. All patients are able to do sit down work after having foot and ankle surgery.

- Forefoot surgery-Return to work approximately:
  - 3 weeks post op= Light duty
  - 6 weeks post op= Full duty
- Hind foot surgery- Return to work approximately:
  - 6 weeks post op = Light duty
  - 12 weeks post op= Full duty

### **Disability forms**

If you plan to submit any disability forms after surgery, please fill out and return disability forms to the front office *prior to surgery*. These forms are completed within 3-5 business days. There is a \$15 fee per form. Please pay when you pick up your forms.

*If you have any questions or concerns please call us at **(925) 400-6900**.*