

## **GENERAL POSTOPERATIVE INSTRUCTIONS**

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1. Keep the wound clean and dry. The dressing should be removed and wounds covered with Band-Aids on the first or second day after surgery. Do not remove the paper strips or cut any of the visible suture. Reapply the ace wrap, if applicable, for 5-7 days to control swelling. Wounds should be kept dry for 24 hours. Showering is allowed with plastic covering the wounds. Unless otherwise instructed, after the post-op day 2, the wound may be exposed in the shower, without scrubbing the area. The wound should not be submerged in a bathtub or pool until the sutures are removed.
2. Icing is very important for the first 5-7 postoperative days. While the post-op dressing is in place, icing can be continuous. Once the dressing is removed on the first or second day, ice is applied for 20-minute periods 3-4 times per day. Care must be taken with icing to avoid frostbite to the skin.
3. Follow weight bearing instructions as advised at discharge. Crutches or a cane may be necessary to assist walking. Extremity elevation for the first 72 hours is also encouraged to minimize swelling.
4. The anesthetic drugs used during your surgery may cause nausea for the first 24 hours. If nausea is encountered, drink only clear liquids (i.e. Sprite or 7-up). The only solids should be dry crackers or toast. If nausea and vomiting become severe or the patient shows sign of dehydration (lack of urination) please call the doctor or the surgicenter. A low-grade fever (100.5) is not uncommon in the first 24 hours but unusual beyond. Please call the doctor with any temperature over 101.0 degrees. If a spinal anesthetic was used, patients may suffer a spinal headache. Please call the Surgicenter should this occur and it does not resolve with ibuprofen or your pain medication.
5. You may take a baby aspirin (81 mg) daily until the sutures are removed in the office. This may lower the risk of a blood clot developing after surgery. Should severe calf pain occur or significant swelling of calf and ankle, please call the doctor.
6. Local anesthetics (i.e. Novocaine) are put into the incision after surgery. It is not uncommon for patients to encounter more pain on the first or second day after surgery. This is the time when swelling peaks. Taking pain medication before bedtime will assist in sleeping. It is important not to drink or drive while taking narcotic medication. If you were prescribed narcotic medication (i.e. vicodin, hydrocodone, darvocet) you can supplement those medications with 200 mg or 400 mg of ibuprofen every 4-6 hours. You should resume your normal medications for other conditions the day after surgery. \*\*Narcotic medications can cause nausea, disorientation, and constipation. Adequate hydration and over the counter stool softeners can minimize constipation problems.

7. The doctor will need to reexamine you 7-10 days after surgery. Please call the office to schedule a follow-up appointment.
8. Most patients are able to drive, if surgery does not involve their right leg, as soon as they stop taking narcotic pain medications. Driving while under the influence of narcotic medications is extremely dangerous and discouraged in all patients. Returning to school or work also depends on the degree of postoperative pain and the demands of your job. Pain is generally an appropriate guide.
9. If unexpected problems occur and you need to speak to the doctor, call the office.

Dr. Bush-Joseph can be reached at 312-432-2345.

Travis Smith his Physician Assistant can be reached at 312-432-2372.

The answering service will answer after business hours when you dial 312-243-4244. If for some reason you are unable to get through to the answering service, you can reach the Rush Orthopedic resident on call at 312-942-5000. The resident on call may not be on Dr. Bush-Joseph's service and may not be familiar with your case, so always try to reach us through the answering service first.