

SCOPE POSTOP INSTRUCTIONS AND ADVICE

- After you get home, resume your regular diet. It is best to start with bland foods to avoid nausea. It is not uncommon to have some nausea and possibly even vomiting the day of (and day after) surgery. This is usually due to the medications that you were given during anesthesia.
- If you were provided with a brace or sling – KEEP IT ON AT ALL TIMES except when working with PT or in the shower. This includes sleep!
- It is ok to remove dressings in 3 days unless otherwise instructed. Once the dressings are removed it is OK to shower and get the incisions wet with soap and water. Do not scrub the incision sites, but let the soap and water run over them and gently pat them dry. Any small scope incisions (small blue stitch) can be covered with bandaids after dressings are removed to prevent the sutures from getting snagged on clothing. Any white adhesive strips (steri strips) should be left on until you return in two weeks for your follow up. Do not put any antibiotic ointment, moisturizer or scar lotions on your incisions.
- Even with the use of pain medication, it is not expected that you will be 100% pain free. Some discomfort is expected after surgery. You will receive a narcotic pain medication for post-operative pain control. This prescription is expected to last a minimum of 10-14 days (until your first postop appointment). It is recommended that you take this medication as prescribed for the first 24 hours after the surgery to “stay ahead of the pain”. After the first day or two, you can begin spacing out your dosages or taking less medication as you feel comfortable.
- You may supplement your prescription pain medication with an over the counter anti-inflammatory (advil, ibuprofen, aleve, motrin – NOT TYLENOL as your prescription pain medication already has Tylenol in it). You can alternate the dosages so that you are taking them at different times or take them together. The maximum allowable dosage in a 24 hour period is 2400mg of ibuprofen for healthy adults (twelve tablets if your medication is over the counter). Go to the ER if your pain is not controllable with your oral pain medication plus the anti-inflammatory.
- We will discontinue the use of all pain medications at 6-8 weeks post-op. If you believe that you still require pain medication at this point, you may request a referral to a pain management specialist.
- Elevate your arm or leg above the heart when possible to control swelling. For knee surgery, the preferred technique is to use 3-4 pillows under the foot and ankle only with nothing under the knee. This will help keep the knee straight. Use an ice pack for the at least the first 72 hours, no more than 20 minutes per hour, then as needed after 3 days.
- Blood clots are rare following outpatient surgery, but if you are over 50, a smoker, or taking oral hormones (including birth control) the risk goes up. You may take a baby aspirin once a day for four weeks after your surgery to reduce the risk.
- If you are having an itching reaction, take Benadryl, 1 or 2 tablets, every 6 hours.
- You receive IV antibiotics while you are here, we do not routinely prescribe antibiotics post operatively.
- Bruising (even really ugly bruising) is normal near the surgical site. Mild bleeding from the incisions is normal. Some patients will react to the brace or the solution used to sterilize the skin which can cause a rash. All of these things will improve with time and are not usually a cause for concern.
- **Call 214-383-9356** for any questions/concerns, or if you need a work/school/coaches note. Also, call if you have any of the following postop problems: pain not controlled by oral medications, fever greater than 101, persistent bleeding or drainage from the incisions more than 5 days after surgery, or any medication reactions. Please use the after hours/emergency line from the main number (option 2 in the voicemail greeting, followed by option 2 for Dr. Parker), and leave your message, and your call will be returned as quickly as possible.