

The Orthopaedic and Fracture Clinic 1431 Premier Drive Mankato, MN 56001 507-386-6600

Dr. Allen Distal Radius ORIF Post-Op Instructions

Dressings

Disregard this section if a cast was placed at the time of surgery. The cast will likely remain in place for 4 weeks total. During this time, you need to keep the cast clean and dry. Cover it with a bag during showers or take sponge baths during this time

Keep the splint in place and your surgical dressings in place until the first post-op visit at 2 weeks. Use a bag over your arm or take sponge baths during this time. After your first visit your splint may be removed and exchanged for a brace. This brace can be removed for hygiene. Make sure to wash your hands before touching the skin around your incision. Dressings can be removed and replaced with clean, fresh gauze, make sure to keep the wound covered until your first follow up. It is ok to shower at 2-weeks post-op. Allow clean water to wash over the wound, do not scrub or wash it with any soaps. You wound was likely closed with absorbable sutures and glue. Do not pick at or remove any scabs or loose glue ends, they will fall off on their own. 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 brace.

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 an upper 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 its use by 1-week 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.



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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.

Physical Therapy

In some instances, the hand and wrist can get very stiff after distal radius fracture fixation. A referral to hand therapy or physical therapy may be given after removal of the cast/splint.

Sling

A sling may be provided to help support the arm and the weight of the splint. This is for your comfort. You can discontinue its use at your discretion

Movement/Exercise

Make sure to come out of the sling several times a day to move the elbow. Move your fingers and thumb several times a day to prevent stiffness.

Follow Up

Typically, your first follow up is about 2 weeks after surgery. We will assess your wound and remove any sutures at this time. We may remove your splint, and transition to a removable wrist brace at this time.