



POST-OPERATIVE INSTRUCTIONS: DISTAL TIBIA AND FIBULA FRACTURE

ACTIVITY

- **Do not bear weight on the operative leg until permitted by your physician.** Please use crutches to assist with walking.
- Do not engage in prolonged periods of standing or walking the first 7-10 days following surgery.
- Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks.
- You may move your hip and knee as much as you would like.

SPLINT

- Please keep the splint clean and dry.
- If you are going to shower, please protect the splint with a garbage bag, saran wrap, etc in order to keep it dry. We recommend a sponge bath initially, particularly because it is hard to stand on one leg in the shower especially if you are 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...the vibration 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 pain relief and inflammation.
- **Compression** - Use an ace wrap or the white stocking to decrease swelling. The white stocking should be worn for 5-7 days to prevent blood clots and decrease swelling in your leg.
- **Elevation** - Keep your foot **elevated above your heart** as much as possible for the first 3 to 4 days. Keep your leg elevated with a pillow 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.
 - If you need additional pain medication you may take Tylenol 500-650mg every 4-6 hours. Do not take more than 3grams or 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-the-counter remedies (Mineral Oil, Milk of Magnesia, etc). Also avoid bananas, rice, apples, toast, or yogurt...as these foods can make you constipated. Getting up and moving around also helps with constipation and “waking up” 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 orthopaedist on-call if:
 - Drainage soaks the dressings, expands, is foul-smelling, or your incisions are red, warm, and extremely painful
 - You develop a fever (>101.5°) or chills
 - You experience leg or calf pain, leg swelling, or difficulty breathing

FOLLOW-UP CARE

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

IF YOU HAVE ANY QUESTIONS OR CONCERNS, PLEASE FEEL FREE CALL THE OFFICE (760)924-4084.