

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

Dr. Allen Ankle Fracture Post-Op Instructions

Dressings

Disregard this section if you have a splint, the splint will remain in place until your first follow up visit. During this time, you need to keep the splint clean and dry. Cover it with a bag during showers or take sponge baths during this time

Keep the boot in place and your surgical dressings in place until 1-week post-op. Use a bag over your leg or take sponge baths during this time. At 1-week post-op it is ok to remove boot and dressings. 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 1-week post-op. 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.

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.



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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.

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 twice 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. We will likely get our first set of X-rays at this visit as well. We will set you up with your first PT visit after this appointment as well if needed.