

**Brian Forsythe, M.D.**  
Sports Medicine  
Shoulder, Elbow, Knee Arthroscopy  
Shoulder Replacement Surgery

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**MIDWEST  
ORTHOPAEDICS  
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9200 Calumet Avenue  
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2011 York Road, Ste 1500  
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## **DISCHARGE INSTRUCTIONS & PHYSICAL THERAPY PROTOCOL:**

### **Lower Extremity Fractures – Full Weightbearing**

Recovery after surgery entails controlling swelling and discomfort, healing, return of range-of-motion, regaining strength in the muscles and a gradual return to activities. The following instructions are intended as a guide to help you achieve these individual goals and recover as quickly as possible after your surgery.

#### ❖ **COMFORT**

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##### ○ **Elevation**

- Elevate your knee and ankle above the level of your heart. The best position is lying down with two pillows lengthwise under your entire leg. This should be done for the first several days after surgery.

##### ○ **Cold Therapy**

- If you elected to receive the **circulating cooling device**, this can be used continuously for the first 3 days, (while the initial post-op dressing is on). After 3 days, the cooling device should be applied 3 times a day for 20-30 minute intervals.
- If you elected to receive the **gel wrap**, this may be applied for 20 minutes on, 20 minutes off as needed. You may apply this over the post-op dressing. Once the dressing is removed, be sure to place a barrier (shirt, towel, cloth, etc.) between your skin and the gel wrap.
- If you elected to use **regular ice**, this may be applied for 20 minutes on, 20 minutes off as needed. You may apply this over the post-op dressing. Once the dressing is removed, be sure to place a barrier (shirt, towel, cloth, etc.) between your skin and the ice.

##### ○ **Medication**

- **Pain Medication-** Take medications as prescribed, but only as often as necessary. Avoid alcohol and driving if you are taking pain medication.
  - You have been provided a narcotic prescription postoperatively. Use this medication sparingly for moderate to severe pain. **Narcotic prescriptions are not refilled.**
  - Extra strength Tylenol may be used for mild pain.
- **Anti-coagulation medication:** A medication to prevent post-operative blood clots has been prescribed (Aspirin, Lovenox, etc.) This is the only medication that MUST be taken as prescribed until directed to stop by Dr. Forsythe.

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- **Nausea Medication** – Zofran (Odansetron) has been prescribed for nausea. You may take this as needed per the prescription instructions.
  - **Constipation Medication** - Colace has been prescribed for constipation. Both your pain medication and the anesthesia can cause constipation. Take this as needed.
  - **Driving**
    - You may drive when able if you are not taking narcotic medication.

## ❖ ACTIVITIES

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- **Range-of-Motion** – Move your knee through range of motion as tolerated. This may be done while sitting or lying down.
- **Exercises** – These help prevent complications such as blood clotting in your legs. Point and flex your foot and wiggle your toes. Thigh muscle tightening exercises should begin the day of surgery and should be done for 10 to 15 minutes, 3 times a day, for the first few weeks after surgery.
- **Weightbearing** – You are allowed to put all of your weight on your operative leg. Do this within the limits of pain. Two crutches may be used as needed and may be discontinued when comfortable.
- **Brace**- If you are fitted in a brace, it will be locked straight until bone healing and good knee strength have been achieved (usually 5-6 weeks after surgery). At that time, your doctor will determine if your leg has enough strength to allow your brace to be unlocked. Sleep with the brace on and locked straight until directed by Dr. Forsythe. You may progress to full weight bearing on your operative leg using your brace in the **locked straight** position. Do this within the limits of pain.
- **Physical Therapy** – PT is usually started a week after surgery. You should call the physical therapist of your choice for an appointment as soon as possible after surgery. A prescription for physical therapy, along with physical therapy instructions (included in this packet) must be taken to the therapist at your first visit.
  - In some circumstances, you may be required to begin physical therapy 1-2 days post op. In these cases, you will be informed by Dr. Forsythe and given a prescription for PT.
- **Athletic Activities** – Athletic activities, such as swimming, bicycling, jogging, running and stop-and-go sports, **should be avoided** until allowed by your doctor.
- **Return to Work** – Return to work as soon as possible. Your ability to work depends on a number of factors – your level of discomfort and how much demand your job puts on your knees. If you have any questions, please call your doctor.

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## ❖ WOUND CARE

- **Bathing** - Tub bathing, swimming, and soaking of the knee **should be avoided** until allowed by your doctor - Usually 4-6 weeks after your surgery. Keep the dressing on, clean and dry for the first 3 days after surgery.
  - You may shower 3 days after surgery with WATERPROOF band-aids. Apply new band-aids after showering.
- **Dressings** - Remove the dressing 3 days after surgery. Your stitches will be left in until about 1 week post-op and will be removed at the post op visit. You may apply band-aids to the small incisions around your knee. Keep incision sites clean and dry.

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## ❖ EATING

- Your first few meals, after surgery, should include light, easily digestible foods and plenty of liquids, since some people experience slight nausea as a temporary reaction to anesthesia

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## ❖ CALL YOUR PHYSICIAN IF:

- Pain in your knee persists or worsens in the first few days after surgery.
- Excessive redness or drainage of cloudy or bloody material from the wounds (Clear red tinted fluid and some mild drainage should be expected). Drainage of any kind 5 days after surgery should be reported to the doctor.
- You have a temperature elevation greater than 101°
- You have pain, swelling or redness in your calf.
- You have numbness or weakness in your leg or foot.

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## ❖ RETURN TO THE OFFICE

- Your first return to our office should be within the first 1-2 weeks after your surgery. You can find your appointment for this first post-operative visit in the post op instruction folder.

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