POST-OPERATIVE INSTRUCTIONS: INTRAMEDULLARY NAIL OF TIBIA FRACTURE

ACTIVITY

- You may NOT bear weight until cleared by your physician. You must use crutches to assist with walking.
- Do not engage in prolonged periods of standing or walking during the first 7-10 days after surgery.
- Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks.
- You may move your hip and knee as often as you like to reduce stiffness.

SPLINT

- Please keep the splint clean and dry.
- If you are going to shower, please protect the splint with a garbage bag, saran wrap, etcin order to keep it dry. Werecommend a sponge bath initially, particularly because it is hard to stand on one leg in the shower especially if youare on narcotic pain medications.
- We will remove the splint at your first post-operative clinic appointment.
- Do not stick items down your splint, even if it itches underneath! If you have itching you can "knock" on the splint...thevibration from the knock can typically alleviate the itch.

PAIN & INFLAMMATION

- **Ice** Apply ice bags wrapped in a dry towel several times per day for 20 minutes for the first week and then as needed for painrelief and inflammation.
- **Compression** Use an ace wrap or the white stocking to decrease swelling. The white stocking should be worn for 5-7 days toprevent blood clots and decrease swelling in your knee.
- **Elevation** Keep your foot **elevated above your heart** as much as possible for the first 3 to 4 days. Keep your leg elevated with apillow under your calf or foot, **NOT under the knee**.
- Pain Medication- You have been given a prescription for pain control; please take as directed.
 - If you think you will require a refill on your medication, you MUST do so during our regular weekday office hours.
 - o If you need additional pain medication you may take Tylenol 500-650mg every 4-6 hours. Do not take more than 3gramsor 3000mg in a 24-hour period!
 - Common side effects of the pain medication are:
 - NAUSEA: To decrease nausea, take these medications with food.
 - DROWSINESS: Do not drive a car or operate machinery.
 - ITCHING: You may take Benadryl to alleviate any itching.
 - CONSTIPATION: To decrease constipation, use the stool softener provided (Docusate 250mg) or over-thecounterremedies (Mineral Oil, Milk of Magnesia, etc). Also avoid bananas, rice, apples, toast, or yogurt...asthese foods can make you constipated. Getting up and moving around also helps with constipation and "wakingup" your intestinal tract.
- Anti-inflammatory medications (Aleve, Ibuprofen, Naproxen, etc.) should not be taken for 2 weeks after surgery.

EMERGENCIES

- Please have someone stay with you for the first 24 hours after surgery
- Please call the clinic or the orthopedist on-call if:
 - Drainage from the incision soaks the dressings, expands, is foul-smelling; or your incisions are red, warm, and extremelypainful
 - You develop a fever (>101.5°) or chills.
 - o You experience leg or calf pain, leg swelling, or difficulty breathing.

FOLLOW-UP CARE

 Please schedule a follow-up visit for suture removal, and to review your surgery 10-14 days postoperatively.

IF YOU HAVE ANY QUESTIONS OR CONCERNS, PLEASE FEEL FREE CALL THE OFFICE (989) 583-7450.