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Extremity Surgery

KNEE · SHOULDER · ELBOW — POSTOPERATIVE INSTRUCTIONS

Patient _____ **Surgery date** _____ **Side** ☐ Right ☐ Left

YOUR SURGERY

Surgical area: ☐ Knee ☐ Shoulder ☐ Elbow ☐ Other _____

Procedure: _____

Findings: _____

MEDICATION

Pain medication

Narcotic/opioid medications (oxycodone, hydrocodone) are habit-forming. If needed, you will receive a one-time prescription sized for your surgery. Most patients need them for only 2–3 days; taking them longer than 6 days significantly increases the risk of dependence. **Do not drive, drink alcohol, or make important decisions while taking them.**

Take 1–2 tablets every 4–6 hours as needed for pain.

☐ Oxycodone ☐ Percocet (oxycodone/acetaminophen) ☐ Norco (hydrocodone/acetaminophen)

☐ Other _____

Tylenol (acetaminophen)

☐ You may add Tylenol 325 mg, 2 tablets every 4–6 hours. Do not exceed 3,000 mg in 24 hours *from all sources*.

☐ Do NOT take extra Tylenol — your prescribed pain medication already contains acetaminophen.

Anti-inflammatories (NSAIDs: ibuprofen/Advil/Motrin, naproxen/Aleve, meloxicam/Mobic)

NSAIDs can slow tendon and bone healing and increase bleeding risk; they are approved only for specific patients.

☐ NSAIDs approved ☐ NSAIDs **NOT** approved

Blood clot prevention

☐ **Aspirin 81 mg once daily** for 4 weeks

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☐ Lovenox _____

☐ Continue your home blood thinner

☐ No blood clot medication needed for your procedure

Nausea & constipation

You have prescriptions for **Zofran** (nausea — fill only if you have severe nausea) and **Colace** (stool softener while taking narcotics). Walking, fluids, fiber, and prune juice also help; MiraLAX is OK if no bowel movement in 2–3 days.

Other: _____

ACTIVITY

Ice / cold therapy

☐ **Cooling unit:** use in 4-hour intervals with 30-minute breaks for the first 1–2 weeks, then as needed. Keep a layer between the pad and your skin. **Do NOT** leave on overnight.

☐ **Ice packs:** 20 minutes on / 20 minutes off as needed for the first 2 weeks. Ice works through thick bandages even if you can't feel the cold.

Do NOT use heat on the surgical area.

Nerve block: If you had a nerve block, the arm or leg may be numb and weak for 12–36 hours. Protect it — you cannot feel heat, cold, or pressure. Use your sling, brace, or crutches as directed, and start your pain medication before the block wears off.

- Minimize activity the day of surgery.
- Elevate the surgical arm or leg on pillows above heart level for the first 48–72 hours to reduce swelling.
- Move the joints above and below the surgery that are not immobilized — fingers, wrist, and elbow, or ankle and toes — several times every hour you are awake.
- **Do NOT** use exercise equipment unless instructed.
- **Driving:** no driving while taking narcotic pain medication or while wearing a sling, splint, or brace on a limb you need to drive.

WEIGHT BEARING & USE OF THE LIMB

Leg

☐ Full weight bearing ☐ Partial weight bearing _____ % ☐ Touch-down weight bearing ☐ Non-weight bearing

☐ Use crutches as needed for 24–72 hours, then discontinue.

☐ Use crutches until seen in the office.

☐ No crutches needed.

Arm

☐ Use the arm for light daily activities as comfort allows.

☐ No lifting more than _____ lbs with this arm.

☐ Do not use the arm — keep it in the sling or splint except for hygiene and exercises.

IMMOBILIZATION

☐ Sling ☐ Splint ☐ Brace ☐ Cast ☐ None ☐ Other _____

☐ Wear at all times, including sleep, until your first post-op visit, removing only for hygiene and exercises.

☐ Wear for comfort and discontinue as you feel able.

☐ Brace settings: extension _____° flexion _____° ☐ locked straight for walking

☐ Other: _____

SHOWERING & DRESSING CARE

Showering

- You may shower **2 days after surgery** unless told otherwise, protecting the surgical site.
- If you have a splint or cast, cover it with a plastic bag or cast cover — it must stay completely dry.
- Pat incisions dry; do not scrub them.
- **No baths, pools, or hot tubs** for 2 weeks, and until incisions are fully healed.

Dressing

- Keep the dressing dry. Some light bloody drainage through the bandage is normal.
- No lotions, ointments, or creams on the incisions.

☐ Keep the dressing on for **3 days**, then replace with clean gauze or Band-Aids. Leave steri-strips in place.

☐ Keep the dressing on for **7 days**, then replace with clean gauze or a bandage.

☐ Keep the splint/cast on until your first post-op visit.

☐ Ace wrap for compression: rewrap if loose; replace if it becomes saturated or soiled.

DIET

- Eat lightly the day of surgery, then advance to your regular diet. Drink plenty of non-alcoholic, caffeine-free fluids.

- A well-balanced, protein-rich diet supports healing. Avoid new supplements in the early recovery period unless cleared by your surgeon.
- If you have diabetes, check your blood sugar more often — surgery and steroids given during anesthesia can raise it.

PHYSICAL THERAPY

☐ You have been given a physical therapy prescription and protocol (in your post-op packet). Call a convenient location to schedule — therapy should begin within **7–10 days**. Bring the prescription and protocol to your first visit.

☐ You will NOT start therapy before your first post-op visit. You will receive PT instructions at that visit.

FOLLOW-UP

Your first post-operative appointment: **Date** _____ **Time** _____ **Location** _____

- To change your post-operative visit, call **469.800.7200**.
- Pain medication refills: call Monday–Friday, 8:30 am–3:00 pm. Allow 24–48 hours. Narcotic refills are not available after hours or on weekends.

WHEN TO CALL US — 469.800.7200, DAY OR NIGHT

- Fever over 101.5°F, or chills
- Redness spreading from the incision, red streaks, foul odor, or drainage that keeps increasing after day 3
- Calf pain, tenderness, or swelling
- Pain or swelling not relieved by your medication, ice, and elevation
- Hand, fingers, foot, or toes that is cold, pale, or blue, or numbness/weakness that is worsening (mild numbness around the incisions is expected)
- Bleeding that soaks through the dressing

If you cannot reach the on-call surgeon promptly and you are concerned, go to the nearest Emergency Room.

CALL 911 IMMEDIATELY FOR CHEST PAIN OR SHORTNESS OF BREATH.

SPECIFIC INSTRUCTIONS

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Please read these instructions carefully before calling the office — most common questions are answered here. Thank you!