

DR. BARNES POST-OPERATIVE INSTRUCTIONS

Wound Care:

- You may remove the dressing in 4 days but do not remove the White Steri-Strips that are stuck to the skin. You may shower after the dressings had been removed. Warm, soapy water can run over your wounds/Steri-Strips. Do not soak, take a bath, or swimming until cleared by your doctor.

Sutures:

- Absorbable skin sutures were used, but there may be small suture tails on either side of the Steri-Strips, which should be left alone.
- Nonabsorbable skin sutures were used. Suture removal will be at your first postoperative visit in 2 weeks.

Ice:

- A polar Care or Game Ready has been applied to the limb. Use it frequently during the first 2-6 weeks after surgery for compression and cold therapy. Use as needed after this.
- Apply ice packs frequently to the area during the first 2-6 weeks after surgery and then as needed. Do not apply directly to the skin. Use 20 minutes on then 20 minutes off.

Weight bearing:

- Weight bearing as tolerated. Use crutches as needed for pain or limp (usually 3-5 days). When pain and limp are improved, then you may walk as tolerated without crutches.
- Touch down weight bearing. Use crutches and bear minimal weight (toe-touch only) on the operative extremity.
- Non-weight bearing on the operative extremity until follow-up visit.

Brace:

- A removal device has been applied. Use full time (including while sleeping at night) until your follow-up appointment. It is okay to remove the device for bathing and hygiene, but you must be careful and returned to the device as soon as you are able.
- Hinged knee brace: Range of motion in brace _____ degrees. Keep the brace locked straight when up and walking, and while sleeping at night. When seated or lying down in a controlled environment, please unlock the brace and perform range-of-motion exercises to the limits listed above.
- Shoulder sling: The sling should be on at all times when up and ambulating. When seated in a controlled environment, please take the arm out of the sling for gentle elbow and wrist range of motion exercises.
- Hinged elbow brace: Range of motion in brace _____ degrees. Use shoulder strap with brace locked at 90° when up and ambulating. When seated in a controlled environment, it is okay to unlock brace and perform gentle range-of-motion exercises to the limits listed above.

- Cam boot: Use full time (including while sleeping at night) until your follow-up appointment. When seated in a controlled environment, okay to remove the boot for gentle ankle range of motion exercises.
- Splint / cast: A splint or cast has been applied to the limb. Please keep clean and dry at all times.

Other: _____

Pain:

- A short prescription for narcotics have been provided. Use as prescribed only as needed. Do not drive, operate machinery, or drink alcohol while on opioid medications.
- Tylenol (acetaminophen) can be safely added to this medication as well. Take as directed on the bottle.
- If needed, add a non steroidal anti-inflammatory medication (ibuprofen (Advil, Motrin), or naproxen (Aleve)) for additional pain control.

Deep vein thrombosis (DVT) prophylaxis:

Blood clots (DVT) are unusual but can occur after surgery. Please call the office for calf pain, leg swelling, or difficulty breathing.

- No DVT prophylaxis needed.
- Aspirin: Take 1 pill daily for 2 or 4 weeks after surgery. Stop for any gastrointestinal or wound bleeding.
 - Full aspirin (325 mg)
 - Baby aspirin (81 mg)
- Lovenox: A prescription for an injectable low molecular weight heparin for 4 weeks after surgery will be given to you.

Contact information:

Contact the office for problems or concerns, such as persistent fever over 101° F, marked wound redness, excessive wound drainage, pus, numbness or tingling, or severe pain unrelieved by pain medication.

Follow-up appointment:

- Follow-up with Dr. Barnes in 12-21 days. If you do not already have an appointment, call 239-334-7000 to schedule one.

Therapy:

- No formal physical therapy will be necessary.
- Please call today or tomorrow to arrange for formal physical therapy to begin 3-5 days after your surgery. The attached form with the bullet points is your prescription, so the PT facility will request it, but please keep a copy for yourself for future reference.
- Until you see a therapist and formal physical therapy begins, you may do the following exercises.
 - Ankle pumps: Move ankle up and down. Thirty reps, 3 times daily.

- Straight leg raise: On your back with knee straight, left leg up. Thirty reps, 3 times daily.
 - Assisted range of motion: Using gravity and the non operative limb for assistance, left the operative joint moved through the previously listed range of motion as tolerated by pain. Thirty reps, 3 times daily.
 - Quad sets: Contracture quad muscle so that the back of your knee is driven into the bed. Thirty reps, 3 times daily.
 - Patella mobilization: Grass the kneecap and move it up, down, and to both sides as tolerated by pain. Thirty reps, 3 times daily.
 - Shoulder pendulum: From standing position, band from the waist, left arm hang straight down, gently move arm and circular motion clockwise and counter-clockwise times 10, 3 times daily
- If an exercise is very painful, stop doing it or do it within the limits of motion that is not painful.
 - Major therapy gains are not achieved during the first 2 weeks. This is mainly a recuperative period.

Additional instructions:

Brandon J. Barnes, MD