

---

## DISCHARGE INSTRUCTIONS

### Compartment Syndrome Release with Endoscopic/Open Fasciotomy

- ❖ Recovery after surgery entails controlling swelling and discomfort, healing, return of range-of-motion of the ankle joint, regaining strength in the muscles, and a gradual return to activities. The following instructions are intended as a guide to help you achieve these individual goals and recover as quickly as possible after your surgery.

- ❖ **COMFORT**

---

- **Elevation**

- Elevate your knee and ankle above the level of your heart. The best position is lying down with two pillows lengthwise under your entire leg. This should be done for the first several days after surgery.

- **Cold Therapy**

- If you elected to receive the **circulating cooling device**, this can be used for intervals of 20 minutes on and 40 minutes after the initial 5 days postoperatively.
- If you elected to receive the **gel wrap**, this may be applied for 20 minutes on, 20 minutes off as needed. You may apply this over the post-op dressing. Once the dressing is removed, be sure to place a barrier (shirt, towel, cloth, etc.) between your skin and the gel wrap.
- If you elected to use **regular ice**, this may be applied for 20 minutes on, 20 minutes off as needed. You may apply this over the post-op dressing. Once the dressing is removed, be sure to place a barrier (shirt, towel, cloth, etc.) between your skin and the ice.

- **Medication**

- **Pain Management Program (PLEASE FOLLOW EXACTLY FOR BEST RESULTS)**

- **Over-the-counter Acetaminophen (Tylenol): 1000 mg every 8 hours for 5 days**
- **Ibuprofen 800 mg every 8 hours for 5 days**
- **Oxycodone 5mg every 4-6 hours as needed for pain**
- **Works best if you alternate between Acetaminophen and Ibuprofen every 4 hours making sure not to exceed 3 doses of Acetaminophen in a 24-hour period.**
- **After 5 days everything can be taken as needed.**
- **IF you have an allergy then take what you can.**



Center for Orthopedics  
and Plastic Surgery

---

- Extra strength Tylenol may be used for mild pain.
- Over the counter anti-inflammatories (Ibuprofen, Aleve, Motrin, etc.) should be **avoided** for the first 4 weeks following surgery.
- **Anti-coagulation medication:** A medication to prevent post-operative blood clots has been prescribed (Aspirin, Lovenox, etc.) This is the only medication that MUST be taken as prescribed until directed to stop by Dr. Kerns.
- **Nausea Medication** – Zofran (Odansetron) has been prescribed for nausea. You may take this as needed per the prescription instructions.
- **Constipation Medication** - Colace has been prescribed for constipation. Both your pain medication and the anesthesia can cause constipation. Take this as needed.

**A. ACTIVITIES:**

1. **Weightbearing** – You are allowed to put full weight on your operative leg. Walk using two crutches or a walker. You may touch your foot on the floor for balance. Do this within the limits of pain.
2. **Athletic Activities** – Athletic activities, such as swimming, bicycling, jogging, running and stop-and-go sports, **should be avoided** until allowed by your doctor.
3. **Return to Work** – Return to work as soon as appropriate. Your ability to work depends on a number of factors – your level of discomfort and how much demand your job puts on your knees. If you have any questions, please call your doctor.

**B. WOUND CARE:**

1. Tub bathing, swimming, and soaking of the knee **should be avoided** until allowed by your doctor – Usually 2-3 weeks after your surgery. Keep the dressing on, clean and dry until your first operative visit. Showering will begin after your first postoperative visit.
2. Ask your nurse or Dr. Kerns’s staff regarding showering postoperatively.

**C. EATING:**

1. Your first few meals, after surgery, should include light, easily digestible foods and plenty of liquids, since some people experience slight nausea as a temporary reaction to anesthesia.

**D. CALL YOUR PHYSICIAN IF:**

1. Pain in your knee persists or worsens in the first few days after surgery.
2. Excessive redness or drainage of cloudy or bloody material from the wounds (Clear red tinted fluid and some mild drainage should be expected). Drainage of any kind 5 days after surgery should be reported to the doctor.



Center for Orthopedics  
and Plastic Surgery

---

3. You have a temperature elevation greater than 101°
4. You have pain, swelling or redness in your calf.
5. You have numbness or weakness in your leg or foot.

**F. RETURN TO THE OFFICE:**

Your first return to our office should be within the first 1-2 weeks after your surgery. You can find your appointment for this first post-operative visit in the post op instruction folder.