

General Post-Operative Frequently Asked Questions:

The Top Questions Asked By Patients After Surgery: A Must Read for all Post-Operative Patients and the people taking care of them.

- What does non-weightbearing mean?
 - Non-weightbearing means do not put the leg on the ground at all. Use crutches, a knee scooter, a walker, a wheelchair, or an IWalk device to help with this. Putting weight on the leg prior to being cleared by your surgeon will result in wound healing issues, failure of fixation and potential need for further surgery.
- I went to sleep without pain the night after my surgery and now the pain is unbearable?
 - In order to avoid this, we suggest taking some pain medication prior to going to sleep to stay ahead of the pain. It is easier to stay ahead of the pain than to play catch up for the first few days after surgery. You do not need to take the opiates as prescribed or at all if you can tolerate the pain.
- What do I do if I accidentally get my splint or cast wet in the shower?
 - Do not panic! If this happens on Monday through Thursday during business hours, call the office and we will try our best to get you to see one of our cast techs for a splint change. If it happens Friday through Sunday, on a holiday or after hours, you may need to go to the Emergency Room for a splint or cast change. If you stay in a splint/cast that is wet, you can cause the wound to “macerate” or open and possibly become infected. Skin in other areas can break down and form an “ulcer” as well. The best way to avoid this is to sponge bathe or use a specialized shower bag and keep the leg out of the shower if possible. Even the best shower bag can sometimes leak. We recommend you try to avoid showering over the weekend if possible.
- What do I do since I have had trouble moving my bowels?
 - It is normal to not have a bowel movement for 2-3 days after surgery. If having excessive nausea or vomiting along with constipation, please call your doctor. Moving around can be helpful. Decreasing or stopping your narcotics/opiates is helpful as these medications can cause constipation. Over the counter remedies like MiraLAX, Dulcolax suppositories, prunes, and enemas can be helpful but please consult with your primary care physician.
- What do I do if I have a fever?
 - A clinically relevant fever for after surgery is typically above 101.5 degrees Fahrenheit. This is a core body temperature and typically from a rectal or oral thermometer. Axillary temperatures are not usually as accurate. The first 48 hours after surgery, it is normal to have a temperature. This is usually medication related or from a postoperative lung phenomenon called atelectasis. If concerned and having a fever above 101.5 deg Fahrenheit, please call your surgeon.
- What to do if nauseated or vomiting?
 - If able to stop your narcotic, this is usually most helpful. If not able to stop your narcotic, try taking your anti-emetic (anti-nausea medication like Zofran or hydroxyzine/Vistaril) prior to taking your narcotic medication.
- What to do if splint is too tight, too loose, or there is a pressure area?
 - If too tight- try elevating on as many pillows as possible. We like to say, “toes above nose”. This helps to control swelling. Do not remove your own splint.
 - If too loose- please call the office and if it is Monday through Thursday we can likely have you come in for a splint change to one of our 3 locations. If this

occurs on Friday, Saturday or Sunday, you may need to go to the Emergency Room for splint change. Do not remove your own splint.

- If there is a pressure area- try to elevate to see if this helps. If you feel the pressure in your heel, try to keep your heel off the bed or pillows and suspended. If this does no help, please call the office and if it is Monday through Thursday we can likely have you come in for a splint change to one of our 3 locations. If this occurs on Friday, Saturday or Sunday, you may need to go to the Emergency Room for splint change. Do not remove your own splint.
- How do I apply ice?
 - Ice can be applied over the splint for 20-30 minutes at a time. Do not place ice directly on the skin or on splint. Place ice in a bag and place a cloth under it to protect the skin from a frost bite injury.
- What do I do since I have to fly after surgery?
 - If you have to fly or travel a long distance in a car, please let your surgeon know. We often will give you a more potent DVT prophylaxis medication as your risk may be higher.
 - You should not plan vacations or trips for at least 6-8 weeks and for some surgeries 3-4 months after surgery as sometimes wounds can take this long or even longer to heal. Increased activities after surgery can also lead to increased risks of complications.