

## ORIF/Fracture Post Op Instructions

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**Make sure to schedule an appointment to see Michael Rabago PA-C 10 and/or Dr Brown 14 days after surgery, if you do not have a follow-up appointment yet please call the office at (602) 324-0618 for our medical assistant or call (602) 667-7964 Melissa our surgery scheduler. Please be sure to bring your surgical pictures with you to your first post op visit. Follow the instructions that you received from Dr. Brown's office, if there is any confusion please contact us via email: [info@leahbrownmd.com](mailto:info@leahbrownmd.com)**

### WHAT TO EXPECT

- Pain that is reduced but not 100% eliminated by the medications prescribed.
- Clear or bloody fluid soaking through to the surface of the dressing.
- Nausea, especially after taking narcotic pain medications.
- Fever that comes and goes and is less than 101.5°F.
- Stiffness.
- Bruising around the surgical site that may spread down.

### WHAT TO CALL US ABOUT

- Pain not responding at all to the medications prescribed.
- Purulent (pus) discharge from the incision.
- Persistent bleeding soaking the entire dressing.
- Uncontrolled vomiting.
- Fever that stays above 101.5°F.

### DRESSING CHANGES AND BATHING

Keep your dressing/splint clean, dry, and intact until 72 hrs post op,

When showering you may use saran wrap or a large plastic bag and tape to cover the dressing/splint for first 3 days, then do not soak the knee, but it may get wet in the shower after 3 days.

Once you are placed in a removable brace, at each dressing change, evaluate the incision for drainage, redness, or red streaking surrounding the incision. These combined with warmth around the incision and fever (a temperature greater than 101 degrees) can be signs of infection. If you have any questions or concerns please contact the medical assistant/office immediately.

DO NOT soak your incisions in a bathtub, hot tub, or swimming pool until directed by Dr. Brown. Once you are in a removable brace, it is okay if the incisions get wet in the shower.

## **PHYSICAL THERAPY, WEIGHT BEARING, RANGE OF MOTION**

No physical therapy is needed at this time. It may be considered in the future if indicated. You need to remain non weight bearing (no pushing, pulling, lifting, or carrying) with the operative arm at this time. Changes to weight bearing status will be made at follow up appointments as the fracture heals.

You may begin the gentle exercises listed in your packet provided

## **ELEVATE**

Elevate your operative arm whenever possible such that it is higher than your heart.

## **ICE**

Ice the fracture site 5-6 times a day for 20 minutes at a time. You may have ice bags or an ice machine/unit (Game Ready, Polar Care, etc...), either is fine to use. Whatever the means, be very diligent with icing, especially during the first 2-3 days. Be sure to put a thin towel or t-shirt next to your skin when icing as the ice can cause frost-bite. A plastic barrier may be used between the ice and the splint to prevent the splint from becoming wet.

## **DIET**

You may eat a regular diet, if not nauseated. Drink plenty of non-alcoholic, non-caffeinated fluids. Water is best.

## **MEDICATIONS**

You will be provided prescriptions for pain and anti-nausea medication after your surgery. Take both medications as needed according to instructions on the bottle. For the first 24 hours, it is usually advisable to take the pain medication at regular intervals. Particularly in cases where a nerve block was performed by the anesthesiologist, taking pain medication regularly will help keep you comfortable as the block wears off. Unless otherwise instructed – and with the exception of pain medication you may have been taking before surgery – you should resume your other medications after your operation.