Post-Operative Instructions:
Patella ORIF

Prescription Medications

Colace (Docusate Sodium):
- This medication is to help with constipation, a common side effect after taking narcotic pain medications (like Norco) and general anesthesia.
- Take 1 pill in the morning and 1 in the evening to prevent constipation.
- It is normal to take several days to make a bowel movement after surgery
- Drink plenty of clear liquids as the anesthesia can cause dehydration/constipation as well

Hydrocodone/Acetaminophen (Norco):
- This is a narcotic medication for pain, to be taken AS NEEDED.
- Plan to stay on a scheduled dose of 1-2 tablets every 4-6 hrs for the first 1-3 days.
  - Can then begin to space out / discontinue the medication, transitioning to Acetaminophen (Tylenol) only
  - DO NOT exceed 4,000 mg of Acetaminophen in a 24-hour period.
- Do not drive, drink alcohol, or take Acetaminophen (Tylenol) or additional narcotics/pain medications WHILE taking this medication
- Common side effects: nausea, drowsiness, and constipation
  - To decrease the side effects, take with food
  - If constipation occurs, take the stool softener as directed

Scopolamine patch:
- For some patients, the anesthesia team will put on a scopolamine patch behind your ear to prevent nausea.
- If you are prescribed one, you can leave this in place for 72 hours.
- When you take it off, wash your hands thoroughly or it can make your vision blurry.

Zofran (Ondansetron):
- This is an anti-nausea medication.
- It is a dissolving tablet that is to be placed on your tongue – allow it to dissolve, and swallow.
- Take 1 tablet as needed every 4-6 hours for the first 2 days after surgery.

Aspirin
- This medication thins the blood in order to prevent blot clots – take as directed
- Please contact the office should severe calf pain or significant swelling of the calf or ankle occurs

Wound Care
- Leave the bulky surgical bandage on and DO NOT shower for 48 hours
  - Can loosen bandage is swelling of foot/ankle occurs
- After 48 hours, remove bandages and gauze, but LEAVE STERI-STrips (white tape) IN PLACE.
Dr. Shane Nho MS, MD

○ You may shower at this point.
○ Cover incision sites with waterproof bandage prior to getting into the shower.
  ■ Should the incisions accidentally get wet, pat them dry with a clean towel – **DO NOT SCRUB**
● It is normal to see a lot of blood-tinged (may be pinkish-yellow) soaked fluid on the bandages
  ○ If bandages become soaked, okay to reinforce with additional dressing
● In between showers, leave the incision sites open to air
  ○ **DO NOT APPLY LOTIONS OR OINTMENTS TO THE INCISION SITES**
● Your stitches will be removed at your first post op visit
  ○ You may shower at this point without waterproof bandages over the incision sites.
  ○ **DO NOT** scrub the incision sites – you may let soap and water run down the incisions and pat dry with a towel once you’re done.
● **DO NOT** soak in any pool/bath water until 4 weeks after surgery.

**Brace**

● Immobilizer knee brace should be worn at all times – **ESPECIALLY** at night/sleeping and when walking
● Brace can be removed for personal hygiene only (i.e. showering)
  ○ Be sure to keep the knee straight while in the shower – can use shower chair if needed

**Weight Bearing**

● Partial weight bearing as tolerated with the knee brace – most patients require crutches to assist with walking

**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 to keep the knee straight
● **DO NOT** engage in activities that increase knee pain/swelling (long periods of standing or walking) for the first 2 weeks following surgery.
● **AVOID** long periods of sitting (without leg elevated) or long distance traveling for 2 weeks.
● **NO** driving until instructed otherwise by physician

**Icing**

● Icing is very important in the initial post-operative period and should begin immediately after surgery
● Use ice machine (or ice packs) continuously for 20 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.

**Physical Therapy (PT)**

● PT should start around 4-6 weeks postop after surgery, 2x per week
  ○ PT order will be provided at the initial post-op visit
● It is important that terminal extension (leg strengthening) is not lost
● Perform ankle pumps continuously throughout the day to reduce the risk of blood clot formation in the lower leg
● Choose a PT clinic close to your home so you can be compliant with your program.
● Please bring your prescription for therapy and PT protocol (provided on surgery day and also on the website) to your first appointment.
● If you do not have a therapist in mind, or wish to be provided information for a therapist, we can provide you with a list of physical therapist recommendations that we commonly refer our patients to, depending on your location

Follow-Up
● You will need to follow up for your 1st post-operative visit 10-14 days from surgery – this will be a PA visit
● A new physical therapy prescription will be given to you at that time and any sutures will be removed
● Please call central scheduling or use the link below to make an appointment (contact information below)

When Should I Contact the Office?
● If you have a fever >100.4° F.
  ○ A low-grade temperature (up to 100° F) is expected after surgery but let us know if it gets this high!
● If you develop chills, sweats, excessive nausea/vomiting, difficulty breathing, chest pain
● If you develop calf pain or color changes in foot or ankle,
● If you have pus, significant pain, warmth or redness surrounding the incision sites.
● If you are unable to urinate >1-2 days after surgery
● If you are unable to pass a bowel movement >6-7 days after surgery

Important Information
− Office Hours: Monday – Friday; 7:30am –4:30pm
− After Hours/Emergency Contact: Resident/Fellow – 708.236.2600
− Administration: Jeannie Taylor– 312.432.2525
− Physician Assistants: Sara, Delaney, & Erica – 312.432.2388 | nhopa@rushortho.com

We are in clinic or surgery and not answering calls in real time – we will return all voicemails within 24-48 hours.