ERIC TANNENBAUM, MD
Southern Indiana Orthopedics

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Appointments (812) 376-9353

POST-OPERATIVE INSTRUCTIONS

Patella Fracture Surgery (ORIF)

Post-Op Instructions

Wound Care

- **Cryotherapy (continuous icing machine):** use 10–14 hours per day until your follow-up, or use ice packs 20 minutes per hour while awake. **Do not** put the ice pad directly against your skin.
- **Dressings:** remove all dressings and gauze in 3 days. Throw away loose gauze. Leave the small white sticky bandages (Steri-Strips) and sutures in place. You may re-wrap with an ACE bandage to keep covered.
- **Bathing:** keep incisions clean and dry for 4 days after surgery. It is then OK to shower **unless your incisions are draining**. No tub baths, swimming pools, hot tubs, etc. for a minimum of 3 weeks after surgery. Do not scrub or pick off the white sticky bandages (Steri-Strips) or sutures.
- **Sutures** will be removed at your first post-op appointment.

Activity

1. **Weightbearing:** non-weightbearing on the operated leg, using crutches, with the knee immobilizer in place.
2. **Bracing:** keep the knee immobilizer on with the leg straight at all times, including sleep and exercises, unless advised otherwise by your therapist or Dr. Tannenbaum. Remove for showers.
3. Avoid exercising or strenuous activities until you are seen in clinic for your follow-up appointment.
4. **Elevate** the knee above the level of your heart to reduce swelling. To elevate properly, **do not** place anything behind the knee; instead, prop pillows under the lower leg and foot to keep the knee straight. Your knee may be swollen for up to 4 weeks after surgery. Bruising around the knee and calf is common.
5. **Driving:** OK to drive an automatic **only** if you had surgery on your left leg. No driving a manual/stick-shift vehicle for 6–8 weeks. When returning to driving, test braking and acceleration in an empty parking lot before driving in traffic. **Absolutely no driving while taking narcotics** (e.g. Tylenol #3/codeine, Norco, Vicodin, Percocet, oxycodone).

Discharge Medications

1. **Stool softener** such as Colace (docusate sodium) or Senokot-S, 2 tablets once a day while taking narcotics. These do not require a prescription.
2. **Prescription pain medication:** 1 to 2 tablets every 4 to 6 hours as needed for pain. Do not exceed 12 tablets per day. Taper off as your pain decreases.

3. You may switch to **acetaminophen (Tylenol)** once you no longer need prescription-strength pain medication (e.g. Norco). Take 1000 mg three times a day (do not exceed 3000 mg in 24 hours).
4. **Aspirin 325 mg twice daily** (once in the morning and once in the afternoon) to prevent blood clots, starting the day after surgery. Continue for 6 weeks after surgery. If you were already taking blood thinners (anticoagulation) before surgery, simply restart those medications the day after surgery and **do not** start taking aspirin.
5. Check your discharge package and prescriptions to see if any other medications were prescribed for you.

Diet

If you have no nausea, start with clear liquids, then progress to solid foods once clear liquids are tolerated. No alcoholic beverages for at least 48 hours or while taking pain medication. Drink plenty of fluids and eat high-fiber foods to prevent constipation while taking prescription pain medication.

Follow–Up

The surgery scheduler should have called you with your follow-up appointment. If not, please call our office at **(812) 376-9353**.

When to Call — Emergency

Call or return for any of the following:

- Fever greater than 101°F, or a sustained fever greater than 100.5°F that has not resolved within 3–4 days after surgery
- Chills
- Increasing pain, swelling or redness
- Calf pain
- Drainage, especially if yellow, green or foul-smelling
- Excessive bleeding
- Chest pain or shortness of breath

SIO phone: (812) 376-9353

These instructions are general guidelines from Dr. Tannenbaum's office. Always follow any specific instructions given to you by Dr. Tannenbaum or his team. Questions? Call Southern Indiana Orthopedics at (812) 376-9353.