



Sports Medicine and Performance Center

UNIVERSITY OF COLORADO | SCHOOL OF MEDICINE

IN PARTNERSHIP WITH BOULDER COMMUNITY HEALTH



Sports Medicine
University of Colorado

Eric McCarty, MD
2150 Stadium Drive
Boulder, CO 80309
303-315-9900

Eric McCarty, MD
175 Inverness Drive West Suite 200,
Englewood, CO 80112
720-848-8200

Post-Surgery Instructions and Recommendations

TODAY YOUR SURGEON WAS:

Dr. Eric McCarty MD

WHO TO CALL WITH QUESTIONS:

Please call Mekenna Peterson, ATC at 720-602-0903 between the hours of 8a-5p Monday-Friday. If after hours or on weekend or holiday please call CUSMPC at 303-315-9900 and follow on-call prompts on office recording to get in touch with on-call provider.

****Please be aware that prescriptions can only be refilled through the clinic during regular business hours and not by calling the operator after hours or on the weekend. Plan in advance if you know you will be running out of your prescription over the weekend**.**

WOUND CARE:

Keep your dressing in place, dry and covered for 48 hours. Please keep steri strips in place. After this time, you may remove your dressing and shower but do not bathe or submerge in any water until cleared by your surgeon. Any time you are touching near your incisions, make sure you wash your hands with soap and water and they are clean.

If you had a total shoulder replacement, clavicle fracture fixed or a laterjet, please leave your waterproof dressing on for 7 days. After 7 days, you can remove the dressing. It is ok to shower over the bandage after 48 hours.

If you had a splint placed during surgery, please leave in place until your first post op visit. This cannot be removed to shower. Please sponge bathe until your first post op visit.

FOLLOW UP:

Call CUSMPC at 303-315-9900 or Mekenna at 720-602-0903 for Inverness post-op to confirm appointment time with Ashley Chrisman, PA-C; Jennifer G. Reed, NP-C; or Mekenna Peterson, ATC or check your my health connection.

FOLLOW UP WITH YOUR PRIMARY CARE:

If you take any medications for blood pressure, diabetes, anticoagulation (ie blood thinners), or any other medications for chronic medical conditions, we advise you to make a follow up appointment with your primary care provider within 2 weeks of discharge to discuss any changes in your routine medications.

ACTIVITY PRECAUTIONS:

Please refer to your black folder for your specific therapy instructions. This was provided to you with your discharge information. If you have lost your black folder and have questions, please call the office.

If post-op shoulder surgery, please see black folder for length of time in sling. If you had any tissue/bone repaired during surgery, please leave sling on at all times. Ok to come out of sling a few times a day for 10-15 minutes to straighten elbow to prevent stiffness and to do exercises given to you by physical therapy. Please sleep in sling and keep pillow attached to sling. Pillow keeps shoulder at a neutral position

If post-op knee surgery, please see black folder for length of time on crutches. Please wear your compression stockings (TED hose) until you are walking without crutches. If you are on crutches for longer than 1 week, please keep compression stockings on for a total of 7 days.

If you have a splint, please leave in place until your first post op visit. This cannot be removed to shower. Please sponge bathe until your first post op visit.

RETURN PRECAUTIONS:

Please call Mekenna Peterson, ATC at 720-602-0903 between the hours of 8a-5p Monday-Friday or go to the emergency department if you have a persistent or rising temperature >101.5, increased pain/swelling/purulent drainage/spreading redness from your incision site, persistent nausea/vomiting, chest pain, shortness of breath, or any other concerns. You will have pain following the procedure and some swelling and redness is expected, this should improve with elevation of your leg and with ice machine and medications.

ICE MACHINE:

If you rented or purchased an ice machine, recommend using for 24 hours a day for the first 3-4 days, 20 minutes on/20 minutes off or 30 minutes on/30 minutes off per patient preference. This will help decrease inflammation after surgery and help provide pain relief.

If you do not have an ice machine, use a bag of frozen ice or frozen peas/corn to place over surgical site, make sure to place a barrier between ice and leg. Use 20 minutes on, 20 minutes off for the first 3-4 days while you are awake.

DIET:

Regular. If nauseous, please start with a bland diet; this may include toast, crackers, mashed potatoes, jello. Once tolerating, then may advance diet as tolerated.

MEDICATIONS**PAIN MEDICATIONS:**

You have been provided a prescription for pain called oxycodone as well as Naprosyn (naproxen) which is an anti-inflammatory medication. The oxycodone is taken for pain as needed. Recommend taking 1 oxycodone before bed on day of surgery even if not having any pain in order to not have pain catch up with you overnight. You can take 1-2 tablets of oxycodone every 4-6 hours as needed. There is no tylenol in this prescription, therefore, we recommend you pick up extra strength tylenol to take in conjunction with oxycodone to help relieve pain. You can take 1 ES tylenol every 4 hours to help decrease pain. To make sure maximum benefit from tylenol, recommend taking in between oxycodone doses. Example: 10:00am 1 oxycodone, 12:00pm tylenol, 2:00pm oxycodone, 4:00pm tylenol, etc.

Recommendation for weaning off oxycodone- if pain is a 5 or <, only take tylenol. If pain is > 5 on a scale of 0-10, take an oxycodone.

If waking up in middle of the night due to discomfort, you may consider picking up EXTENDED-RELEASE tylenol to take at bedtime. This tablet of tylenol will gradually release doses of tylenol over 8 hours which can help during the sleeping period. Just ensure you do not take more than 3000mg of tylenol in a 24 hour period.

Please take the Naproxen twice daily for 5 days. This will help decrease inflammation and therefore help with pain. However, if you develop severe heartburn or ulcer type pain in your stomach discontinue the naproxen.

Please continue to take tylenol regularly until you have no more pain. In most cases you should be off of your oxycodone before you run out of pills; however, if you are nearing the end of your prescription and know that you will be needing more, please call the clinic between the hours of 8-5 Monday-Friday at least 1-2 days prior to running out of your prescription.

*****Do not drink any alcohol or use marijuana while taking your opioid pain medications (oxycodone)*****

*****While taking naproxen, do not take any other NSAIDs, ie. Ibuprofen, advil, aleve. It is ok to take naproxen with tylenol and with oxycodone.***

ANTIBIOTICS:

You received antibiotics prior to your surgery to decrease your risk of infection. For most surgeries, you do not need to take any antibiotics after.

There are some surgeries that we do send in antibiotics. If you had antibiotics sent in for your surgery, please take until there are no pills left.

ADDITIONAL MEDICATIONS:

Narcotic pain medications commonly cause side effects such as itching, nausea, and *constipation*.

- For ***constipation***: ***We recommend that you take some form of over the counter stool softener such as Colace (Docusate Sodium) 100mg 1-2 times daily to prevent constipation.
- For ***itching***: Over the counter benadryl 25mg up to 3 times daily can help with itching, however this can make you drowsy. If you are over the age of 65 discuss taking benadryl with your primary care provider if you have not taken it in the past. Instead of benadryl, you can take OTC claritin, zyrtec or allegra to help with any itching post surgery. These medications will not cause drowsiness and provide similar relief as benadryl.
- For ***nausea***: Try to avoid taking your pain medications on an empty stomach or along with multiple other medications at one time.
- **You have been provided a prescription for zofran which can be taken if you have excessive nausea.**

Please remember that prescriptions can only be provided through the clinic between 8-5 Monday through Friday

BLOOD CLOT PREVENTION:

After surgery you can potentially be at increased risk for a blood clot. While your risk is not sufficient enough to recommend any medications to thin your blood, it is important to move around on a regular basis to keep your blood flowing, especially through your other extremities that were not operated on. Often you can perform exercises even while seated that can pump your blood through your extremities such as moving your ankles up and down and holding the contracted position, sequentially tightening and relaxing your thighs, etc. Make sure that you are getting up and moving around at least every hour during the day if possible. If you experience significantly worsening swelling in an extremity, develop calf pain or have acutely worsening shortness of breath, or sudden onset of chest pain, please call the clinic or go to the emergency department. If difficulty breathing or chest pain, go to the emergency department.