POSTOPERATIVE INSTRUCTIONS: TIBIAL PLATEAU FRACTURE

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 operative dressing for 1 week after surgery. If it becomes soiled ok to remove and replace with clean gauze and tape. You can shower with the waterproof dressing in place.
- After one week ok to remove dressing and shower with it uncovered. Pat dry and do not submerge (ie bath, pool)

MEDICATIONS

- Pain medication is injected into the wound but this will wear off within 8-12 hours.
- Most patients will require some narcotic pain medication for a short period of time, which can be taken as per the directions on the bottle.
    - DO NOT drive a car or operate machinery while taking narcotic medication

- Primary Medication = 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 level of pain
    - Do NOT take additional Tylenol (Acetaminophen) while taking Norco or Vicodin

- Common side effects of 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 Periocolase), or Miralax.
    - If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed
    - For nausea, take prescribed Zofran

- •Ibuprofen 600-800mg (i.e., Advil) may be taken in between the narcotic pain medication to help. smooth out the postoperative “peaks and valleys”, reduce overall amount of pain medication required, and increase the time intervals between narcotic pain medication usage.

- Aspirin has been prescribed. Take daily as instructed to prevent DVTs.

ACTIVITY

- DO NOT put any weight on your operative leg
- Use crutches, a walker to assist you
- 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 knee pain/swelling (prolonged periods of standing or walking) over the first 7-10 days following surgery.

- Please do flexion (bending) exercises done in a non-weight bearing position (i.e. lying or sitting). Gently flex the knee to 90 degrees.
- Do ankle pumps continuously throughout the day to reduce the possibility of a blood clot in your calf (extremely uncommon).
- Formal physical therapy (PT) will begin after your first postoperative visit. You will be given a script for this at that time.

ICE THERAPY

- Begin icing immediately after surgery.
- Ice packs can be applied for up to 20 minutes out of every hour until your first post-op visit.

FOLLOW-UP CARE/QUESTIONS

- Follow up appointment: 2 weeks as scheduled
- Call (909) 862-1191 x32594 with questions during business hours or send a message using MyChart. After hours please call the after hours nurse line 1-909-793-3311 TTY 711

****EMERGENCIES****

- Contact the clinic if the following occur:
- Painful swelling or numbness
- Unrelenting pain
- Fever (note – it is normal to have a low-grade fever (101° and under) for the first day or two following surgery) or chills
- Redness around incisions
- Continuous drainage or bleeding from incision (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting

Proceed to the nearest emergency room if you have an emergency that requires immediate attention.