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Postoperative Instructions for Ankle/Leg Surgery

Your Surgery Inclu	ıded	:
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Open Reduction and Internal Fixation				
☐ Ank	le Fracture		Syndesmosis	
Achilles Ter	ndon Repair			
Ligament R	epair/Reconstruction			
Fasciotomy	for Compartment Sy	ndro	me	

- 1. **Explanation**: Ankle surgery is commonly done in an 'outpatient' setting allowing you to have surgery and return home both safely and comfortably the same day. On occasion, a patient will have nausea or pain severe enough to require overnight hospitalization.
- 2. <u>Pain Management</u>: A cold therapy cuff, pain medications, local injections, and in some cases, regional anesthesia injections are used to manage your post-operative pain. The decision to use each of these options is based on their risks and benefits.

Cold Therapy: You may have been sent home with a cold wrap for your ankle. This wrap will help relieve pain and control swelling. Use the wrap throughout the day for the first two days and then as needed.

Regional Anesthesia Injections: You may have been given a regional nerve block either before or after surgery. This may make your entire foot/ankle numb for 24-36 hours.

3. <u>Medications</u>: You were given one or more of the following medication prescriptions before leaving the hospital. Have the prescriptions filled at a pharmacy on your way home and follow the instructions on the bottles. If you need a refill on your medication, please call your pharmacy.

Pain Medication (usually Norco or Percocet): Begin taking the opioid medication before your hip begins to hurt. Some patients do not like to take any medication, but if you wait until your pain is severe before you take this medication, you will be very uncomfortable for several hours waiting it to work. Always take opioid medications with food.

Zofran: If you have nausea at home, use this medication as directed.

Antibiotic (Keflex or Cleocin): Depending on the procedure, you may have been sent home with a 1 or 2 day course of an antibiotic. Take as directed.

Aspirin: Depending on the procedure, you may be instructed to begin taking one of these medications for up to one month after surgery.

- 4. **Diet:** Eat a bland diet for the first day after surgery.
- 5. **Activity**: Limit your activity during the first 48 hours, keeping your leg elevated. After the first 48 hours at home, increase your activity level based on your symptoms.
- 6. **Splint / Fracture Boot**: If you have a splint or boot, you will be given instructions on how to care for it. In the meantime, unless otherwise instructed, keep this on at all times.
- 7. <u>Dressing Change</u>: If you have a splint on, you may reinforce with addition dressings if necessary but do not remove. Otherwise, you may change your dressing on the 2nd or 3rd postoperative day.
- 8. **Showering**: Keep your splint/dressing dry when you bathe, wrapped in a plastic bag.

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9. <u>Temperature:</u> It is normal to have an elevated temperature during the first 2-3 days post-operatively. Please call our office if your temperature is above 101.5°F, if there is increased redness around the incision sites, or if there is increased drainage from the incision sites.

IU. Ankie	Exercises : These exercises will help control swelling and prevent stillness:
	Ankle Pumps – Move your ankle up and down throughout the day.
	Toe Curls – Pick up a towel with your toes.
	Heel Raises - Beginning with your feet flat on the floor, rise up onto the balls of your
	feet. Perform 3 sets of 10 repetitions.

11. **Physical Therapy**: Physical therapy is an essential component to your recovery from surgery. You will typically begin sessions once your splint is off, or 1-2 days after your surgical procedure if you just have a soft dressing.

A nurse or medical assistant will be checking up with you following your surgery. Your first postoperative visit will be 10-14 days after surgery and is normally scheduled prior to your surgery day. If you have any problems, please contact my team at the office at (314) 380-9510 or email us at teamnawas@orthomo.com.