

The following information is designed to help you understand what to expect and what to do after surgery. These are general guidelines for postoperative care that can be used by most patients following surgery. Since every surgical case is unique, your surgeon may give you further or differing guidelines. Please follow your surgeon's instructions. If you have any questions or concerns, please contact our office.

### **What to Expect After Surgery**

- In the recovery room you may experience mild nausea, disorientation, and occasionally shivering.
- The stitches that have been used to close the surgical incision(s) will be covered by sterile gauze pads and may be covered with an ace bandage. Water used to irrigate the incision during surgery may leak through the incision, saturating the bandage. This blood-tinged drainage may persist for 24-36 hours. If it has not significantly decreased by this time or if you have any concerns please call our office.
- If you will be using a Cold Therapy Unit we prefer that you bring the unit and the pad with you so that the pad may be applied in the operating room and the therapy unit may be utilized during recovery. You may continue to use the unit as much as needed until your follow-up appointment.
- If you are not using a Cold Therapy Unit, ice may be applied during the first 48 hours and can be helpful to decrease pain and swelling. Ice bags/packs should never be applied directly to the skin. If the skin becomes very cold or burns, discontinue the ice application immediately.
- Your surgeon may have prescribed or applied a sling, brace, splint or immobilizer. Be sure to use this equipment as instructed.
- If you were given a set of exercises, be sure to start them according to your surgeon's instructions.
- Swelling will occur after your surgery. While it is a normal response to the surgery, it can contribute to your pain. Follow your surgeon's specific instructions for elevation, icing, limited activity, and use of anti-inflammatories to keep swelling to a minimum.
- If your surgery involves the foot, ankle, knee, elbow or wrist, elevation of the extremity above the level of your heart is very helpful in minimizing discomfort and swelling, especially in the first 48 hours following surgery. Your level of discomfort will most often be your best guide in determining how much activity is allowed. Remember that it is very easy to "over-do" in the first few days after surgery and any increase in pain or swelling usually indicates that you need to decrease your activities.
- If your surgery involves the shoulder, hand, wrist or forearm, move fingers aggressively to form a fist several times an hour, unless specifically instructed otherwise. This will minimize the chance of stiffness developing which can be difficult to overcome later.
- Additionally, if your surgery involves the shoulder, opening and closing your hand and/or bending and straightening the elbow repetitively is helpful.
- If the dressing covering the surgical site feels too tight, you may loosen it. This may alleviate the swelling near the surgical site.
- Some discomfort and bruising is to be expected following surgery.

- You may experience a variety of transient symptoms in the area of the wound, including itchiness, increased sensitivity to touch and numbness.
- Frequently a nerve block is used to decrease postoperative pain. As a result, it is not unusual to feel numbness in the extremity where surgery occurred. This numbness usually resolves within 24 hours; however, if the numbness persists beyond this time frame or you have any concerns please contact the office.

### **Activities – Driving – Returning to Work – Bathing**

- You may return to your regular activities as directed by your surgeon, the postoperative rehabilitation protocol and as pain allows. Any increase in pain or swelling usually indicates that you need to decrease your activities.
- Following surgery, it may be necessary to restrict your participation in sports. Restrictions in sports and/or activities are often indicated for a period of time and are a necessary component of a long-term, successful surgical outcome.
- You should continue to use any braces, splints, slings and immobilizers until specifically told otherwise by your surgeon.
- You may drive when you have discontinued taking narcotic medication and have been cleared by your surgeon.
- You may return to work once you feel performing your regular job is possible and you have been cleared by your surgeon.
- You may shower 2-4 days after surgery. If your doctor has instructed you to keep the area dry, tape a plastic bag around the area while showering; otherwise, remove the dressing, except the skin tapes. After showering, carefully pat the area dry, allow the area to air dry, and reapply clean dressing.
- Even after you are allowed to get the area wet, do not scrub the area. Let the water run over the incision and wash gently with soap and water, pat dry and cover with a clean dressing until the stitches, staples or steri-strips have been removed.
- If your incision(s) shows any sign of infection, please contact our office immediately. Signs of infection include: increased redness, persistent drainage, significant fever, sudden increase in pain or malodor.
- Crutches and restricted activities are very important following your surgery. Incisions are especially prone to persistent drainage if they are overly irritated by activity. This drainage can lead to infection. Please try to curtail your activities to allow the incision(s) to heal properly.
- Your level of discomfort will most often be your best guide in determining how much activity can be tolerated. Increased pain and/or swelling is generally your body's way of telling you to decrease your activity level.
- If you are going to be using crutches, walker, cane, or other assistive devices, it is often helpful to practice walking with the device prior to surgery if possible. Please be careful on slippery surfaces, steps or anywhere you might fall and injure yourself. A prescription for physical therapy can be given for preoperative gait training.

## **Medications**

- You will be given a prescription for a narcotic pain medication, which may have side effects. Pain medication often causes drowsiness and we advise that you do not drive, operate machinery or make important decisions while taking medication. Narcotic pain medications may also cause constipation. Increase your water and fiber intake to decrease this risk. A stool softener, such as Colace, is recommended. A prescription for Phenergan will also be provided to alleviate nausea. If you have any difficulty with itching, nausea, or other side effects, call our office immediately. Our answering service is available to page the doctor on call after office hours.
- Aspirin serves as a mild blood thinner and may decrease the chance of blood clots forming. Although this is uncommon, it can be a difficult problem. If you are able to take aspirin, you should take one adult aspirin (325mg) daily for two weeks following any lower extremity surgery. It is best to take aspirin with food. Patients under the age of 16 or with unusual medical problems should check with their primary care or family physician before taking aspirin.
- Do not take aspirin after surgery on the upper extremity

## **Exercise and Physical Therapy**

- Physical therapy will be prescribed specific to your type of surgery. The purpose of physical therapy is to help you regain mobility, strength and expedite your recovery.

## **First Postoperative Visit**

- Your first postoperative appointment will be within a week following your surgery. The findings at surgery, long-term prognosis and plans for rehabilitation and physical therapy will be discussed at this appointment.

## **Communications**

- Contact our office immediately at (703) 858-5454 if you are having any problems. If the office is closed when you call you will be forwarded to the answering service who will page the doctor on call.