

POSTOPERATIVE INSTRUCTIONS ANKLE FRACTURE

DIET

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

WOUND CARE

- Maintain your splint/dressing by keeping it clean and dry at ALL TIMES. This will help to avoid infection
- It is normal for the ankle and leg to swell following surgery. Try to wear your ted hose placed on your non-operative leg immediately after surgery for most of the day for the first 2 weeks after surgery. This is to help prevent blood clots
- You may shower by placing a large garbage bag over your splint starting the second day after surgery -- NO IMMERSION of operative leg (i.e. bath/pool/hot tub). You may also purchase a re-useable cast shower cover if desired.

MEDICATIONS

- Patients commonly will have a nerve block performed by their anesthesiologist the day of surgery. This typically helps significantly with pain control for 12-36 hours.
- Most patients will require some narcotic pain medication for a short period of time. This can be taken as directed on the bottle.
- 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
- Do not drive a car or operate machinery while taking narcotic medication
- Ibuprofen 200-400mg (i.e. Advil) may be taken in-between the narcotic pain medication doses if directed by Dr Camilleri. This can help to smooth out 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. This will also help with pain control
- Use crutches or a walker to assist with walking. You may also use a "knee scooter" if desired. Your weight bearing status is strict non-weight bearing to your surgical leg until appropriate healing occurs and Dr Camilleri clears you to begin weight bearing.
- Do not engage in activities which increase pain/swelling (prolonged periods of ambulation) 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

EMERGENCIES**

- Contact Dr Camilleri or his assistant Becca Corya at 765-683-4400 if any of the following are present:
 - Painful swelling or numbness
 - Unrelenting pain
 - Fever (over 101 degrees -- it is normal to have a low grade fever for the first day or two following surgery) or chills
 - Redness around the incisions
 - Color change in the foot, ankle, or leg
 - Continuous drainage or bleeding from incision (small amount of drainage is expected)
 - Difficulty breathing
 - Inability to urinate 8 hours after surgery
 - Excessive nausea/vomiting

** If you have an emergency after office hours or on the weekend, contact the same office number (765-683-4400) and you will be connected to our pager service. They will contact Dr Camilleri or one of his partners if he is unavailable. Do not call the hospital or surgery center

** If you have an emergency that requires immediate attention, proceed to the nearest emergency room