

In this document we cover the basics on post operative expectations:

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## **Pain Control**

- Take 1 pain pill (Oxycodone) every 4-6 hours prior to the block wearing off. The goal is to get ahead of the pain.
- Pain is worse once the block wears off. Blocks can last anywhere from 6-30 hours, average 12 hours. While the block is working you have no feeling nor movement in your leg. However, when the block wears off, pain will rapidly occur. Do not be scared or worried once the pain begins. This is normal and is not cause for alarm.
- The pain is worse in the first 72 hours, but it will decrease.
- The medication Oxycodone is for pain. Oxycodone is a controlled substance (narcotic). You can take 1 Oxycodone tablet ever 4 -6 hours for pain. If one pill is not controlling your pain then you can take 2<sup>nd</sup> tablet.
- 1000 mg of Tylenol (acetaminophen) should be taken 3 times a day for pain control. This can be taken with the oxycodone.
- Elevate the foot above the level of the heart and use ICE

## **Uncontrolled Pain**

- This is most likely to occur once the block wears off. The goal is to get ahead of the pain by taking a pain pill as soon as you get home
- You can take 2 Oxycodone tablets if needed for pain control if 1 is not enough
- You can add Tylenol to your pain regimen – up to 1000mg a day
- Elevate your leg ABOVE your heart. Simple but effective
- If still painful contact our office or on call team

## **Color Change**

- Surgery involves incisions and subsequent healing. The healing process requires an increase in blood flow.
- Since blood is a color (red/blue/purple) you will notice your foot changing colors in the healing process.
- By 6 months the color usually returns to normal.

## **Swelling and Numbness**

- Surgery involves incisions and subsequent healing. The healing process requires an increase in blood flow. This will result in swelling due to the increased blood flow.
- The swelling also will cause numbness and altered sensations in your foot. This is different for everyone.
- Usually by 6 months the sensation returns to normal
- Swelling by 6 months normally resolves, but may linger up to 12 months

**Swelling and Color Change will be most prominent after your foot has been below the level of your heart, after a warm shower, or after you have begun to move and use the foot.**

**Elevation of the leg will help decrease the swelling, the pain, and help the color change.**

# Post op Medications

1. Oxycodone 5mg as needed for pain
2. Zofran 4mg as needed for nausea
3. Colace 100mg twice daily for constipation
4. Aspirin 81mg twice daily to prevent DVT's

## Refills

- May take 24 hrs as ALL meds must be electronically signed by a Physician/PA. Nurses/Assistants cannot call in any medications
- Please do not wait until the end of the work day to request refills. This may result in request not being signed until the following day.
- Dr. Sims is in Surgery 2-3 days a week. On these days medication orders may not be signed until the end of the day.

## Nausea:

- Often anesthesia and narcotic pain medication can produce nausea. Therefore, we provide a Rx of Zofran for nausea. Zofran (ondansetron) 4mg every 8 hours as needed

## Constipation:

- Pain medication is known to cause constipation. We provide an Rx of Colace BID (twice daily) - used for constipation.

## Fever:

- A Fever is greater than 100.4 degrees
- Fever is common in the first 5 days. This is not a surgical site infection. This can be treated with Tylenol
- After 5-7 days a fever can indicate an infection, however most fevers are not a surgical infection.
- After Post Op day 5 if fever persist for more than 12 hours please contact our office

## **Contact:**

- Dr. Sims team: Kristen PA, Mary MA, Jason CST-FA, Jade MA
- MyChart App is the BEST & QUICKEST way to reach our team.
- If expecting a return phone call please answer calls from numbers you may not recognize. This may be us calling you back.

### **During Hours 8am – 4:30 p.m.**

- The best way to contact us is by MyChart message. This will be replied to quicker and more efficiently than phone calls.
- Phone: 864-234-7654
  - Phone messages before 4:30 pm are returned the same day

### **After Hours 5pm – 8 am or Weeeknds**

- NON-URGENT questions/concerns please use the MyChart App. These messages go directly to Dr. Sims' team so they can respond in a timely manner the next business day.
- URGENT matters please call 864-234-7654
  - Answered by the On-call team.

### **Emergency Room**

- The ER should only be used for emergency. This includes difficulty breathing, chest pain, loss of consciousness, fainting
- Pain is not an emergency. If pain control is the issue, please message or call us so we can help direct pain control

### **The pain medication is not controlling my pain. What can I do?**

First Elevate the leg above your heart and Ice foot/ankle. You can take a 2<sup>nd</sup> oxycodone if 1 pill is not working. You may also take Tylenol. If this is not working, please call us. Please attempt to call us prior to going to the ER i.e. call first if possible.

### **My foot is swollen and red/purple. Is this normal?**

Yes. Your body increases blood flow to help heal surgery. This increase in blood makes your foot swell more. Since blood is red, you can see the color change. This is most prominent after warm showers or after your foot has been below the level of your heart. It will normalize after several months.

### **My foot feels asleep, gets tingling and sometimes I get shooting pains in it. Is this normal?**

Yes. The surgical cut and nerve block all directly affect the nerves. Swelling with stretch the nerves. These factors will alter how the nerves function resulting in temporary numbness, tingling and shooting pains. These will normalize after 6 months.

### **My dressing/splint/cast got wet. What do I Do?**

This is not an Emergency, but it is time sensitive. A little splash or a damp is fine, but if it becomes soiled or very wet message us. We will bring you into our office that day OR the next day and change it with sterile and clean materials. Please do not remove it yourself.

### **When can I remove my dressing/splint and clean my wounds?**

Never. Do not remove your dressing unless told to do so. The dressing and splint protect these wounds. Removing the dressing exposes the wound to bacteria and infection risk.

### **Can I take Advil, Motrin, Aleve, ibuprofen?**

Sometimes – Do not take if you had a fusion or broken bone. They can stop bone growth. If you did not have a bone procedure, then it is ok to combine these with your other pain medications.