



Arthritis & Orthopedic  
Medical Clinic

## Post-Op Instructions

### DIET:

Resume your normal diet after surgery. You may have nausea from the anesthesia and/or the pain pills. Your first meal should be light (jello/soup) and then advance your diet to normal as tolerated.

### MEDICATION:

- A prescription narcotic\* for pain has been provided. *Use as prescribed.* Do not drive, operate machinery, or drink alcohol while on the medication.
- Add a non-steroidal anti-inflammatory medication (ibuprofen (advil, motrin), naprosyn (alleve), etc) for additional pain control. You may alternate the prescription pain medication with the anti-inflammatory every 3 hours.
- Aspirin 325mg daily x 4 weeks to prevent blood clots (for Hip, Knee, or Ankle Surgery)

**\*Narcotics can be constipating – use senekot/stool softener/laxative as needed**

- Take all the medicines with food as they can upset your stomach.
- **Do not resume any medicine for Diabetes until you are back on your regular diet.** Increase the number of times you check your blood sugar following surgery until your glucose measurements return to normal.

### DRESSINGS and BATHING:

- Keep dressings/bandages/splint clean, dry, and intact. Do not remove unless instructed to.

**DO NOT PUT ANYTHING ON THE WOUNDS – DO NOT PUT NEOSPORIN/BACITRACIN/OR ANY OTHER OINTMENTS ON THE WOUND. DRY DRESSINGS ONLY (BANDAIDS)**

### INCISION:

- The incisions may be sore and develop bruising; the bruising will eventually disappear.

### SWELLING:

- Maximal swelling occurs during the first 24-48 hours after surgery. Elevate area to minimize.
- Apply Ice to operative site. 20-30 minutes on, followed by 20-30 minutes off while awake. Place barrier between skin and ice. Do not place ice directly on skin.

### RETURN VISIT:

- Please call the office at 408-356-0444 to schedule a post-op visit for 5-7 days after surgery.

### PRECAUTIONS:

- ***If you develop a fever (101 or above), increasing pain not relieved by medication, increasing redness or swelling around the incision, thick yellow or foul smelling drainage, please call our office at 408-356-0444. If you have difficulty breathing, persistent nausea/vomiting please go to the closest emergency room.***



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#### **THERAPY:**

- Formal physical therapy will be arranged, with specific therapist instructions, at the first post-operative visit. You may wish to set up an appt with physical therapy in advance (2-3 sessions/wk).
- Until formal physical therapy, you may do the following home exercises:
  - Ankle pumps: Move ankle up and down. 30 reps, 3 times daily.
  - Straight Leg Raise: On your back with knee straight, lift leg up. 30 reps, 3 times/day
  - Quad Sets: On your back push your knee back straightening it as much as possible. 10-20 reps, 12 times daily.
  - Assisted ROM: Over the side of a table, let the operated knee go through a range of motion as tolerated by pain from full extension to 90° flexion. Use the unoperated side to assist by placing that foot under the heel of the operated leg. 30 reps, 3 times daily.
  - Passive Extension: Lying on your belly, let your knee hang over the bed and let it straighten out. 10 minutes, 3 times daily.
  - Patellar Mobilization: Grasp the kneecap and move it up, down, and to both sides as tolerated by pain. 30 reps, 3 times daily.
  - Stationary Bike: Raise the seat up to minimize knee flexion to less than 45°. No resistance. 15- 20 minutes per day.
  - Heel Slides: On your back with the foot of your operated leg on the table and a towel around the front of your ankle, slide your foot backward towards your buttock, using the towel. 5 reps, 3 times daily.
  - Shoulder Pendulum: From standing position bend from waist, let arm hang straight down, gently move arm in circular motion clockwise and counterclockwise x 10, 3 times daily.