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Post Operative Instructions

General Lower Extremity Procedures

Dr. Mark Slabaugh

Post-Operative Instructions

Elevate the operative extremity above the level of your heart, whenever possible. This will help to decrease swelling. Pump the ankles up and down to help reduce the risk of blood clots. Do not place a pillow the knee, but instead place it under the heel and calf. This will keep your knee in a straight position and is preferred to prevent loss of motion.

Apply ice to the surgical area for the first 3 days following your procedure. Never apply ice directly to the skin and apply ice in 20-minute intervals. Use ice as needed in the following days.

Keep the wound/incision clean and dry. Please wash your hands thoroughly before handling the dressings/wound. Keep pets away from your surgical area. The dressing should be removed on the third day after surgery, then cover wounds with a dry non-adherent gauze dressing (available at any drug store). It is normal to have a small amount of blood on the dressings. Do not remove steri-strips or cut any visible sutures. Reapply the ACE wrap for 5-7 days to control swelling. Do not apply ointments, creams or lotions to your incision. If you have been given a pair of white compression stockings, these are considered part of your dressing and may be removed 3 days after your surgery as well.

You may shower on the 4th day after surgery. Let the water gently run over the incision site.

Do not soak or submerge the incision site in water for three weeks. Pat the incision site dry and apply a new, clean dressing after bathing.



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You may use crutches or a walker for support, as needed. Apply as much weight as is comfortable to your operative leg (unless instructed otherwise).

Take all medications as directed. Take Aspirin 325 mg daily for 2 weeks postoperatively. You should start to wean off of the narcotics around 2-3 days after the surgery. You may take an anti-inflammatory (i.e. Motrin or Aleve) to help with pain control and swelling.

Call the office if you develop severe cramping and calf pain with swelling that does not respond to simple stretching. This could be a sign of a blood clot. It can be normal to have some discomfort due to immobility, so try to change positions and so some light stretching if able first. Moving your knee and ankle can help re-establish blood flow and should be started immediately after surgery unless instructed otherwise.

Call the office if any signs of infection occur. This includes redness, drainage, foul odor or increasing warmth at the incision site and/or fever > 101.5°F. Slight redness and warmth around the incision is common for several days after the surgery.

If you received a lower extremity nerve block prior to your surgery, this will help to control your pain after your procedure. You may continue to experience numbness in your leg, knee and/or foot following your procedure. This may last several hours and into the following day. Local anesthetics (I.e.lidocaine) are put into the incision after surgery. It is not uncommon to encounter more pain on the first or second day after surgery. This is the time when swelling peaks. Taking pain medication before bedtime will assist in sleeping. It is important not to drink alcohol or drive while taking narcotic medication. You should resume your normal medications for other conditions the day after surgery, or as directed by your primary care physician.



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Please call (410) 951-7925 on the next business day after your surgery to schedule or confirm your follow-up appointment in the office for 10-14 days after your procedure. A prescription for physical therapy will be given. Please ensure that you start physical therapy 3-7 days after surgery unless otherwise directed.

Please remember that it is the office policy that no prescriptions will be prescribed over the phone after business hours or on weekends. If you feel that you will run out of your pain medication before your scheduled post-operative appoint, you must contact the office during business hours to request medication refills.

