

Dr. Allen Diabetic Ankle Fracture Post-Op Instructions

Dressings/Splint

Keep the splint in place and your surgical dressings in place until your first post-op visit at around 2 weeks. Use a bag over your leg or take sponge baths during this time. After your first visit and once your sutures are removed it is ok to shower and get the wound wet if cleared by Dr. Allen. Use extreme caution in the shower as falls can occur, it is recommended to use a shower chair and have assistance. Allow clean water to wash over the wound, do not scrub or wash it with any soaps. Do not pick at or remove any scabs. It is ok to lotion the skin surrounding the incision, but don't place any lotion or ointment directly on the wound. Once you've showered and replaced the dressings, replace your boot. Avoid any excessive ankle motion or direct weight bearing on your ankle during this time.

Weight Bearing

Depending on your fracture and medical conditions you may be non-weight bearing on the ankle for 12 weeks. This is to allow for bone healing. Diabetes and neuropathy can double the length of time needed to heal an ankle fracture. Remaining non-weight bearing until cleared to walk on the ankle is critical to prevent fixation failure. This may require the use of crutches, a walker, or a wheelchair. In some instances, assistance at a nursing home or swing bed is necessary for safe recovery after surgery.

Pain Control

Pain control is a very important aspect of your recovery. It is well documented that multimodal pain control is the most effective way to manage post-operative pain. At the end of the procedure, I will inject local anesthetic into the surgical field, additionally the anesthesiologist may give you a lower extremity block. These blocks can last anywhere for a few hours to a couple days. The goal is to have little to no pain in the immediate post-operative period. You will also receive a prescription for narcotic pain medications. This is to be used for break through pain. Combining the narcotic pain medications with Tylenol and Ibuprofen has been shown to give superior pain relief compared to the narcotic alone. The goal is to use the narcotic pain medications sparingly, and discontinue it's use by 2 weeks post-op. If you are running low and will require a refill, please plan in advance, as refills on the weekend are often not

logistically possible. Ice and elevation for the first several days after your surgery will also help control your pain.

Nausea

Nausea after surgery and anesthesia is not uncommon. You will receive an anti-nausea medication prescription for use at your discretion.

Constipation

Narcotic pain medications can be very constipating. You will receive a stool softening medication. I recommend you take it as long as you are taking the narcotics. Make sure to drink plenty of water as well in the immediate post-operative period.

DVT Prophylaxis

Blood clots after Orthopedic surgery are an uncommon, but potentially dangerous occurrence. Literature supporting DVT prophylaxis in ankle fracture surgery is mixed. I prefer to prescribe a daily Aspirin for DVT prophylaxis for most ankle fractures. This prescription is typically for 4 weeks. Signs of a blood clot include swelling of the lower leg, increasing pain and pressure, redness, shortness of breath, or chest pain. If you notice any of these warning signs, please contact my office immediately or present to the ER for further evaluation.

Driving

If the fracture is on your left side, you can drive as soon as you are off all narcotic pain medications and feel as though you can safely control a vehicle. If the fracture is on your right side, you will not be able to drive for at least 6 weeks or longer. Research suggests your braking time returns to normal at about 9 weeks.

Follow Up

Typically, your first follow up is about 2 weeks after surgery. We will assess your wound and likely remove your sutures at this time. Diabetes and neuropathy can also slow the healing of the skin, and often times we need multiple wound checks in the first few weeks to ensure your incision is healing and there is no infection. We will likely get our first set of X-rays at this visit as well.