



Post Operative Instructions: Tenotomy(s)

ACTIVITY

- Crutches may help you balance for the first few days; however, you may put as much weight as comfortable on your heel in the post op dressings and boot/shoe
 - You may bend and straighten your knee as much as you like.
 - Do not engage in prolonged periods of standing or walking over the first 7-10 days following surgery.
 - Avoid long periods of sitting (without leg elevated) or long distance traveling for 2 weeks.
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DRESSING & INCISIONS

- A small amount of red-tinged drainage on the dressing during the first 2 days is normal.
 - Keep the dressing clean and dry; protect it while bathing or showering.
 - Keep the dressing intact until your first post op, if the dressing becomes soiled prior to that scheduled appointment, contact the clinic for a dressing change.
 - Do not apply Bacitracin or other ointments.
 - Avoid soaking in pools, lakes, hot tubs, or the ocean until sutures are removed and the incision is fully healed.
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PAIN & INFLAMMATION

Ice

- Apply ice wrapped in a dry towel 20 minutes at a time, several times per day for the first week, then as needed.

Compression

- Adjust the compression of the ace wrap for comfort.

Elevation

- Keep your foot elevated above heart level as much as possible for the first 3–4 days.
- Place a pillow under your knee for comfort.
- Avoid pressure under your heel to help reduce the risk of ulcers.

Pain Medications

- Take your prescribed medications as directed.

Tylenol (Acetaminophen)

- First-line for pain.
- Take 500-650 mg every 6–8 hours.
- Do not exceed 1000 mg per dose or 3000 mg per day.
- Do not drink alcohol while taking Tylenol.

Anti-inflammatory

- As needed for postoperative swelling
- Do not take after fusion or with surgeries at risk for nonunion.

Opioid

- For moderate to severe breakthrough pain only.
- Use sparingly and wean off as soon as possible.

Common side effects include:

- Nausea: Take with food.
- Drowsiness: Do not drive or operate machinery.
- Itching: Benadryl may help.
- Constipation:
 - Use stool softeners (e.g., Senna-Docusate) or OTC options (Mineral Oil, Milk of Magnesia, etc).
 - Avoid bananas, rice, apples, toast, and yogurt (may worsen constipation).
 - Light walking helps stimulate bowel function.

Refills:

- If you think you will need a refill, you must request it during regular weekday office hours.
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DVT PROPHYLAXIS

- Take Aspirin 162 mg daily as prescribed.
 - This is not for pain—it's to reduce the risk of blood clots (DVT/pulmonary embolism).
 - If you are at higher risk, you may be placed on Lovenox instead. If you are already on anticoagulation, you may have a different plan.
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EMERGENCIES

You must have someone stay with you during the first 48 hours after surgery.

Call the clinic or the on-call orthopedist if:

- Drainage soaks the dressing, increases, smells foul, or if incisions become red, warm, or very painful.
 - You develop a fever $>101.5^{\circ}\text{F}$ or chills.
 - You experience leg or calf pain, swelling, or difficulty breathing.
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FOLLOW-UP CARE

- Schedule a follow-up appointment at ~2 weeks postoperatively for a wound check, suture removal, and review of your surgery (if not already scheduled).
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EXERCISES – When you are comfortable and ready you may perform each exercise 2-3 times a day; it may help to take pain medication 20-30 minutes prior to the exercises and to apply ice after the exercises

Quadriceps Contractions:

Sit or lie on the floor with your operated leg straight
Place a towel roll under the knee
Tighten your thigh and hamstring muscles, causing you to press your knee downward into the towel roll
Hold this position for 10 seconds
Relax your thigh and hamstring muscles
Perform 2-3 sets of 10

Straight Leg Raises:

Lie on the floor
Perform a quadriceps contraction (as stated in the above exercise)
Raise your foot about 6-12" off the floor
Slowly lower your leg back to the floor
Relax your thigh muscle
Perform 2-3 sets of 10



Ankle Pumps:

Point toes downward and hold for 5 seconds
Point toes upward and hold for 5 seconds
Perform 2-3 sets of 10

