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POSTOPERATIVE INSTRUCTIONS

MEDICATIONS – Pain Management Regimen

MELOXICAM (meloxicam): (an anti-inflammatory)

- Take one in the morning daily. Take 1st dose the morning after surgery.
- Do not combine with other NSAIDs (Advil or Aleve)
- Take with food to help decrease stomach upset.
- Please take this medicine for 30 days post-op to help reduce inflammation and pain.

EXTRA-STRENGTH TYLENOL 500mg (acetaminophen): (a non-narcotic pain reliever)

- Begin with two 500mg tablets every 8 hours for the first 14 days post-op. Do not exceed this dosage.
- It is recommended to take Tylenol 1 hour after taking Mobic to help complement pain relief.
- **Please set an alarm so that you do not miss any doses during sleep. Staying on an every 8 hours schedule will reduce the likelihood of having to use the Oxycodone.**

OXYCODONE: (narcotic pain medication)

- IF YOU DO NOT HAVE ADEQUATE PAIN CONTROL WITH THE COMBINATION OF ICE, MELOXICAM AND THE EXTRA STRENGTH TYLENOL, YOU MAY ADD THE OXYCODONE.
- Take one to two tablets every 4-6 hours as needed for pain.
- Use a 0-10 pain scale and the following to decide how much oxycodone you should take:
 - Pain 0-4/10: No oxycodone necessary
 - Pain 5-7/10: Take one tablet of oxycodone
 - Pain 8-10/10: Take two tablets of oxycodone
- Do not take more than 10 tablets in any 24-hour time period.

COLACE: (stool softener)

- Only take this medication if you find that you are constipated from the pain medication
- We recommend Colace 100 mg two times per day on an as needed basis

ZOFRAN: (anti-nausea medication)

- You may take Zofran 4mg ODT (dissolvable tablet) as needed for nausea. Some patients may feel nauseas from opiate medication or anesthesia medications.
- Do not take if you have history of long QT syndrome or arrhythmia (cardiac)

ASPIRIN: (anti-platelet medication)

- Take aspirin 325mg once daily for 14 days post-op to **help prevent blood clots**
- Also wear Ted stockings for mechanical prevention of blood clotting
- ONLY PERTAINS TO LOWER EXTREMITY PATIENTS





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PHYSICAL THERAPY

PT is the most important part of your recovery. Physical therapy typically begins 2-5 days after your surgery. In addition, you will perform your exercises at home. These exercises will consist of gentle range of motion and strengthening as well as specific exercises to prevent you from becoming stiff.

BANDAGE

Please leave this in place for 48-72 hours after surgery. Underneath the bandages will likely be waterproof bandages covering white paper strips which should remain on until your first postoperative office visit. If the waterproof bandages inadvertently become wet or start to peel off, remove them and cover the steri-strips with Nexcare waterproof band aids. The steri-strips should be left in place even if blood-stained. Your steri-strips will be removed on your first office visit approximately 10-14 days post operatively.

SHOWERING

You must keep the incision dry to prevent an infection as it is healing. Try to avoid the shower from hitting the incisions directly. Do not apply creams, ointment, or lotions to your incisions while they are still healing (approximately 3 weeks). Please do not submerge the incision sites for about 3 weeks post-op (no baths, pools, or hot tubs) to help prevent infection and ensure proper healing.

COLD THERAPY UNIT/ ICE

Prevention of post-op swelling or inflammation is an important part of your recovery. Apply icepack/gelpack/frozen peas to the surgical site 20 minutes at a time, 4 to 6 times a day or use your cold therapy unit as directed in the instructions. Also, it is important to apply the ice/cold therapy 10-20 minutes after completing your physical therapy.

DRIVING

You may not drive while taking pain medication. In addition, if it is your right knee that had surgery or if you have a sling for shoulder surgery, you will not be able to drive for approximately 6 weeks after surgery or until the brace/sling is removed. You may talk to Dr. Sutton or Jodie at your first postoperative visit if you have any further questions.

NORMAL SENSATIONS AND FINDING AFTER SURGERY

- a. Pain
- b. Swelling and warmth up to 2 weeks
- c. Small amounts of bloody drainage for first few days
- d. Numbness around the incision area
- e. Bruising
- f. Low grade temperature less than 101°F for up to a week after surgery
- g. Small amount of redness to the area where the sutures insert in the skin

NOTIFY OUR OFFICE IMMEDIATELY IF ANY OF THE FOLLOWING SIGNS OR SYMPTOMS OCCUR

- a. Calf pain
- b. Change is noted to your incision (i.e. increased redness or drainage)
- c. Temperature greater than 101°F
- d. Fever, chills, nausea, vomiting or diarrhea
- e. Sutures become loose or fall out and incision becomes open
- f. Drainage becomes yellow, pus-like, or foul smelling
- g. Increased pain unrelieved by medication or measures mentioned above

