



**Daniel J. Kaplan, MD**

Assistant Professor of Orthopaedic Surgery  
Chief, Division of Sports, Bellevue Hospital

**Telephone number: 929-455-2500**

## **ANKLE SURGERY POSTOPERATIVE INSTRUCTIONS**

\*\*Please note that the instructions provided below are general guidelines to be followed; however, any written or verbal instructions provided by Dr. Kaplan or his team supersede the instructions below and should be followed.

### **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 (cast) in good condition
- To avoid infection, keep the splint clean and dry until your postoperative visit – **you may shower by placing a large plastic bag over your splint beginning 5 days after surgery.** NO immersion of the operative leg (ie: bath or pool).
- Wait until your first postoperative appointment to have Dr. Kaplan's team remove the splint
- Please do not place any ointments lotions or creams directly over the incisions.
- Once the sutures are removed at least 10-14 days post operatively, you can begin to get the incision wet in the shower (water and soap lightly run over the incision and pat dry). NO immersion in a bath until given approval by our office.

## MEDICATIONS

- Local anesthetics are injected into the wound at the time of surgery. This will wear off within 8-12 hours and it is not uncommon for patients to encounter more pain on the first or second day after surgery when swelling peaks.
- You will be prescribed several medications postoperatively:
  - **Tylenol:** 1000 mg (2 of the 500 mg pills) 3x per day (every 8 hours)
  - **Meloxicam:** 15 mg pill, once per day, with food
  - **Tramadol:** 50 mg as needed for pain. Can be taken at most every 8 hours
  - **Oxycodone:** 5 mg. This is for breakthrough (i.e. you are still having pain, despite the other medications). This can also be taken at most every 8 hours.
  - **Colace (docusate):** 100 mg daily. This is to avoid constipation, which can occur with the pain medication
  - **Aspirin:** 81 mg taken twice per day, for 1 month. This is to prevent blood clots after surgery.
- 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 the medication with food. If constipation occurs, consider taking an over the counter laxative and be sure to drink plenty of water.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medications changed.
- Do not drive a car or operate machinery while taking the narcotic medication
- Please avoid alcohol use while taking narcotic pain medication
- For 4 weeks following surgery take one aspirin 81mg tablet twice daily to lower the risk of developing a blood clot after surgery. Please contact the office should severe calf pain occur or significant swelling of the calf or ankle occur.

## ACTIVITY

- Elevate the operative leg to chest level whenever possible to decrease swelling.
- Do not place pillows under knees (i.e. do not maintain knee in a flexed or bent position), but rather place pillows under the foot/ankle.
- Use crutches to assist with walking – you are NOT PERMITTED TO BEAR ANY WEIGHT on the operative leg.

- Do not engage in activities which increase ankle pain/swelling (prolonged periods of standing or walking) for 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**

- Icing is very important in the initial post-operative period and should begin immediately after surgery.
- Use icing machine continuously or ice packs (if machine not prescribed) for 30-45 minutes every 2 hours daily until your first post-operative visit – remember to keep leg elevated to level of chest while icing. Care should be taken with icing to avoid frostbite to the skin.
- You do not need to wake up in the middle of the night to change over the ice machine or icepacks unless you are uncomfortable

## **EXERCISE**

- No exercises performed during the first two weeks.
- Once you are out of the splint and into a boot, some light exercises will begin (see protocol)

## **EMERGENCIES\*\***

- Contact Dr. Kaplan's team if any of the following are present:
  - Painful swelling or numbness (note that some swelling and numbness is normal)
  - 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 foot or ankle
  - Continuous drainage or bleeding from incision (a small amount of drainage is expected)
  - Difficulty breathing
  - Excessive nausea/vomiting

- Calf pain

- 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 post-operative appointment scheduled, please contact our scheduler

- Your first postoperative appointment will be for a wound check. Additional questions can be asked at that time.

- Typically, the first post-operative appointment following ACL reconstruction is made 10-14 days following surgery for suture removal.

- If you have any further questions please contact Dr. Kaplan through my chart, or call the call center at 929-455-2500.