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**Sports Medicine** 

Clinic Coordinator/Team Leader: Sarah Alexander

Office: 314-336-2555

# FOR URGENT MATTERS AFTER HOURS CALL 314-336-2555 AND REQUEST THE PROVIDER ON CALL FOR YOUR SURGEON

Call 911 if you are having a serious adverse reaction to medications, shortness of breath, chest pain, or any other life threatening reactions following your surgery.

#### **Follow up Appointment:**

• '	You will need to ca	ll and schedule a	post-operative	appointment i	ndays/	weeks.
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#### **Medications:**

#### Pain Medication:

•	<ul> <li>You have been given a prescription</li> </ul>		
	for:		

- You may also use TYLENOL in addition to end and in place of narcotic medication. You
  can take up to 4,000mg in 24 hours. Adults over 65 years of age should take smaller
  doses than this.
  - DO NOT mix alcohol or drive while taking narcotics.
  - Avoid NSAIDS (Advil, ibuprofen, Motrin, aspirin, naproxen, Aleve, Celebrex etc.)
     for at least 6 weeks following surgery. These medications may inhibit healing.
  - If you use aspirin for your heart or clotting disorder, please continue use as this supersedes the above therapy.



### **Constipation Medication:**

- Narcotics cause constipation.
- You have been given: SENOKOT or COLACE
- We recommend you start taking a stool softener +/- a laxative immediately after your surgery and continue to take it while on narcotic therapy. You may stop taking medications to combat constipation one day following the discontinuation of a narcotic. You are welcome to use over the-counter medications. Talk to your local pharmacists; they are very helpful with recommendations. For sever constipation you may need to use a suppository and /or Fleets enema. If constipation becomes severe, or if you have not had a vowel movement in more than 2-3 days following surgery, please contact us for further medical advice. You may need to visit the emergency room to prevent a bowel obstruction or other serious consequence of constipation.

#### **Antibiotics:**

- You have been given a prescription for: Keflex/Cephalexin or Clindamycin or completed in the hospital
- The purpose of the antibiotics is to help decrease the risk or postoperative infection. You were given a dose through your IV before starting surgery.
- You will begin to take this approximately 6-8 hours after your surgical procedure. You should take all of this medication for the duration prescribed.

### **Anti-Nausea/Vomiting medications:**

- You have been given a prescription for: Zofran or Phenergan or Scopolamine Patch
- This medication can help with post-operative nausea and vomiting. Take as directed on the label. If nausea and vomiting persist despite taking this medication, contact us for help.



# A

Anticoagulation	Medication:
	<ul> <li>Lower-extremity procedure: You have been given a prescription for:</li> <li>Lovenox injections or Eliquis Pills</li> <li>This is a medication used to thin the blood and help prevent blood clot after lower-extremity surgery. Please take this medication as directed and do not combine with other blood thinners.</li> <li>Please take this medication fordays, starting the day after surgery.</li> </ul>
•	<ul> <li>Upper-extremity procedures: You have been given a prescription for:         <ul> <li>or take Aspirin 81 mg (over the counter)</li> </ul> </li> <li>This is a medication used to thin the blood and help prevent blood clots after Upper-Extremity surgery. Please take this medication as directed and do not combine with other blood thinners.</li> <li>Please take this medication fordays, starting the day after surgery.</li> </ul>
decrease the chance of	Stockings/TED HOSE: These will be prescribed post-operatively to of blood clots. Please continue to wear stockings/ ted hose for 2 weeks ong car rides/airport flights or until you are back o you normal level of
	If you need a refill on any narcotic pain medication, narcotics can no longer be called or faxed into a pharmacy for pick-up. We will need to electrically prescribe any narcotic prescriptions. Please anticipate the need to refill your prescription early, especially near the weekend. Please allow for 24- hour notice when requesting a refill.

## **Wound Care:**

• As long as there are sutures closing your wound, it is imperative that you keep them dry. You may clean AROUND the wound with rubbing



alcohol, but DO NOT apply any ointments, liquids, or lotions directly to the wound. Your incision was closed with:

- Dissolvable sutures-the two ends of the suture may need to be clipped at your 2 week follow-up appointment
- External sutures-these will need to be removed at your 2 week follow-up appointment.
- Steri strips covering the incision- DO NOT REMOVE THESE. The Steri- strips will be removed at your 2- week appointment and may be replaced after sutures are removed. If that is the case, let them fall off on their own.
- NO HOT TUBS, POOLS OR OUTDOOF BODIES OF WATER FOR 2
   WEEKS POST-OP!!
- Signs of infection include:
  - Redness surrounding the incision site
  - Increased temperature surrounding incisions
  - Red "streaking" along the affected extremity
  - Any discolored drainage form incisions

# Dressings:

- You were sent home with a bag of bandages including Opsites bandages, Steri strips, gauze, and +/- ace wraps and sterile gauze. You may change your dressing the day following your surgical procedure (or it may have been changed for you while in the hospital) and then change dressing when it becomes soiled/saturated or about every 2-3 days.
  - Place Opsite dressing over the Ster-strip covered incision. You will
    continue to wear an opsite over the incision for the first 2 weeks
    after surgery. Opsite dressings are waterproof and should be worn
    while showering. Change the dressing after showering and/or if
    the dressing becomes saturated.
  - NOTE: if you are in a hinged knee brace or arm splint, you are required to wear the braced/splint while showering. You can purchase a shower bag online or use garbage bags and duct tape to keep your dressings and ace wrap dry.

C	Additional, specific
	instructions:



# Swelling Control: R.I.C.E.

- **Rest:** Limit your activities for the first 2 weeks after surgery. Ambulation or increased use of the affected limb can cause increased swelling, which can increase pain.
- ICE: Icing can be beneficial in the acute post-operative period
  - Limit icing to short durations (20 minutes or less) and never apply ice directly to the skin in order to avoid frostbite.
- **Compression**: For lower extremity procedures, wrap an ace wrap directly over wound dressing
- **Elevation**: It is important to elevate the affected limb as high as possible, higher than your heart, whenever possible.

### **Physical Therapy:**

This is a crucial part of your successful recovery.

$\bigcirc$	You will start Physical Therapy	_ days after surgery unless told otherwise; and
	YOU must schedule this appointme	ent ahead of time. (We have a list of suggested
	PT providers)	

O You will wait to start Physical Therapy until after your post-op appointment.

#### Medical Records:

To request copies of your medical records, please call our Main Office at 314-336-2555 and ask for Medical Records.

#### When to Call:

- Fever over 101.6 degrees, or fever over 100 degrees that persist for 24 hours, or longer
- Signs of infection such as red streaks on the leg/arm, foul odor from the dressing, increased drainage on the dressing



- Severe pain that is not relieved by your pain medications or other pain-relieving techniques
- Increased swelling that does not improve with elevation, especially with new ankle swelling and associated calf pain
- If an emergency develops on the weekend or at night, call the office telephone number and you will be directed to the After Hours Line. If there is a delay in contacting the surgeon on call and you are concerned, go directly to the emergency room for evaluation and treatment.