

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

Dr. Allen Distal Radius Casting/CRPP Post-Op Instructions

Cast

Depending on the fracture stability and swelling a cast will be placed. This will likely be kept on for 4-6 week until healing is seen. Keep the cast in place until we remove it in clinic. You will need to place a bag over your arm or take sponge baths during this time. If there is a lot of swelling at the time of surgery, the cast may have been bi-valved and overwrapped with Coban. This is when we cut the cast and wrap it with an elastic stretch bandage to allow for swelling in the days immediately after surgery. If this was done to your cast, we will overwrap it with fresh fiberglass at the first post-op visit.

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 may inject local anesthetic into the surgical field. Typically, only a few or no narcotics are required after closed reduction or pinning of a distal radius fracture. If a narcotic prescription was provided for you, 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 within a few days. 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.

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 it's use at your discretion



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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.

Pins

If pins were placed to hold the fracture stable, these can be removed in clinic. It is a simple, straightforward, and non-painful procedure. Typically, the pins are removed at the 4 week post-op visit.

Follow Up

Typically, your first follow up is within 1 week after surgery. Repeat X-rays are taken at this visit to confirm the fracture is still aligned properly. If a repeat reduction is needed, doing so within the first week is much easier and simpler.