Postoperative Foot or Ankle Fracture ORIF

DR. EASTWOOD

Follow-up Appointment

If you have not already done so, please contact our office to set up an appointment 14 days after your date of surgery for removal of your suture/staple, an overall wound check, and a review of your progress with physical therapy.

You should make an appointment with your primary care doctor around the same time to check on your medical status and to be assessed for osteoporosis.

Wound Care

If you were placed in a fiberglass splint with ace wrap over the top, keep splint clean and dry. Leave the splint on until your post-op appointment. Be sure to ice and elevate. Elevation helps a lot!!!

If you were placed into a removable boot, change your dressing the first time after 48 hours. If the dressing is soaked, change earlier. A few dots of blood initially or thin yellow/clear dots for the first few days are expected; but any drainage should gradually decrease. If you have any blisters, foul discharge or pus-looking drainage, call us immediately. The wound area will naturally feel a little warmer than the other knee due to the increased blood flow and healing response. Swelling is expected early on and gradually decreases over the first several weeks.

Once you begin dressing changes, use a nonstick dressing like a Telfa pad, nonstick adhesive bandage for small incisions or ABD pads; these can be found at your local drugstore. Dressings should be changed daily. Wounds may be dabbed with peroxide for cleansing. DO NOT use products like bacitracin or triple antibiotic ointment; they are mostly petroleum jelly and keep the wound too moist. Hold dressing on with ace wrap; it is easier on your skin than using tape. Ice and elevate!

You ***cannot*** get the incision wet until we remove your staples or sutures. After that you may shower over the incision, but no soaking in a tub until 6 weeks post surgey.

If you have any problems or questions, please call your doctor's office (8am-5pm).

Answering service for after hours.

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Physical Therapy and Weight Bearing

Your weight bearing will be determined by your specific fracture, fixation and health status. Your surgeon will instruct you on how much weight can be placed on the extremity.

If you were placed in a boot, you need to call your local PT clinic of choice and start outpatient physical therapy immediately. PT is necessary to restore your motion and function.

Prevention of Blood Clots

Ankle and foot fractures are at much lower risk for blood clots than hip and knee replacements. To minimize risk please consider the following.

1. Starting the day after surgery, take one baby aspirin (81mg) twice a day until the sutures are removed. Do not take aspirin if you have an allergy or are on a different blood thinner. If you have been prescribed a different blood thinner, start taking it the day after surgery.
2. Using compression socks or stockings can also help with blood clot prevention.
3. PT and increasing your activity level will also help.

Concerns with Infection and Fevers

For a variety of reasons, a low-grade fever of less than 101.5°F for a few days after surgery can be normal. If you have a high fever, chills and/or sweats and are concerned about infection, let us know. Refer to wound care above as well, about wound appearance.

Pain Medicine and Constipation

Yes, these unfortunately go hand in hand. You will be given a discharge prescription for a narcotic; we expect you to wean off these as soon as possible. All narcotics can make you constipated; you can compensate by increasing your water intake, fruits and veggies, and using a stool softener or Metamucil. If you are having severe constipation issues, contact your primary care doctor.

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