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**Post-Operative Instructions**

**Ankle-spanning ex-fix**

1. Keep pin sites clean and dry. Can change gauze/kerlix dressings as needed
	1. **Follow up in clinic on Weds 2/26 for initial wound check and dressing change after which you will change the dressings daily until definitive surgery**
	2. Can clean pins with gauze and small amount of alcohol daily during dressing changes
2. Use **ice** as much as possible for the first 7 days and then as needed for pain. Ice should not be applied directly to the skin as it can cause burns. It is okay to place ice on your splint but ensure that the splint does not get wet while icing.
3. Keep your **leg elevated** with multiple pillows. Elevation only helps to reduce swelling if your knee is above the level of your heart. It is normal to have some swelling in your calf and foot in the first few days after surgery, but calf pain should improve in a few days, not worsen. **Keep elevated above level of heart as much as possible pending definitive surgery.**
4. **Crutches** at all times when ambulating. Strict Non-weight bearing to the operative extremity pending definitive surgery.
5. You should already have a **post-operative visit** scheduled. If not, call the office.
6. If you develop a **fever** (101.5), redness or persistent drainage from the surgical incision site, please CALL (760) 943-6700 our office to arrange for an evaluation.
7. You will receive **prescriptions** for medication to be used after surgery: these may include a narcotic pain medication, an anti-inflammatory, and/or an anti-nausea medication, and/or stool softener.
* Tylenol (acetaminophen)
	+ Take up to 975mg every 8 hours as baseline pain control. Can take on scheduled basis then as needed as pain control improves. Do NOT exceed 3000mg total in a 24 hour period, as this can cause damage to your liver. This is your baseline pain control.
	+ **If your narcotic pain medication contains tylenol do NOT take additional scheduled tylenol**
* Narcotic Pain Medication: Oxycodone 5mg or Percocet 5mg-325mg
	+ Initially after surgery, you can take 1-2 tablets of the narcotic pain medication every 4-6 hours depending on your pain level. Once your pain is well controlled, you can taper off the medication.
	+ Generally used for 1-2 weeks after surgery
	+ May cause constipation and/or nausea
* Anti-inflammatory Medication: Meloxicam or Motrin/Ibuprofen
	+ If you have any difficulty using anti-inflammatory medications or aspirin, or have a history of ulcer disease, do not use.
	+ You may use over the counter ibuprofen (Advil) or Naprosyn (Aleve) instead of the prescription we give you, but do NOT take more than one NSAID at a time
* Aspirin 81mg twice daily starting day after surgery
	+ This is to prevent blood clots
	+ **STOP taking 72 hours prior to definitive surgery**
* Anti-nausea Medication: Compazine or Zofran
	+ If you have nausea after surgery, call the office so that we can provide appropriate medication.
* Stool Softener: Colace (Docusate)
	+ The narcotic pain medication will cause constipation. Take stool softener as directed while taking narcotic pain medication unless you develop diarrhea

**Every patient is different: If Dr. Zogby gives you individual instructions (even if they are different from this handout), please follow them.**

**Phone: (760) 943-6700**

**\*\*If you have any questions, please feel free to call our office.\*\***