

Tristan Juhan, MD
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POSTOPERATIVE INSTRUCTIONS

Ankle Fracture – open reduction internal fixation

DIET

- Begin with clear liquids and light foods (jello, soups, etc.)
- Progress to your normal diet if you are not nauseated

WOUND CARE

- MAINTAIN SPLINT until post op visit #1.
- To avoid infection, keep surgical incisions clean and dry – you may shower by placing a large garbage bag over your splint starting the day after surgery – NO immersion of operative leg (i.e. bath)

MEDICATIONS

- Colace (Docusate Sodium)
 - This medication is to help with constipation, a common side effect after taking narcotic pain medications (like Norco) and general anesthesia.
 - Take 1 pill in the morning and 1 in the evening to prevent constipation.
 - It is normal to take several days to make a bowel movement after surgery
 - Drink plenty of clear liquids as the anesthesia can cause dehydration/constipation as well.
- Hydrocodone/Acetaminophen (Norco)
 - This is a narcotic medication for pain.
 - This medication is to be taken only AS NEEDED.
 - Plan to stay on a scheduled dose of 1-2 tablets every 4-6 hours for the first 2-3 days.
 - After 2-3 days you should be able to space out or discontinue the medication and transition to Acetaminophen (Tylenol).
 - DO NOT exceed 4,000 mg of Acetaminophen in a 24-hour period.
 - DO NOT drive, drink alcohol, or take Acetaminophen (Tylenol) WHILE taking this medication.
- Zofran (Ondansetron)
 - This is an anti-nausea medication.
 - It is a dissolving tablet – place it on your tongue, allow it to dissolve, and swallow.
 - Take this as needed every 4-6 hours for the first 2 days after surgery.

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ACTIVITY

- NO BEARING WEIGHT ON OPERATIVE LEG
- Elevate the operative leg to chest level whenever possible to decrease swelling
- Use crutches to assist with walking – use a heel-toe pattern when walking, but do NOT bear any weight on your operative leg – unless instructed otherwise by physician
- Do not engage in activities which increase ankle pain/swelling (prolonged periods of standing or walking) over the first 7-10 days following surgery
- Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks
- NO driving until instructed otherwise by physician
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable

ICE THERAPY

- Begin icing immediately after surgery.

EXERCISE

- No exercise or motion is to be done until instructed to do so by your physician after the first post-operative visit
- Formal physical therapy (PT) will begin about 10-14 days post-operatively with a prescription provided at your first post-operative visit

FOLLOW-UP CARE/QUESTIONS

- Dr. Juhan will call you (typically on your first day after surgery) to address any questions or concerns. If you have not been contacted within 48 hours of surgery, please call the office at **408-293-7767**
- If you do not already have a post-operative appointment scheduled, please contact the office during normal office hours and ask for appointment scheduling at **408-293-7767**.
- For any other questions or concerns please contact Dr. Juhan via email (tjuhan@goldenstateortho.com) at the office (**408-293-7767**)

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****EMERGENCIES****

Contact Dr. Juhan at the office (**408-293-7767**) or by email (tjuhan@goldenstateortho.com) if any of the following are present:

- Painful swelling or numbness
- Unrelenting pain
- Fever (note – it is normal to have a low-grade fever (101° and under) for the first day or two following surgery) or chills
- Redness around incisions
- Color change in wrist or hand
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- Continuous drainage or bleeding from incision (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting

Proceed to the nearest emergency room if you have an emergency that requires immediate attention.