

Post-Operative Medication Instructions

Standard Opioid Pain Medication Protocol - Total Joint Replacement

Please read this guide before surgery and keep it available with your post op medications. Your medication plan may be individualized based on your medical history and other medications.

Before surgery

Pick up all prescribed medications before your surgery date. Not every patient will take every medication listed below. Your surgical team should mark the medications that apply to you at your preoperative visit.

Your Medication Plan

Pain & Inflammation Control

1. Oxycodone 5 mg - severe pain

- Take 1-2 tablets every 4-6 hours as needed for severe pain. Tablets may be cut in half when a lower dose is sufficient.
- Take the lowest dose that adequately controls your pain. The goal is tolerable pain that allows you to rest, walk, and participate in therapy - not necessarily zero pain.
- Common side effects include nausea, constipation, dizziness, and sleepiness.
- Do not drive, drink alcohol, or combine oxycodone with sedating medications unless specifically approved.
- If you need oxycodone regularly throughout the day for more than expected or your pain is worsening rather than improving, contact our office.

2. Tramadol 50 mg - moderate pain

- Take 1 tablet every 6 hours as needed for moderate pain.
- Tramadol may cause fewer side effects for some patients, but it is still an opioid medication and may cause nausea, constipation, dizziness, and sleepiness.
- Oxycodone and tramadol are not intended to be taken at the same time. If both have been prescribed, they may be alternated according to your written instructions.
- Do not drive, drink alcohol, or combine tramadol with other sedating medications unless specifically approved.

3. Meloxicam 15 mg

- Take 1 tablet every morning with food, starting the day after you return home from surgery.
- Do NOT combine with ibuprofen/Advil/Motrin, naproxen/Aleve, diclofenac, Celebrex, or another prescription or over-the-counter anti-inflammatory medication unless specifically instructed.
- Your surgeon may modify or omit meloxicam if you have kidney disease, a history of stomach ulcer or GI bleeding, or take a prescription anticoagulant.

4. Dexamethasone 4 mg (4 days)

- Take 1 tablet twice daily for 4 days, starting the evening you return home after surgery. On the day of surgery, take only the evening dose.
- This may not be prescribed if you have diabetes or another medical reason that makes steroid treatment inappropriate.
- Temporary insomnia, flushing, or higher blood glucose can occur.

5. Tylenol (acetaminophen) 500 mg

- Take 2 tablets (1,000 mg) three times daily for as long as scheduled pain control is needed.
- This regimen totals 3,000 mg of acetaminophen per day. Do not take additional products containing acetaminophen/Tylenol unless your clinician specifically approves them.
- Your dose may need to be modified if you have significant liver disease or heavy alcohol use.

Blood Clot Prevention

6. Aspirin (enteric-coated) 81 mg

- Take 1 tablet **twice** daily for 8 weeks after surgery.
- Start the first dose the morning after surgery unless you receive different instructions.
- In addition to medication, get up and walk for about 5-10 minutes during each hour you are awake during the day, as safely tolerated.

If you normally take a prescription blood thinner

If you take Eliquis, Xarelto, Pradaxa, Coumadin/warfarin, Plavix/clopidogrel, or another prescription blood thinner, your surgeon and/or prescribing clinician will give you specific stop/restart instructions. Your postoperative clot-prevention plan may be different from the aspirin plan above.

Nausea & Bleeding

7. Ondansetron (Zofran) 4 mg

- Take 1-2 tablets every 6 hours as needed for nausea or vomiting.
- You may use this any time after surgery as needed.

8. Tranexamic acid 650 mg (5 days) - if prescribed (for total knee replacement only)

- Take 1 tablet twice daily for 5 days for bleeding management, starting the evening you return home after surgery. Finish the prescribed course.
- Not every patient will receive this medication. Your surgeon will determine whether it is appropriate based on your medical history, kidney function, and clotting history.

Questions?

Please contact our team with any post-operative concerns or questions regarding medications: Olympia Orthopaedic Associates: 360-570-3460, ext. 3860.