

**Ankle/Leg Fracture Discharge Instructions**

**Medications**

A prescription for pain medicine, nausea medication and an antibiotic will be given to you before you leave the hospital. The antibiotics will be taken for 3 days unless indicated otherwise. The nausea and pain medication should be taken as directed as needed. Depending on the surgery, you may also be told to take 325mg of aspirin daily for 30 days or be given a blood thinner. Aspirin acts as a blood thinner that decreases the risk of a blood clot in the deep veins of the legs called a DVT, which can sometimes occur after surgery due to decreased activity.

You may need to take a stool softener twice daily while taking pain medicine. (ex: Colace 100 mg) Pain medicine can slow down the bowels causing constipation.

Do not drink alcoholic beverages for 24 hours. Drink plenty of fluids. Resume a regular diet by eating light foods and advance as tolerated. Drink 6-8 glasses of fluids each day.

Do not drive or operate heavy machinery for 24 hours, or while you are taking pain medication.

Effects of the nerve block/spinal will last around 12-48 hours. This may cause tingling/numbness/weakness or feeling like your leg is asleep. Effects of general anesthesia may last up to 48 hours. You may have episodes of drowsiness, nausea or dizziness. These feelings are normal.

**Wound and Dressing Care**

Keep operative ankle splint on at all times.

For the first 24-48 hours, keep the operative leg elevated above your heart. Apply ice packs to the leg for the first 48 hours by placing them on top of the splint/dressing. DO NOT REMOVE DRESSING/SPLINT. Keep dressing/splint clean, dry, intact. Do not get the dressing wet. Cover with plastic bag and tape or press n seal to shower.

Notify Dr. Parker’s office at 806-350-2663 if you notice any of the following: discoloration, numbness or tingling of toes, or excessive amounts of bleeding from the incision. Bruising may occur but does not require special care. Some swelling is normal after surgery which is why elevation of the extremity is recommended.

**Activity**

No driving or operating machinery, heavy lifting or exercise until released by Dr. Parker or staff. Do foot flaps with non-surgery foot 30 times every hour while awake for the first 2 days to help with circulation in the lower extremities.

DO NOT put any weight on your surgery leg. Use crutches as instructed until follow-up appointment or released by Dr. Parker or staff.

**Crutch Basics**: Let your hands carry your weight, not your armpits. Look forward when you are walking, not down at your feet. Use a chair with armrests to make sitting and standing easier. Make sure your crutches have been adjusted to your height. The top of the crutches should be 2-3 finger widths below the armpit. When the arm is hanging straight down, the hand piece should be at the level of the wrist. Your elbows should be slightly bent when you hold the handles. Keep the tips of your crutches about 3 inches away from your feet so that you do not trip.

**No Weight bearing**: Put the crutches forward about 1 step’s length. Push down on the crutches with the hands, hold the “bad” leg up from the floor and squeeze the top of the crutches between the chest and arm. Swing the “good” leg forward. Be careful not to go too far. Now step on the “good” leg.

**To Sit down**: Back up to chair, bed, or toilet until the seat touches the back of your legs. Move your weak leg forward, and balance on your strong leg. Hold both crutches in your hand on the same side as your weak leg. Using your free hand, grab the armrest, the seat of the chair, or the bed or toilet. Slowly sit down.

**To Stand up**: Move to the front of your seat and move your weak leg forward. Hold both crutches in your hand on the same side as your weak leg. Use your free hand to help you push up from your seat to stand up. Balance on your strong leg while you place a crutch in each hand.

**Stairs**: Avoid stairs until you are ready to use them. Before you can go up and down them on your feet, you can sit down and scoot up or down, one step at a time.

**To go up stairs**: Step up with your strong leg first. Bring the crutches up, one in each arm. Place your weight on the strong leg and then bring your weak leg up. If there is a handrail, you can hold onto it and hold both crutches on your other side in one hand.

**To go down stairs**: Put your crutches on the step below first, one in each arm. Move your weak leg forward and down. Follow with your strong leg. If there is a handrail, you can hold onto it and hold both crutches on your other side in one hand.

**Safety Tips**: Make changes around your house to help prevent falls. Make sure any loose rugs, rug corners that stick up, or cords are secured to the ground so you do not trip or get tangled in them. Remove clutter and keep your floors clean and dry. Wear shoes or slippers with rubber or non-skid soles. DO NOT wear shoes with heels or leather soles.

**Follow up appointment**

You will have a follow-up appt 10-14 days after surgery. In most cases, this appointment was made when your surgery was scheduled. Please call 806-350-2663 to confirm appointment details if needed.

**Returning to work/school**

As a general rule, we recommend taking off work at least until your follow up appointment. You will be given a note to excuse you from work/school on the day of your surgery. If you would like to return to work before your follow-up appointment, please contact our office and make arrangements.

If you are a student, it is up to the discretion, within reason, of you and your parents on how long you will be out of school. Usually, 2-3 days is typical but special considerations may be made on case-by-case basis. However, no PE or Sports until released by Dr. Parker or staff.

**Call our office or go to the Emergency Room if...**

* **You have a fever of 101 or higher, night sweats or chills.**
* **You notice red streaks radiating outwards from your incision(s).**
* **Your incision(s) get worsening redness, swelling, draining pus or severe pain.**
* **You experience shortness of breath or severe pain in your calf (signs of a blood clot)**
* **You have any questions, do not hesitate to call our office.**