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**POSTOPERATIVE INSTRUCTIONS ANKLE DEBRIDEMENT/LOOSE BODY
REMOVAL/MICROFRACTURE**

**PLEASE READ THESE INSTRUCTIONS COMPLETELY AND ASK FOR CLARIFICATION IF NECESSARY -
DIRECT QUESTIONS TO YOUR NURSE BEFORE LEAVING THE HOSPITAL OR VIA PHONE/EMAIL TO DR.
HUDSON'S STAFF AFTER ARRIVING HOME**

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
- 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, consider decreasing dose and taking anti nausea medication as needed.
- Do not drive a car or operate machinery while taking the narcotic medication
- 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 immediately after surgery
- Use icing machine continuously or ice packs (if machine not prescribed) every 2 hours for 20 minutes daily until your first post-operative visit – remember to keep leg elevated to level of chest while icing

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

DIET

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

EMERGENCIES**

- Painful swelling or numbness
- Unrelenting pain
- Fever (over 101° - it is normal to have a low grade fever 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

If you have an emergency after office hours or on the weekend, contact the same office number **(541) 242-4812 and you will be connected to our page service – they will contact Dr. Hudson. Do NOT call the hospital or surgicenter.

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

FOLLOW-UP CARE/QUESTIONS

- If you do not already have a postoperative appointment scheduled, please contact the office during normal office hours **(541) 345-0060** and ask for appointment scheduling.
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