

TO GO HOME WITH THE PATIENT

GENERAL POST-OPERATIVE INSTRUCTIONS

This information will address many of your questions following surgery

- Regular diet as tolerated with plenty of fluids
- Resume all home medications unless otherwise specified
- It is normal to have some discomfort for several days even weeks after surgery (see below for managing your discomfort).
- Unless otherwise specified physical therapy will begin starting after the 2 week postoperative visit.

Managing your discomfort

- A prescription for pain medication has been given to you. Use the medication as prescribed. Do not drive, drink alcohol, or perform duties that require concentration or manual dexterity while on the medication. Please wait until you can safely operate your vehicle.
- After the 48 hours after surgery, you may find it beneficial to take an over-the-counter anti-inflammatory (ie. Ibuprofen/Motrin/Advil) in conjunction with the pain medication. It is best to rotate the medications (ie every 2 hours). Please be cautious with anti-inflammatories if there are any contraindications to you taking this medication. (i.e. stomach ulcers, kidney problems, or allergies).
- In addition to pain medication, ice and elevation are ways to decrease discomfort.
- **Elevation:** This will be helpful in reducing swelling. A general rule is to keep the operative area above the level of the heart. This can be accomplished in a variety of ways. The use of pillows or cushions will usually do it.
- **Ice:** Keep your surgical site cool. This can be accomplished in different ways. You may have been discharged with a commercial device that will cool the site. Follow those instructions. Some patients report relief getting large bags of frozen peas from the grocery store. Others use plastic bags sealed with ice. The cold will gently penetrate your dressing and help with swelling and inflammation. A general rule is to apply ice to the site for 20 minutes every hour for the first 48 hours.

Incision/Wound Care

- If you are in a splint this needs to remain on until your 2- 3 week postoperative date unless otherwise specified.
- Keep your incision site clean and dry
 - keep incision covered during showers until post op appointment

Your specific wound care instructions

Showering/Bathing

Activities

- Depending on the type of surgery you may be able to resume work once the swelling and pain subsides (this may be a week or more). Some types of work prohibit returning to full duty until several weeks/months of therapy have been completed

Your specific activity instructions

Contact Information: For all emergencies please call 911 or go to the nearest ER

A follow-up appointment should have been scheduled at your pre-operative visit 2-3 weeks after surgery. If not please call the **Appt Line at 731-4088** for an appointment

For questions concerning your insurance or other administrative needs (i.e. paperwork) please contact **Jill at 731-1616**

To fax any documents to our office please fax to **731-0741**

If you experience any abnormalities such as

- Extremities that are blue, black, cold
- Persistent numbness/tingling/coldness
- Fever greater than 100 degrees (after 48 hours)
- Wound redness or increasing drainage
- Increasing redness or foul odor
- Increased pain or swelling not relieved by rest, elevation, ice, anti-inflammatories or pain medication
- Sudden onset of calf pain
- Chest pain

Please call **Amanda Thistle PA-C at 702-544-BONE (2663)** or email at yourbonepac@gmail.com

Frequently Asked Questions (FAQ's)

1) How long will my recovery take?

- There is no universal answer as everyone's pathology is different despite having similar incisions. Recovery is influenced by lifestyle, compliance during recover and pathology. Your provider can provide you will some general guidelines after your surgery.

2) When can I drive

- Again, there is no universal answer as everyone responds differently to medicines and surgery. You should not try to drive for the first 72 hours after surgery or if you have some dressing or brace that would impede you from controlling your vehicle. We recommend that when you do attempt to drive, short distances are recommended, and someone should be with you initially.

1) I have a cast how long does it take for my cast or splint to harden?

- The synthetic fiberglass cast will take from 2 to 12 hours to fully harden. Plaster casts and splints may take longer. Be protective of your cast during this time period

2) I am getting some swelling/bruising in/around my cast, is this normal and what can I do?

- Some swelling/bruising is normal after an injury. To reduce swelling, elevate your cast above heart level as much as possible for the first 48-72 hours. Apply sealed ice bag to affected area.

3) How do I take a bath/shower with my cast/splint, and what if I get it wet?

- Wrap the cast in a plastic bag and keep sealed at the top as best as you can. If you get it slightly wet, then use a blow dryer. If it is very wet (soaked), then you need to come in for a cast change.

4) It itches! What can i do?

- Itching beneath a cast is common and can sometimes be controlled by blowing warm air into the cast with a blow dryer, applying a sealed bag of ice to area, or over the counter medications (ex. benadryl). **NEVER** put something sharp down the cast. This can cause a scratch which can lead to infection.

5) I have stitches when will these be removed?

- Unless otherwise specified nonabsorbable stitches will be removed at the postoperative date which will be approximately 2 weeks after surgery. If the absorbable stitches are used these will be reabsorbed by the body and will not require removal.

TO GO HOME WITH THE PATIENT



SHOULDER ARTHROSCOPY

- Regular diet as tolerated with plenty of fluids.
- The large bandages can be removed in 48 hours. The incisions in your shoulder are closed with a stitch and small pieces of tape (steri-strips). The stitches will absorb and the steri-strips will fall off on their own.
- You may shower in 72 hours. Remove the sling/immobilizer and guard the involved arm at your side. The shoulder should not be submerged or scrubbed.
- It is normal to have some shoulder discomfort for several days and even weeks after the arthroscopy.
- Ice helps to reduce the pain and swelling. The shoulder should be iced 20 minutes on, 40 minutes off, as much as possible for several days. Place ice cubes in a plastic bag and wrap the bag in a towel. Apply to affected area. Pump your fingers into a fist regularly to help decrease swelling in the arm.
- A prescription for pain medication has been given to you. Use the medication as prescribed. Do not drive, drink alcohol, or perform duties that require concentration or manual dexterity while on the medication. Please wait until you can safely operate your vehicle
- After the first 48 hours after surgery, you may find it beneficial to take an over-the-counter anti-inflammatory (ibuprofen, Motrin etc.) barring any contraindications to taking such medication (i.e. stomach ulcers, kidney problems, or allergies).
- Patients are generally more comfortable sleeping in a reclining chair or with pillows propped behind the shoulder. Some difficulty with sleeping is common for 2-3 weeks after surgery.
- Choose a therapist that is covered under your insurance. Therapy should start on _____

You had the following procedure(s):

- Subacromial Decompression/Distal Clavicle Resection**-a sling has been applied to make you more comfortable. You may remove it for showering and range of motion exercises for your elbow, wrist, and shoulder. Use of the sling may be discontinued when you are comfortable (usually 4-7 days).
- Rotator Cuff Repair**- A supersling has been applied to stabilize your shoulder and make you more comfortable. You may remove it for showering and range of motion exercises for your wrist and elbow **ONLY**. You must keep the supersling in place at all other times including sleeping, until instructed otherwise by your doctor/physical therapist.
- Labral Repair**- A supersling has been applied to stabilize your shoulder and make you more comfortable. You may remove it for showering and range of motion exercises for your wrist and elbow **ONLY**. You must keep the supersling in place at all other times including sleeping, until instructed otherwise by your doctor/physical therapist.

Activities:

- Depending on the type of work you do, you may be able to resume work once the swelling and pain subsides (this may be a week or more). Some types of work prohibit returning to full duty until several weeks/months of therapy. Discuss return to work with your physician/therapist.

Contact Information: For all emergencies please call 911 or go to the nearest ER

- A follow-up appointment should have been scheduled for you in 2-3 weeks. If not, please call:
APPT LINE at 731-4088 for an appointment
- For questions concerning your insurance or other administrative needs please contact
702-731-1616
- If you experience any abnormalities such as
 - ◆ Persistent numbness/tingling
 - ◆ Toes that are blue, black, or cold
 - ◆ Fever greater than 100 degrees (after 48 hours)
 - ◆ Wound redness or drainage
 - ◆ Uncontrollable pain
 - ◆ Please call 702-544-BONE (2663)

Thank you, Team Baldauf

TO GO HOME WITH THE PATIENT

KNEE ARTHROSCOPY



This information will address many of your questions following surgery

- Regular diet as tolerated with plenty of fluids.
- The large bandages can be removed in 48 hours. The incisions in your knee are closed with a suture and small pieces of tape (steri-strips). The sutures will absorb and the steri-strips will fall off on their own.
- You may shower in 72 hours. The knee should not be submerged or scrubbed.
- It is normal to have some knee discomfort for several days and even weeks after the arthroscopy.
- Ice helps to reduce the pain and swelling. The knee should be iced 20 minutes on, 40 minutes off, as much as possible for several days. Place ice cubes in a plastic bag and wrap the bag in a towel. Apply to affected area.
- A prescription for pain medication has been given to you. Use the medication as prescribed. Do not drive, drink alcohol, or perform duties that require concentration or manual dexterity while on the medication. Please wait until you can safely operate your vehicle.
- After the first 48 hours after surgery, you may find it beneficial to take an over-the-counter anti-inflammatory (ibuprofen, Motrin etc.) barring any contraindications to taking such medication (i.e. stomach ulcers, kidney problems, or allergies).
- Pump your foot up and down regularly while elevating your leg, to help decrease swelling in the leg. It is normal to have significant bruising above the knee, around the knee, and into the calf and foot.
- You may weight-bear as tolerated and you may increase activity as tolerated and begin range of motion exercises the first day after surgery.
- Choose a therapist that is covered under your insurance. Therapy should start on _____

Activities:

- Depending on the type of work you, you may be able to resume work once the swelling and pain subsides (this may be a week or more). Some types of work prohibit returning to full duty until several weeks/months of therapy. Discuss return to work with your physician/therapist

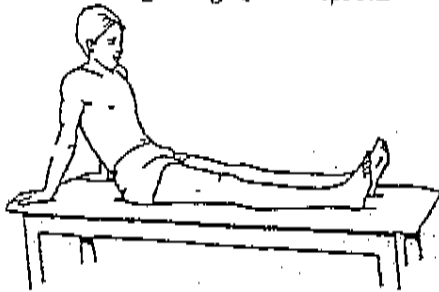
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Thank you, Team Baldauf

KNEE POST OPERATIVE EXERCISES

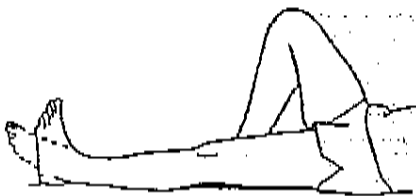
HIP and KNEE - Strengthening: Quadriceps sets



Tighten muscles on top of thigh by pushing knees down into floor or table.

ANKLE/FOOT -

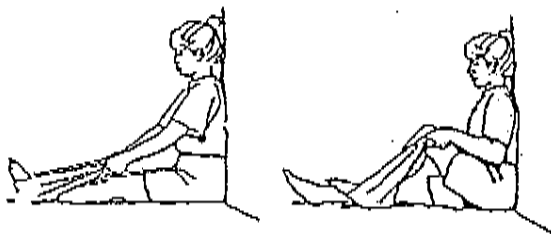
Range of Motion: Plantar/Dorsiflexion



Relax leg. Gently bend and straighten ankle. Move through full range of motion. Avoid pain.

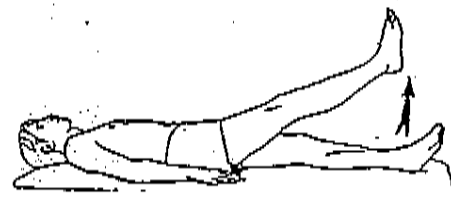
Hip and Knee

Passive Range of Motion Knee Flexion



With towel around heel, gently pull knee upwards with towel until stretch is felt

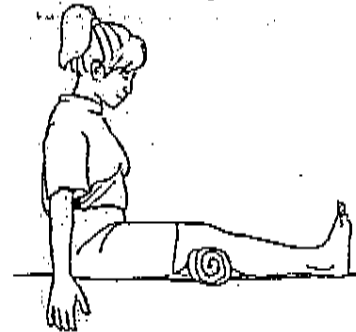
HIP and KNEE- Strengthening



Straight Leg Raise Phase 1

Tighten muscle on front of thigh then lift leg 8-10 inches from floor keeping knee locked. Hold 10 seconds.

HIP and KNEE- Quad Set in Slight Flexion



Gently tense muscle on top of thigh. Hold 10 Seconds.

All exercises should be repeated 30 times. 2 sessions per day are recommended. It may be helpful to plan on icing for 15 minutes after the exercises.

POST-OP INSTRUCTIONS

TOTAL KNEE REPLACEMENT

You have had a total knee replacement. Joint replacement surgery requires that you take an active role in your care and rehabilitation. This sheet provides important information about your care in the early postoperative period. You should have scheduled a follow-up appointment for 3 weeks after your surgery date.

If not, please call APPT LINE at 731-4088 for an appointment.

After your surgery, you will begin physical therapy on the first day in the hospital.

- o The **Physical Therapist** will review some exercises such as quad sets, dangles, leg extension and straight leg raises. For knee flexion, perform leg dangles over the edge of your bed twice a day. Use a pillow or rolled towel under the ankle of the operative leg to achieve full extension. You may discontinue use of the knee immobilizer after your follow up visit at our office. You may bear as much of your weight on the operative leg as tolerated. The use of a walker or cane is helpful while you regain strength in the leg.

Remember, walking is the best exercise for your rehabilitation!

- o **Pain** will commonly increase as you become more active at home and during rehab. You may experience groin pain in the operative leg. A prescription for pain medication has been given to you. Use the medication as prescribed. Do not drive, drink alcohol or perform duties that require concentration or manual dexterity while on the medication.
 - o **Your Temperature** may be slightly elevated for several days after surgery. If fever persists above 101°F and is accompanied by chills, sweats or draining at the incision, this may be a sign of infection.
 - o **Your Incision** should be kept dry for the first 72 hours after which if there is no drainage you may shower but do not soak (no pool, hot tub, or bath). You may experience numbness towards the outer edges of the incision. This is normal.
 - o **Swelling** in the operative leg is a normal part of the postoperative course. Normal swelling is reduced in the morning and gradually accumulates throughout the day. This can be reduced by elevating your legs or lying down for 30 minutes to an hour during the day. Any activity that leaves your feet on the floor, such as sitting in a chair, standing or walking, can lead to swelling.
 - o To reduce the risk of **Clot Formation** we place you on Aspirin to thin your blood. In addition, you should participate in therapy and walk as tolerated to maintain the blood flow. Pump your feet up and down 20 times each hour while awake and perform tightening exercises of the thighs and buttocks. You will also need to wear TED hose for 6 weeks.
 - o You may need to take **Antibiotics** to protect the prosthesis from infection prior to any dental or surgical procedure. You must notify your doctor that you have a joint replacement.
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Activities:

- o **Car:** you should not drive for at least 4 weeks after surgery. Begin slow in a controlled situation.
 - o **Stairs:** When ascending or descending stairs, use the handrail or banister for stability. Lead off with your good knee to go up stairs, and lead with your operative leg to go down stairs. Go up or down stairs one at a time.
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Contact Information:

For all emergencies please call 911 or go to the nearest ER

- o For questions concerning your insurance or other administrative needs please contact
702-731-1616
- o For questions concerning any medical problems please contact
702-544-2663 (BONE)

Thank you, Team Baldauf

POST-OP INSTRUCTIONS

TOTAL SHOULDER REPLACEMENT



You have had a total shoulder replacement. Joint replacement surgery requires that you take an active role in your care and rehabilitation. This sheet provides important information about your care in the early postoperative period. You should have scheduled a follow-up appointment for 3 weeks after your surgery date.

If not, please call APPT LINE at 731-4088 for an appointment.

After your surgery, you will begin physical therapy on the first day in the hospital.

- The **Physical Therapist** will review some exercises that you may do on your own but for one week following surgery it is important to keep your arm in a sling at all times. Do not put any weight through your arm. Do not lift any objects with the operative arm. Avoid all range of motion with the operative arm that is not done by the physical therapist.
 - **Pain** will commonly increase as you become more active at home and during rehab. A prescription for pain medication has been given to you. Use the medication as prescribed. Do not drive, drink alcohol or perform duties that require concentration or manual dexterity while on the medication.
 - Your **Temperature** may be slightly elevated for several days after surgery. If fever persists above 101°F and is accompanied by chills, sweats or draining at the incision, this may be a sign of infection.
 - Your **Incision** should be kept dry for the first 72 hours after which if there is no drainage you may shower but do not soak (no pool, hot tub, or bath). You may experience numbness towards the outer edges of the incision. This is normal. While in the shower keep your arm close to your body.
 - **Swelling** in the operative arm is a normal part of the postoperative course. Normal swelling is reduced in the morning and gradually accumulates throughout the day. This can be reduced by elevating your arm for 30 minutes to an hour during the day.
 - To reduce the risk of **Clot Formation** we place you on Aspirin to thin your blood. In addition, you should participate in therapy and walk as tolerated to maintain the blood flow. You will also need to wear TED hose for 6 weeks.
 - You may need to take **Antibiotics** to protect the prosthesis from infection prior to any dental or surgical procedure. You must notify your doctor that you have a joint replacement.
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You had the following procedure(s):

- Total Shoulder Arthroplasty-** A supersling has been applied to stabilize your shoulder and make you more comfortable. You may remove it for showering and range of motion exercises for your wrist and elbow **ONLY**. You must keep the supersling in place at all other times including sleeping, until instructed otherwise by your doctor/physical therapist.
 - Reverse Total Shoulder Arthroplasty-** A supersling has been applied to stabilize your shoulder and make you more comfortable. You may remove it for showering and range of motion exercises for your wrist and elbow **ONLY**. You must keep the supersling in place at all other times including sleeping, until instructed otherwise by your doctor/physical therapist.
-

Activities:

- Depending on the type of work you do, you may be able to resume work once the swelling and pain subsides (this may be a week or more). Some types of work prohibit returning to full duty until several weeks/months of therapy. Discuss return to work with your physician/therapist.
-

Contact Information: For all emergencies please call 911 or go to the nearest ER

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- For questions concerning any medical problems please contact
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Thank you, Team Baldauf

POST-OP INSTRUCTIONS



TOTAL HIP REPLACEMENT

You have had a total hip replacement. Joint replacement surgery requires that you take an active role in your care and rehabilitation. This sheet provides important information about your care in the early postoperative period. You should have scheduled a follow-up appointment for 3 weeks after your surgery date.

If not, please call APPT LINE at 731-4088 for an appointment.

After your surgery, you will be asked to observe certain precautions for the first 6 weeks to prevent the ball of your hip from popping out of the socket (dislocation).

- **Do not bend your hip beyond 90° (a right angle), and you should not bring your legs or knees together.**
- **Do not sit straight up in bed or bring your operative leg up towards your chest.**
- **Use a pillow between your legs in bed to help maintain the proper position and to keep your legs apart.**
- **Do not rotate your operative leg inward. Use a device to pick objects off the floor without bending over.**
- **Pain** will commonly increase as you become more active at home and during rehab. You may experience groin pain in the operative leg. A prescription for pain medication has been given to you. Use the medication as prescribed. Do not drive, drink alcohol or perform duties that require concentration or manual dexterity while on the medication.
- **Your Incision** should be kept dry for the first 72 hours after which if there is no drainage you may shower but do not soak (no pool, hot tub, or bath). You may experience numbness towards the outer edges of the incision. This is normal.
- Your **Temperature** may be slightly elevated for several days after surgery. If fever persists above 101°F and is accompanied by chills, sweats or draining at the incision, this may be a sign of infection.
- **Swelling** in the operative leg is a normal part of the postoperative course. Normal swelling is reduced in the morning and gradually accumulates throughout the day. This can be reduced by elevating your legs or lying down for 30 minutes to an hour during the day. Any activity that leaves your feet on the floor, such as sitting in a chair, standing or walking, can lead to swelling.
- To reduce the risk of **Clot Formation** we place you on Aspirin to thin your blood. In addition, you should participate in therapy and walk as tolerated to maintain the blood flow. Pump your feet up and down 20 times each hour while awake and perform tightening exercises of the thighs and buttocks. You will also need to wear TED hose for 6 weeks.
- You may need to take **Antibiotics** to protect the prosthesis from infection prior to any dental or surgical procedure. You must notify your doctor that you have a joint replacement.

The **Physical Therapist** will review some exercises such as abduction exercises, foot pumps, tightening of the thighs and buttocks which will help maintaining muscle tone and good blood circulation in your legs. You may bear as much weight on the operative leg as tolerated. The use of a walker or cane is helpful while you regain strength in the leg.

Remember, walking is the best exercise for your rehabilitation!

Activities:

- **Car:** You should not drive for at least 4 weeks after surgery. When getting in or out of a car, it is important to keep your leg straight and out to the side.
- **Chairs:** Care must be taken to not lean forward when getting into or out of the chair. At home, you should use chairs with arms to assist you in getting into and out of the chair. Place one or two pillows in the chair seat in order to keep your hip from flexing.
- **Bathroom:** An elevated toilet seat has been ordered for you and will be required for at least 6 weeks after surgery. In addition, you will not be able to take a bath for 6 weeks.

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