

POSTOPERATIVE INSTRUCTIONS

ARTHROSCOPIC ANKLE DEBRIDEMENT/ LOOSE BODY REMOVAL/ MICROFRACTURE

DIET

- Begin with clear liquids and light foods (jellos, soups, etc.)
- Progress to your normal diet if you are not nauseated

WOUND CARE

- To avoid infection, keep surgical incisions clean and dry – you may shower by placing a large garbage bag over your splint starting the day after surgery – NO immersion of operative leg (i.e. bath)

MEDICATIONS

- Pain medication is injected into the wound and ankle joint during surgery – this will wear off within 8-12 hours
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle
 - DO NOT drive a car or operate machinery while taking narcotic medication
- Common side effects of the pain medication are nausea, drowsiness, and constipation – to decrease the side effects, take medication with food – if constipation occurs, consider taking an over-the-counter laxative
- If you are having problems with nausea and vomiting, contact the office to possibly have your medication changed
- Ibuprofen 200-400mg (i.e. Advil) may be taken in between the narcotic pain medication to help smooth out the post-operative 'peaks and valleys', reduce overall amount of pain medication required, and increase the time intervals between narcotic pain medication usage

ACTIVITY

- Elevate the operative leg to chest level whenever possible to decrease swelling
- Use crutches to assist with walking – use a heel-toe pattern when walking, but do NOT bear any weight on your operative leg – unless instructed otherwise by physician
- Do not engage in activities which increase ankle pain/swelling (prolonged periods of standing or walking) over the first 7-10 days following surgery
- Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks
- NO driving until instructed otherwise by physician
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable

ICE THERAPY

- Begin icing immediately after surgery.
- Use icing machine for up to 20 minutes out of every hour until your first post-op visit.
- If you do not purchase an ice machine, please use ice packs to ice the surgical site. Ice packs can be applied for up to 20 minutes out of every hour until your first post-op visit.
- If braced, loosen brace to avoid added pressure.

EXERCISE

- Ankle and foot range of motion may begin immediately unless otherwise instructed by your physician
- Formal physical therapy (PT) will begin about 10-14 days post-operatively with a prescription provided at your first post-operative visit

FOLLOW-UP CARE/QUESTIONS

- Dr. Weber will call you (typically on your first day after surgery) to address any questions or concerns. If you have not been contacted within 48 hours of surgery, please call the office at 818-658-5930.
- If you do not already have a post-operative appointment scheduled, please contact the office during normal office hours and ask for appointment scheduling at 818-658-5930.
- For any other questions or concerns please contact Dr. Weber via email (weberae@usc.edu), at the office (818-658-5930), or by cell (518-928-8389).

****EMERGENCIES****

Contact Dr. Weber at the office (818-658-5930) or by cell (518-928-8389) if any of the following are present:

- Painful swelling or numbness
- Unrelenting pain
- Fever (note – it is normal to have a low-grade fever (101° and under) for the first day or two following surgery) or chills
- Redness around incisions
- Color change in wrist or hand
- Continuous drainage or bleeding from incision (a small amount of drainage is expected)
- Difficulty breathing
- Excessive nausea/vomiting

Proceed to the nearest emergency room if you have an emergency that requires immediate attention.