



Dr. Kelly Ankle Fracture Postoperative Instructions

DIET

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

WOUND CARE

- Maintain your postoperative splint; loosen the Ace wrap and padding if significant swelling of the foot or ankle occurs.
- To avoid infection, keep surgical incisions clean and dry in the postoperative splint
- NO immersion of operative leg (i.e. bath)

MEDICATIONS

Do not drive a car or operate machinery while taking narcotic pain medication

- Pain medication is injected into the wound and knee joint during surgery – this will wear off within 8-12 hours.
- Most patients will require some narcotic pain medication for a short period of time.
- Primary pain medication = Percocet (oxycodone) or Norco (hydrocodone)
 - Take 1 – 2 tablets every 4 – 6 hours as needed
 - Max of 12 pills per day
 - Plan on using it for 2 to 5 days, depending on your level of pain
 - Do NOT take additional Tylenol (Acetaminophen) while taking Percocet or Norco
- Common side effects of the pain medication are nausea, drowsiness, and constipation – to decrease the side effects, take medication with food.
- If constipation occurs, consider taking an over-the-counter laxative such as prune juice, Senekot, Colace, or Miralax.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed.
- For nausea, take the prescribed Zofran/Phenergan.

- You will be given a prescription for a medication to prevent blood clots from forming in your legs (aspirin or lovenox); take this medication as directed for the first 6 weeks after surgery

ACTIVITY

- You should not put weight on the operative extremity for the first 6 weeks, and you will need to use crutches during that period of time.
- Elevate the operative leg to chest level whenever possible to decrease swelling.
- Do NOT place pillows under knee (i.e. do not maintain knee in a flexed or bent position), but rather place pillows under foot/ankle to elevate leg.
- 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.
- May return to sedentary work or school 3-4 days after surgery, if pain is tolerable.

*****EMERGENCIES*****

Contact Dr. Kelly or his PA if any of the following are present:

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

*****If you have an emergency after office hours or on the weekend, call 412-262-7800 and you will be connected to our page service – they will contact Dr. Kelly or one of his partners if he is unavailable. Do NOT call the hospital or surgery center.**

*****If you have an emergency that requires immediate attention, proceed to the nearest emergency room.**

FOLLOW UP CARE

- Dr. Kelly or his PA will call you 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.

- If you do not already have a postoperative appointment scheduled, please contact the scheduling office during normal office hours (412-231-9272).
- This web site also includes more postoperative information for specific procedures, which may be helpful for your recovery: www.BrianKellyMD.com