



Discharge Instructions: Distal Radius Open Reduction and Internal Fixation

Wound Management

- Your skin was closed with a buried absorbable suture, skin glue, and steristrips.
- Leave your dressing and splint intact until your first postoperative appointment.
- **DO NOT PICK UP ANYTHING HEAVIER THAN A CELL PHONE WITH YOUR INJURED ARM.**
- Use caution on slippery/icy/unstable surface to avoid falling.
- Wearing a splint can sometimes cause shooting pain and/or numbness and tingling in your hand after surgery. If you experience this, remove the splint and allow the arm to rest gently in your lap for a few hours. This should help with the discomfort. If you have persistent numbness or pain, please call Dr. Stapleton at (304) 647-5114.

Splint / Precautions:

- Leave your splint clean dry and intact
- **DO NOT PICK UP ANYTHING HEAVIER THAN A CELL PHONE/CUP OF COFFEE WITH YOUR INJURED ARM.**
- Use caution on slippery/icy/unstable surface to avoid falling.
- Fine dexterity type activity is OK, ROM of the fingers is encouraged.
- Wearing a splint can sometimes cause shooting pain and/or numbness and tingling in your hand after surgery. If you experience this, remove the splint and allow the arm to rest gently in your lap for a few hours. This should help with the discomfort. If you have persistent numbness or pain, please call Dr. Stapleton at (304) 647-5114.

Diet:

- Begin with clear liquids and light food (jello, toast, etc.)
- Progress to your normal diet if you are not nauseated.



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Pain / Medications

- **Start your oral pain medication before your pain gets severe.**
- It is easier to maintain pain control if you stay ahead of the pain. It is difficult to catch up with your pain if it gets too severe.
- Expect to have pain following surgery. Pain level of 4-5/10 is our goal. The pain medications prescribed by Dr. Stapleton should provide relief, but often does not take all the pain away. The first few days after surgery are often the most painful. Your pain will improve with time.
- Please use narcotic medications (Oxycodone) sparingly and slowly try to decrease the amount and frequency over the next two weeks.
- Do not make important decisions or sign any legal documents while on narcotic pain medication.
- **Constipation** is common after surgery due to pain medication and lack of activity. Consider taking a stool softener such as Miralax or Colace as needed.

Continue all medications you were taking before surgery in addition to the medications Dr. Stapleton prescribed below.

Narcotic Pain Medication

- You have been prescribed a narcotic pain medication.
 - Oxycodone 5mg by mouth every 4-6 hours as needed for pain.**

Non-narcotic Pain Medication

- In addition to your narcotic medication, you should also take (as long as there are no medical contraindications):
 - Tylenol 1,000 mg every 6 hours. Do not exceed 4,000mg of Tylenol per day.
 - Ibuprofen 600 mg every 8 hours for additional pain control.
 - Take this medication with food to help avoid stomach upset.

Blood Thinner

- You have been prescribed a medication to help prevent blood clots in your legs after surgery (medication indicated below). **It is very important for you to take this medication as directed.**
 - Aspirin 81mg (Enteric Coated) - Take one pill by mouth two times per day for 14 days.



Cryotherapy / Ice:

- Use ice packs regularly for 2 weeks after surgery to help with pain and swelling.
- Apply ice for 20 minutes every 2-4 hours while awake.
- Ice or cold pack should never be applied directly on the skin as this may cause frostbite. A cloth or towel should always be used between the skin and ice pack to protect the skin.
- You may consider purchasing a commercially available ice and compression device available online (e.g., amazon.com). Some options include a NICE Machine, Game Ready machine, or Cryocuff. These devices are not always covered by insurance; please contact your insurance company for cost details. If desired, Dr. Stapleton can write you a prescription for these devices.




Activity:

- Do not lift anything heavier than a cell phone or cup of coffee with the injured hand.
- It is common for the hand and wrist to swell after surgery.
 - Gently opening and closing your hand (making a fist) ten times per hour can help reduce swelling.
- Fine dexterity type activities and frequent ROM activities of the fingers is encouraged.
- Take frequent short walks to help promote blood flow in your legs and minimize the risk of blood clots.
- **Do not drive while on narcotic pain medication.**

Physical Therapy:

- If necessary, formal physical therapy will be ordered by Dr. Stapleton after your surgery. You will be provided with a prescription for therapy at your first post-operative visit.

Begin these home exercises the day after your surgery.

	<p>PENDULUM CIRCLES</p> <p>Shift your body weight in circles to allow your injured arm to gently swing in circles freely. Your injured arm should be fully relaxed. Alternate the direction of the circle with each set.</p> <p>Duration 30 Seconds Complete 1 Set Perform 3 Times a Day</p>
	<p>FINGER ABDUCTION TO CLOSED FIST</p> <p>Open and close your hand into a fist and repeat. When opening, attempt to open as wide as you can as you spread out your fingers maximally.</p> <p>Repeat 10 Times Hold 1 Second Complete 1 Set Perform 6 Times a Day</p>
	<p>ELBOW FLEXION EXTENSION</p> <p>Start with your arm at your side. Bend at your elbow to raise your forearm/hand upwards as shown. Then return to starting position and repeat.</p> <p>Repeat 10 Times Hold 1 Second Complete 1 Set Perform 3 Times a Day</p>



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Return to Work or School:

- You may return to work or school as soon as you are comfortable. This typically occurs 1-2 weeks after surgery. Return to work/school clearance notes can be obtained from Dr. Stapleton' office if needed.
- Do not drive a car or operative heavy machinery while on narcotics.

Follow-up Appointments:

- Your first post-operative appointment will be in approximately 10-14 days.
- If you do not have an appointment scheduled, please call Dr. Stapleton' office at (304) 647-5114.
- Follow-up care is a key part of your treatment and safety. Please keep and attend all appointments and call Dr. Stapleton if you have concerns or problems.

When to call for help:

Call 911 anytime you think you may need emergency care. For example, call if:
You pass out (lose consciousness).
You have severe trouble breathing.
You have sudden chest pain and shortness of breath.

Call the office at (304) 647-5114 if you have:
Severe pain that does not improve with pain medication.
Calf or lower leg pain and swelling.
Fever over 101°F for more than one day.
Incision keeps bleeding 3 days after your surgery.
Signs of infection, such as redness around incision or pus draining from your incision.

**If you have questions or concerns during normal business hours, please call the office at (304) 647-5114.
After hours please call the answering service at (304) 433-8788**