OLYMPIA ORTHOPAEDIC ASSOCIATES PLLC
Your Life in Motion

Perioperative Instructions

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Multi-modal Pain Control/ Post-op Medications

- **General Considerations:**
  - Do NOT start post-op medications before surgery unless instructed.
  - All refill requests must come to our attention before the end of business on Thursday to ensure that we can fill them before the weekend.
  - Refill requests will NOT be addressed on the weekend.
- **Narcotic/Opioid Medications for Pain Control:**
  - Examples: oxycodone, hydrocodone, hydromorphone
  - Use sparingly and always try non-narcotic pain medications first.
  - Narcotic pain medications will be filled up to 6 weeks post-operatively, if necessary, and not beyond this date.
  - Refills will not be addressed on weekends, according to OOA guidelines.
- **NSAIDs (Non-Steroidal Anti-Inflammatory Drugs) for Pain and Inflammation:**
  - Examples: Celecoxib (Celebrex), Meloxicam (Mobic), Diclofenac (Voltaren), Naproxen (Aleve), Ibuprofen (Motrin or Advil)
  - If prescribed, use regularly as directed to help with baseline pain control.
  - Do NOT use if you have been told by your physician to not use this class of drugs.
  - Take with food as this medication can cause an upset stomach.
  - Supplement with antacid medication (i.e. Tums, Pepcid/Zantac, Prilosec), if needed.
  - If stomach pain/indigestion persists, stop taking this medication.
  - If you discover abnormal bleeding, immediately discontinue this medication, and visit your nearest ER for evaluation.
- **Acetaminophen (i.e. Tylenol) for Pain/Fever Control:**

    - Use regularly as directed to help with baseline pain control.
    - If not prescribed, supplement pain control with over the counter (OTC) medications.
    - Maximum daily dose should not exceed 3,000 mg in a 24-hour period.
    - If you have been prescribed Vicodin (hydrocodone/acetaminophen) or Percocet (oxycodone/acetaminophen), be careful not to exceed this limit of acetaminophen.
- **Stool Softeners for Constipation:**
    - Example: Sennosides (Senna), Colace (Docusate), Miralax (Polyethylene Glycol)
    - Please use regularly to help with bowel movements.
    - If you have loose stools, HOLD this medication.
    - Once you become regular after surgery, you can discontinue this medication.
- **Anti-Emetics for Nausea/Vomiting:**
    - Examples: Ondansetron (Zofran)
    - Take as needed for nausea/vomiting after surgery or with narcotic pain medication.
- **Blood Thinners to Prevent Blood Clot Formation:**
    - Examples: Aspirin, Enoxaparin (Lovenox), Apixaban (Eliquis), Rivaroxaban (Xarelto)
    - You have been identified as having an elevated risk of blood clots following surgery.
    - If prescribed, you must take as directed until the medication is completely finished.
    - This is typically due to the type of surgery you are having, or the injury you sustained.
    - It is very important to take your medication as instructed to prevent blood clots.
- **Antibiotics for Infection Prevention:**
    - Examples: Cephalexin (Keflex), Cefadroxil (Duricef), Clindamycin (Cleocin), Trimethoprim/sulfamethoxazole (Bactrim DS)
    - Prescribed to all joint replacement patients for 24 hours after surgery
    - Prescribed to select patients at high risk of infection for 10 days after surgery
    - If prescribed, you must take as directed until the medication is completely finished.
- **Tranexamic Acid or "TXA" (i.e. Lysteda or Cyklokapron):**
    - Prescribed to all joint replacement patients for 4 days after surgery
    - Helps minimize bleeding and swelling after surgery
- **JOURNAVX® (Suzetrigine):**
    - Prescribed to all joint replacement patients after surgery
    - Non-narcotic pain medication that blocks pain signal pathways
    - May not be covered by insurance, and require out-of-pocket cost
    - Not required by Dr. Anderson (if you are unable to afford this medication)
    - Take two (2) tablets 1-2 hours prior to surgery arrival with a small sip of water
    - Following surgery, continue taking one (1) tablet every 12 hours until completed

General Anesthesia

- Medication provided to put you to sleep for surgery.
- Effects may last up to 24 hours. DO NOT DRIVE.

- You will need a chaperone on the day of surgery to drive you home.
- It is required that you stay with someone during the 24 hours following surgery.
- Nausea and vomiting are common after these medications
- If you have previously experienced nausea/vomiting with anesthesia, tell your anesthesia provider on the day of surgery so they can provide you medication to minimize this.

Regional Anesthesia (Nerve Blocks)

- Nerve blocks may be provided by the anesthesia provider to assist with pain control
- It is recommended that you start taking your narcotic pain medication once you arrive home from surgery to avoid "rebound pain" once the nerve block wears off.
- Your fingers/toes may experience numbness or tingling due to the medication effects.
- Your fingers/toes may be difficult to move due to the medication.
- If any of these effects last longer than 24 hours, please contact Dr. Anderson's office.

Icing/Elevation

- Swelling at the surgery site can cause pain and discomfort.
- Swelling is most pronounced in the first 72 hours following surgery.
- Icing and elevation of your extremity can help decrease swelling at the surgical site.
- Pillows can be placed under your calf or arm to elevate the extremity above the heart.
    - DO NOT place pillows behind the knee, this can lead to knee stiffness.
    - DO NOT place pillows under your heel, this can lead to pressure sores.
- Ice/Cold therapy is extremely effective in decreasing swelling associated with surgery.
- Apply ice in 20-minute increments, every 1-2 hours following surgery in the first 3 days.
- Ice packs are extremely effective when placed in the groin or armpit of the operated extremity as blood flow will cool the surgical area indirectly.
- DO NOT place ice packs directly on your dressing or skin and always cover with a towel.
    - Ice can cause skin burns when in direct contact for extended periods of time.
    - Condensation from ice can cause your bandage to become saturated with water.

Home Medications

- Unless instructed otherwise, resume home medications on your normal schedule.
- If you missed a dose because of surgery, resume your normal dosing the following day.
- Patients on blood thinners: please adhere to Dr. Anderson's specific instructions.
- Rheumatoid patients: please adhere to Dr. Anderson's specific instructions.

Common Concerns

- Fever
    - It is not uncommon to develop a low-grade fever after surgery.

    - This typically happens because your lungs are not fully expanded after surgery.
    - It is important to take deep breaths and move around after surgery.
    - If you have been prescribed an Incentive Spirometer (IS), please use this regularly
    - If you develop a true fever (>101.5° F), report to your nearest ER for evaluation.
- Nausea/Vomiting
    - Anesthesia medications commonly produce undesirable effects.
    - It may be helpful to consume only clear liquids on the day following surgery.
    - If you can tolerate solid foods, stick to crackers and dry toast.
    - Advance your diet as your stomach can tolerate.
    - If this becomes severe, or you demonstrate signs of dehydration, call Dr. Anderson, or visit the nearest ER after hours.
- Constipation
    - If you have not had a bowel movement for more than two days, supplement Senna with additional over-the-counter laxatives (i.e. Miralax, Dulcolax suppository).
    - If you cannot have a bowel movement, and you are having pain, go to the ER.
- Shortness of breath, Chest pain, or Difficulty breathing
    - Go to the ER or call 911

Follow-up Appointment

- Elective surgery patients will schedule follow-up appointments prior to surgery.
- If you have not received confirmation of your appointment, please contact Dr. Anderson's surgery scheduler to confirm your appointment.

Questions/Concerns

- Please call the office you were evaluated at prior to surgery. This will ensure efficient care.
- If you have not yet been seen in the office, please contact the OOA Eastside Clinic.
- Please sign up for Athena Health Patient Portal via the OOA website to contact us directly!
- Olympia Orthopaedic Associates (OOA) Eastside Clinic: (360) 570-3460 Ext 7028
- Rapid Orthopaedic Care (ROC) Urgent Care Clinic: (360) 754-7622
    - No appointment needed
    - Open 10:00am to 5:30pm daily
    - Located at the OOA Westside Clinic
- For emergent concerns and you cannot get in touch with us, call 911 or go to the nearest ER.
- For urgent after-hours concerns, contact: (360) 786-8990, option "0"