



Discharge Instructions: High Tibial Osteotomy: _____

Brace / Crutches / Weightbearing:

- **Non-weight bearing** in brace locked in extension (weight-bearing will be progressed over the next 6 weeks)

☐ _____

- Brace must be **locked in extension while walking**
- **YOU MAY UNLOCK YOUR BRACE TO SIT, SLEEP, USE THE BATHROOM AND DO THERAPY.**
- **You may remove your brace to shower.**
- Use crutches while the nerve block is still in effect.
- Wear your brace unlocked while sleeping for 6 weeks after surgery.

Wound Care:

- **Remove Ted Hose and bandage 3 days after surgery.**
- Leave the steri-strips clean dry and intact, DO NOT remove.
- After your dressing is removed (Day 3), you may shower normally unless otherwise directed by Dr. Stapleton.
 - Do not scrub incision or scrub/remove skin glue. Allow soapy water to run over your incisions and pat dry with a clean towel.
- Do not submerge your incisions underwater (bath, swimming pool, etc.) until fully healed (typically around 4 weeks).
- There are no sutures to remove, they are beneath your skin and will dissolve over time.
- You may cover your surgical site with an ACE wrap as needed.

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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Cryotherapy / Ice:

- Use ice packs or cryotherapy often for several weeks after surgery and after therapy sessions.
- Apply ice for 20 minutes every 2 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.

Activity:

- Knee brace **MUST** be worn for 6 weeks when ambulating, Dr. Stapleton will discuss your results individually
- Elevate the operative leg above your heart as often as possible for 5 days after surgery to help decrease post-operative swelling.
- Leave your brace on and your knee locked in extension for the first 2 weeks after surgery until your follow up appointment with Dr. Stapleton.
- Take frequent short walks with crutches to help promote blood flow in your legs and minimize the risk of blood clots.
- **Do not drive while on narcotic pain medication.** Do not make important decisions or sign any legal documents while on narcotic pain medication.
- Do not drive until cleared by your physician.

Physical Therapy:

- Formal physical therapy will be ordered by Dr. Stapleton. You need to begin this 3-5 days after your surgery date.
- You will need to find a facility of your choosing and call to schedule an appointment.

DR. ERIK STAPLETON




BOARD CERTIFIED ORTHOPEDIC SURGEON

Sports Medicine Specialist



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Begin these home exercises the day after your surgery.

	<p>ANKLE PUMPS - AP</p> <p>Bend your foot up and down at your ankle joint as shown.</p> <p>Repeat 10 Times Hold 1 Second Complete 1 Set Perform 3 Times a Day</p>
	<p>QUAD SETS</p> <p>Sit down and straighten your leg and knee. Tighten your top thigh muscle to press the back of your knee downward. Hold this and then relax and repeat.</p> <p>Repeat 10 Times Hold 3 Seconds Complete 1 Set Perform 3 Times a Day</p>
	<p>STRAIGHT LEG RAISE</p> <p>While lying or sitting, raise up your leg with a straight knee. Keep both knees straight the entire time.</p> <p>Repeat 10 Times Hold 1 Second Complete 1 Set Perform 3 Times a Day</p>

Pain / Medications

- You have been given a nerve block prior to your surgery to reduce post-operative pain. This will usually wear off in the evening following your surgery.
- Take a pain pill as soon as you begin to regain feeling in your foot or leg after surgery, **before** the block wears off.
- 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.
- **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.



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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:
 - ☐ Tylenol 1,000mg every 6 hours. Do not exceed 4,000mg of Tylenol per day.

NSAIDs OTC as directed every 6-8 hours for pain and inflammation

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 30 days.
 - ☐ Xarelto 10mg - Take one pill by mouth each day for 14 days.
 - ☐ Eliquis 2.5mg – Take one pill by mouth two times per day for 14 days.

Oral Contraceptive Medication (Birth Control Pills)

- If you are currently taking oral contraceptive medication (birth control pills), you may be at a higher risk for a blood clot after surgery. You may consider talking with your primary care physician or obstetrician about temporarily discontinuing this medication after your surgery.

Dental Work:

- Please do not undergo any dental work, including cleanings, six weeks prior to surgery and for 6 months after surgery as it may increase the risk of infection in your knee.



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Return to Work or School:

You may return to work or school as soon as you are comfortable and able to safely walk using your brace (and/or crutches). This typically occurs 1-4 weeks after surgery. Return to work/school clearance notes can be obtained from Dr. Stapleton's office.

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's 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