

**INSTITUTE FOR ORTHOPAEDIC SURGERY
LOWER EXTREMITY DISCHARGE PLAN AND INSTRUCTION SHEET**

DIET

Resume your regular diet as tolerated. Drink plenty of water and/or other fluids.

ACTIVITY

Minimize activity for the first 2-3 days. Other activity as follows: **Do not drive until cleared by your physician.**

Non-weight bearing with crutches/walker Toe touch weight bearing with crutches/walker Partial weight bearing with crutches/walker Weight bearing as tolerated with walker/crutches Wear knee immobilizer/brace as instructed _____

Use CPM at home as instructed _____

TED Hose _____

Do ankle pumps 10 times every 15 minutes during waking hours for 48 hours.

INCISION/DRESSING

Keep bandages clean and dry. **DO NOT** touch or scratch your incision. Keep pets away from dressing and incision. Remove your dressing only if instructed to do so. Before you change your dressing, remove a pain pump, or drain, **wash your hands** for at least 30 seconds with antibacterial soap. You may shower in ___ days. Additional: _____

ICE/COLD THERAPY

Apply a large bag of ice to operative site for a minimum of 30 minutes, every 2-3 hours for the first 2 days. Continue to ice as needed to control pain and swelling as you become more active. If prescribed by your physician, use cold therapy unit per instructions.

ELEVATION

Elevate operative foot or knee on pillows above the level of the heart as tolerated. For hip surgeries, maintain hip precautions as instructed.

MEDICATION

Take the pain pills **only as prescribed** for as long as needed. Pain medication can cause constipation. Drink plenty of fluids and eat high fiber foods. If needed, the following laxatives are recommended: Senakot, Colace & Milk of Magnesia. Take your pre-operative home medications and any new medications according to the attached "Medication Reconciliations Form".

IMPORTANT

Call the Institute for Orthopaedic Surgery at (419) 224-7586, 24 hours a day 7 days a week, if you develop any of the following:

- Persistent or abnormal bleeding
- Persistent nausea/vomiting
- Numbness/tingling, discoloration, loss of movement or sensation of affected extremity
- Difficulty breathing
- Fever/chills/dizziness
- Redness, swelling, or pus at surgical incision
- Pain, swelling, or redness in the calf (See handbook for full details.)
- Any unusual symptom that does not seem right

MISCELLANEOUS

Have a responsible adult remain with you after discharge for approximately 24 hours. We recommend that you do not make any critical decisions, sign any legal papers or operate any dangerous equipment for 24 hours or while taking prescription pain medicine.

ADDITIONAL INSTRUCTIONS: _____

FOLLOW UP APPOINTMENT WITH YOUR SURGEON: _____

PHYSICAL THERAPY APPOINTMENT: _____

Patient and/or family member verbalizes/demonstrates understanding of instructions.

Personal belongings given to patient/family

Home medications given to patient/family

I have received discharge planning, a Patient Handbook, specialized instructions for my surgery, Medication Reconciliation Form, and had all my questions answered.

Patient/Responsible Party Signature

Date

PATIENT LABEL

Nurse Signature

Date