



# POST-OP SHEETS

---

## 2025

MORE INFO

[www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)

CALL US

864-807-9998

# BICEPS TENODESIS

## Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

### INITIAL INSTRUCTIONS

- Ice along with pain medicine are your keys to initial pain management.
- After you arrive home, rest the remainder of the day. You may be tired or nauseated from the anesthesia and/or pain medication.
- You will be in a sling after surgery. You will be in this sling for 2 weeks post op.

### DRESSING CHANGE

- Leave the dressing in place for 48 hours following surgery or until you go to physical therapy where they will change it for you.
- After this, remove the dressing making sure to leave the sutures of the incisions in place.
- You may have a small incision in your armpit if a biceps tenodesis was performed.
- It is extremely important to keep the surgical site clean and dry at all times to help prevent infection.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.4 degrees F) and drainage from the wound. If you note any of these signs, please call the office immediately.

### BATHING

- You may shower immediately after surgery but keep incision dry. **5 days after your surgery** you can get your incisions wet as long as the wounds are dry and not draining. Let the water run down over the incisions but do not rub or scrub them.
- If the wounds are draining, then wait until they are dry before getting them wet.
- **Do not soak or submerge** the surgical site until the wounds are completely healed (typically 3-4 weeks after surgery).

### ACTIVITY

- Keep sling in place most times, but okay to remove to move your elbow, shoulder and wrist.
- OK to remove sling but no resisted supination or resisted elbow flexion for 8 weeks after surgery.
- May return to **sedentary work** the day after surgery, if pain is tolerable
- **OK to use computer.** Use your other hand to place your operated extremity on the desk or keyboard and allow it to fully rest there without using your own muscles to keep it in position.

### PHYSICAL THERAPY

- **You will be discharged with a physical therapy prescription and a physical therapy protocol.** Ideally, you will see the therapist either post op day 1 or 2. The protocol is a description for you and your physical therapist that details all of your restrictions and activities through your entire recovery. Please be sure to give this to your physical therapist.
- Please arrange your post-operative physical therapy appointment. Our office can help you with this if needed. You may start as soon as the day following your surgery, but most prefer the week after surgery. They will guide you in exercises to perform while in the clinic and at home.

Call 864-807-9998 with any questions  
about your post-op instructions.



# BICEPS TENODESIS

## Post-Op Instructions – American Orthopedics

864-807-9998

### SLING/IMMOBILIZER

- You will be put in a sling after surgery
- Sling should be worn the majority of the time
- Keep your elbow position against the pillow and even with your side or in front of this position to minimize stress on the repair.
- You will be wearing the sling for 2 weeks.

### ICE THERAPY

- Icing is very important to decrease swelling and pain and improve mobility.
- Please use ice for 20 minutes each hour over surgical site.
- After 24 hours, continue to use the ice 3-4 times a day, 15-20 minutes each time.
- Be sure to keep clothing or a towel between ice and skin, as placing the ice directly on skin may cause frostbite. DO NOT PLACE DIRECTLY ON SKIN.

### MEDICATIONS

- **If placed, nerve blocks and pain medication injected into the wound will wear off from 8-24 hours after surgery.**
- Recommendation is to take scheduled Tylenol 1000mg three times per day and 800mg ibuprofen three times per day.
- You will be given a narcotic pain medication. This should be taken for breakthrough pain every 8 hours for pain if necessary. Take with a little food.
- **Ice and elevation** will aide in additional pain control
- Take medications as prescribed
- **Do not mix narcotics** with alcohol
- Common side effects of narcotic pain medications include
- Nausea- Take medication with food. If prescribed you may use anti-nausea medication. If nausea persists, call the office to consider having the medication changed.
- Drowsiness
- Constipation – We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation. You will be given a prescription for this.
- **Do not drive a vehicle or operate heavy machinery while on narcotic pain medications**
- **Narcotics and pain medications will not be refilled on weekends or after hours.**
- You will likely be given a prescription for aspirin 325mg to take post-operatively. This is taken only once a day for 4 weeks post-operatively to prevent blood clots. The dosing and duration may change on an individual basis, but it should be reflected in the prescription that you are given.

Call 864-807-9998 with any questions  
about your post-op instructions.



# BICEPS TENODESIS

## Post-Op Instructions – American Orthopedics

864-807-9998

### POST-OP OFFICE APPOINTMENT

- If the appointment was not arranged prior to surgery, please contact the office at (864) 807-9998
- Your first post-operative visit will be made in office prior to your surgery
- Depending on the procedure plan for follow-up visits at 2 weeks, 6 weeks, 3 months, and 6 months after surgery.

### EMERGENCIES OR CONCERNS

- Email Dr. Ratner at [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- Or contact the office or go to the nearest emergency room if you have any of the following:
  - Pain worsens or does not go away after pain medication is taken.
  - Any abrupt change in the nature or severity of pain
  - Redness or swelling in your thigh or calf that will not decrease.
  - Redness around incisions
  - Continuous drainage or bleeding from the incision (occasional drainage is expected)
  - Difficulties moving your fingers or extreme pain when moving your fingers
  - Numbness or tingling that does not go away or is getting worse
  - Cold foot or color change in extremity (Please be aware that the skin prep in surgery may have an orange, brown, or blue tint)
  - Develop a fever greater than 101.5 degrees F.
  - Chest pain, shortness of breath, intractable nausea/vomiting, or anything else concerning
  - If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615

Call 864-807-9998 with any questions  
about your post-op instructions.



AMERICAN  
ORTHOPEDICS



# CLAVICLE

## Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

### INITIAL INSTRUCTIONS

- Ice along with pain medicine are your keys to initial pain management.
- After you arrive home, rest the remainder of the day. You may be tired or nauseated from the anesthesia and/or pain medication.
- You will be in a sling after surgery. This is simply for your own comfort. Feel free to remove the sling whenever you'd like if it is more comfortable.

### DRESSING CHANGE

- Leave the dressing in place until your follow up appointment.
- It is extremely important to keep the surgical site clean and dry at all times to help prevent infection.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.4 degrees F) and drainage from the wound. If you note any of these signs, please call the office immediately.

### BATHING

- You may shower **after your surgery** but keep your dressing dry and covered.
- After your dressing is removed, you may shower and clean the wound gently with soap and water but **Do not soak or submerge** the surgical site until the wounds are completely healed (typically 3-4 weeks after surgery).

### ACTIVITY

- May return to **sedentary work ONLY** or school the day after surgery, if pain is tolerable
- **OK to use computer.**
- You will be non weight bearing for 6 weeks and then less than 10lbs until 12 weeks post op
- You will begin to work on small range of motion of shoulder beginning immediately, but nothing above eye level until 6 weeks post op

### PHYSICAL THERAPY

- **You will be given a physical therapy prescription and a physical therapy protocol at your first post op appointment.** The protocol is a description for you and your physical therapist that details all your restrictions and activities through your entire recovery. Please be sure to give this to your physical therapist.
- Please arrange your post-operative physical therapy appointment. Our office can help you with this if needed. They will guide you in exercises to perform while in the clinic and at home.

Call 864-807-9998 with any questions  
about your post-op instructions.



### SLING/IMMOBILIZER

- You will be put in a sling after surgery
- Sling should be worn the majority of the time
- Keep your elbow position against the pillow and even with your side or in front of this position to minimize stress on the repair.
- You will be wearing the sling for 2 weeks.

### ICE THERAPY

- Icing is very important to decrease swelling and pain and improve mobility.
- Please use ice for 20 minutes each hour over surgical site.
- After 24 hours, continue to use the ice 3-4 times a day, 15-20 minutes each time.
- Be sure to keep clothing or a towel between ice and skin, as placing the ice directly on skin may cause frostbite. DO NOT PLACE DIRECTLY ON SKIN.

### MEDICATIONS

- **If placed, nerve blocks and pain medication injected into the wound will wear off from 8-24 hours after surgery.**
- Recommendation is to take scheduled Tylenol 1000mg three times per day and 800mg ibuprofen three times per day.
- You will be given a narcotic pain medication. This should be taken for breakthrough pain every 8 hours for pain if necessary. Take with a little food.
- **Ice** and elevation will aide in additional pain control
- Take medications as prescribed
- **Do not mix narcotics** with alcohol
- Common side effects of narcotic pain medications include
- Nausea- Take medication with food. If prescribed you may use anti-nausea medication. If nausea persists, call the office to consider having the medication changed.
- Drowsiness
- Constipation – We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation. You will be given a prescription for this.
- **Do not drive a vehicle or operate heavy machinery while on narcotic pain medications**
- **Narcotics and pain medications will not be refilled on weekends or after hours.**
- You will likely be given a prescription for aspirin 325mg to take post-operatively. This is taken only once a day for 4 weeks post-operatively to prevent blood clots. The dosing and duration may change on an individual basis, but it should be reflected in the prescription that you are given.



### POST-OP OFFICE APPOINTMENT

- If the appointment was not arranged prior to surgery, please call the office.
- Your first post-operative visit should be 10-14 days after surgery
- You will likely also follow up at 6, 12, & 18 weeks post op.

### EMERGENCIES OR CONCERNS

- Email Dr. Ratner at [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- Or Call the Office, or go to the nearest emergency room if you have any of the following:
  - Pain worsens or does not go away after pain medication is taken.
  - Any abrupt change in the nature or severity of pain
  - Redness or swelling in your thigh or calf that will not decrease.
  - Redness around incisions
  - Continuous drainage or bleeding from the incision (occasional drainage is expected)
  - Difficulties moving your fingers or extreme pain when moving your fingers
  - Numbness or tingling that does not go away or is getting worse
  - Cold foot or color change in extremity (Please be aware that the skin prep in surgery may have an orange, brown, or blue tint)
  - Develop a fever greater than 101.5 degrees F.
  - Chest pain, shortness of breath, intractable nausea/vomiting, or anything else concerning
  - If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615



# DISTAL RADIUS

## Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

### INITIAL INSTRUCTIONS

- Ice along with pain medicine are your keys to initial pain management.
- After you arrive home, rest the remainder of the day. You may be tired or nauseated from the anesthesia and/or pain medication.
- You will be in a cock-up wrist splint after surgery. You should wear this at all times after surgery.

### DRESSING CHANGE

- Leave the dressing in place until your follow up appointment.
- It is extremely important to keep the surgical site clean and dry at all times to help prevent infection.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.4 degrees F) and drainage from the wound. If you note any of these signs, please call the office immediately

### BATHING

- You may shower **after your surgery** but keep your dressing dry and covered.
- After your stitches are removed, you may shower and clean the wound gently with soap and water **but Do not soak or submerge** the surgical site until the wounds are completely healed (typically 3-4 weeks after surgery).

### ACTIVITY

- May return to **sedentary work ONLY** the day after surgery, if pain is tolerable
- **OK to use a computer.**
- You will be non-weight bearing for 6 weeks and then less than 10lbs until 12 weeks post op
- You can begin to work on range of motion of wrist immediately if pain allows
- You should work on finger range of motion beginning immediately post op. Ideally you will be able to make a full fist and extend your fingers completely within a 2 or 3 days after surgery.

### PHYSICAL THERAPY

- **You will be given a physical therapy prescription and a physical therapy protocol usually at your preoperative appointment.** The protocol is a description for you and your physical therapist that details all of your restrictions and activities throughout your entire recovery. Please be sure to give this to your physical therapist.
- Please arrange your post-operative physical therapy appointment for 1-2 weeks post op. Our office can help you with this if needed.

Call 864-807-9998 with any questions  
about your post-op instructions.



# DISTAL RADIUS

## Post-Op Instructions – American Orthopedics

864-807-9998

### COCK-UP WRIST SPLINT

- You will be put in cock up wrist splint after surgery
- Splint should be worn at all times (except for hygiene and exercises)
- You will usually be in the splint for 6 weeks post-operatively, depending upon your procedure.

### ICE THERAPY

- Icing is very important to decrease swelling and pain and improve mobility.
- Please use ice for 20 minutes at least 3 times per day.
- Be sure to keep clothing or a towel between ice and skin, as placing the ice directly on skin may cause frostbite. DO NOT PLACE DIRECTLY ON SKIN.

### MEDICATIONS

- **If placed, nerve blocks and pain medication injected into the wound will wear off from 8-24 hours after surgery.**
- Recommendation is to take scheduled Tylenol 1000mg three times per day and 800mg ibuprofen three times per day.
- You will be given a narcotic pain medication. This should be taken for breakthrough pain every 8 hours for pain if necessary. Take with a little food.
- **Ice and elevation** will aide in additional pain control
- Take medications as prescribed
- **Do not mix narcotics** with alcohol
- Common side effects of narcotic pain medications include
  - Nausea- Take medication with food. If prescribed you may use anti-nausea medication. If nausea persists, call the office to consider having the medication changed.
  - Drowsiness
  - Constipation - We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation. You will be given a prescription for this.
- **Do not drive a vehicle or operate heavy machinery while on narcotic pain medications**
- **Narcotics and pain medications will not be refilled on weekends or after hours.**
- You will likely be given a prescription for aspirin 325mg to take post-operatively. This is taken only once a day for 4 weeks post-operatively to prevent blood clots. The dosing and duration may change on an individual basis, but it should be reflected in the prescription that you are given.
- We also recommend taking an anti-inflammatory if you are able to tolerate them, such as ibuprofen or Naproxen, unless you are taking blood thinners or instructed not to take the anti-inflammatories by your doctor. Take as directed. Take with food.
- You will be given Ergocalciferol (Vitamin D2) 50,000 units weekly to take for 8 weeks & Calcium 500mg to be taken three times per day for 8 weeks. Both of these medicines aid in bone healing.

Call 864-807-9998 with any questions  
about your post-op instructions.





# DISTAL RADIUS

## Post-Op Instructions – American Orthopedics

864-807-9998

### POST-OP OFFICE APPOINTMENT

- If the appointment was not arranged prior to surgery, please contact the office
- Your first post-operative visit should be 10-14 days after surgery
- Depending on the procedure plan for follow-up visits at 6 weeks, 3 months, and 6 months after surgery.

### EMERGENCIES OR CONCERNS

- Email Dr. Ratner at [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- Or contact the office or go to the nearest emergency room if you have any of the following:
  - Pain worsens or does not go away after pain medication is taken.
  - Any abrupt change in the nature or severity of pain
  - Redness or swelling in your thigh or calf that will not decrease.
  - Redness around incisions
  - Continuous drainage or bleeding from the incision (occasional drainage is expected)
  - Difficulties moving your fingers or extreme pain when moving your fingers
  - Numbness or tingling that does not go away or is getting worse
  - Cold foot or color change in extremity (Please be aware that the skin prep in surgery may have an orange, brown, or blue tint)
  - Develop a fever greater than 101.5 degrees F.
  - Chest pain, shortness of breath, intractable nausea/vomiting, or anything else concerning
  - If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615

Call 864-807-9998 with any questions  
about your post-op instructions.



AMERICAN  
ORTHOPEDICS

# GENERAL Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

## SURGERY TIME

You will be contacted by a nurse from the Operating Room the **DAY BEFORE** your surgery to let you know what time to arrive. Contact numbers are listed if you have not received a call by late afternoon. You will go home the same day (unless otherwise discussed)

## INSURANCE INFO

Dr. Ratner's office will precertify your surgery with your insurance company. Please provide us with the most up to date information regarding your insurance. Your benefits will be verified. If you are under Workman's Compensation, written authorization will be obtained before scheduling surgery.

## PREOPERATIVE TESTING

Dr. Ratner will let you know what pre-operative testing is required when you schedule your surgery. This may include basic bloodwork and/or seeing your medical doctor or cardiologist. If you require bloodwork, you do NOT need to fast. For anesthesia purposes the information **MUST BE** completed and faxed to the office **AT LEAST ONE WEEK PRIOR TO SURGERY**. If the information is not received or incomplete, your surgery may be cancelled.

## PLAN TIME OFF WORK/SCHOOL

You will likely need time off work/school. This varies based on the amount of time you spend on your feet, lifting requirements, commuting etc. Please submit any necessary disability paperwork/request necessary documentation from the office prior to surgery. You may fax the requested paperwork to the office. Please include the **ADDRESS OR FAX NUMBER** where you would like this submitted and the **DATE** you would like to return to work. Please plan ahead and allow 7-10 days for completion.

## PHYSICAL THERAPY

Depending on the surgery you may be prescribed physical therapy. Call ahead to set up your PT appointment. You will be provided with the necessary paperwork to give your therapist on the day of surgery.

**Call 864-807-9998 with any questions  
about your post-op instructions.**



### EQUIPMENT

You may be provided with a brace (depending on the specifics of your surgical procedure), crutches/walker, and/or sling on surgery day. If you have your own crutches or walker, please bring them along so they can be adjusted appropriately.

### MEDICATIONS

Stop: NAIDs (Motrin, Advil, Ibuprofen, Aleve, Naproxen, Mobic, Aspirin), Herbal supplements and vitamins seven days prior to surgery.

Limit: Use of narcotic pain medications (if you take them). This will make it easier to manage post op pain. (examples: Norco, Oxycodone, Percocet)

Contact your primary doctor: If you take Coumadin, Lovenox, Eliquis, Xarelto, Plavix or any other blood thinners. Your doctor will need to help manage starting and stopping these medicines. Please make Dr. Ratner aware if you take these medications.

Morning of surgery: Anesthesiologist will typically discuss which medicines you should or shouldn't take on day of surgery.

DO NOT take the following medication the morning of surgery:

- Diuretics (or any blood pressure medications with a diuretic component)
- Oral diabetic medications
- Regular (short acting) Insulin

DO NOT eat or drink anything after midnight.

Do not smoke after midnight.

Meds can be taken with a small sip of water.

Wash with HIBICLEANSE soap and repeat the morning of surgery (available at Walgreens or CVS).



### WHAT TO BRING WITH YOU TO SURGERY:

- Comfortable clothes to wear home (if you need a brace it will go over your clothes)
- A family member or friend to drive you home

### POST-OP OFFICE APPOINTMENT

- If the appointment was not arranged prior to surgery, please contact the office
- Your first post-operative visit will be given to you in office prior to surgery
- Depending on the procedure plan for follow-up visits at 3 weeks, 6 weeks, 3 months, and 12 months after surgery.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



drewratner@theamericanorthopedics.com



www.TheAmericanOrthopedics.com



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615



# HIP ARTHROSCOPY

## Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

### DRESSING CHANGE

- Leave the dressing in place for 48 hours following surgery
- You may now apply a new, clean, dry dressing at least once a day.
  - Place sterile gauze over the incisions and then secure with tape
- After 5 days, you can leave the incisions open to air as long as they are dry and not draining.
- It is extremely important to keep the surgical site clean and dry at all times to help prevent infection.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.5 degrees F) and drainage from the wound. If you note any of these signs, please call the office immediately
- It is extremely important to keep the surgical site clean and dry at all times to help prevent infection.

### BATHING

- You may shower **5 days after your surgery** and get your incisions wet as long as the wounds are dry and not draining. Let the water run down over the incisions but do not rub or scrub them.
- If the wounds are draining, then wait until they are dry before getting them wet.
- **Do not soak or submerge** the surgical site until the wounds are completely healed (typically 3-4 weeks after surgery).

### ACTIVITY

- Rest and elevate your leg for the first 24 hours.
- Use a pillow under your calf and ankle. **Do not place a pillow under your knee or heel.**
- Use your crutches while walking. You may put your operative foot down for balance but are **not allowed to put more 50% of your weight on it.** You will typically be on crutches for 3 weeks post-operatively
- Do not let your **leg externally rotate for 3 weeks** post-operatively to protect your capsular repair
- **You will be discharged with a physical therapy prescription and a physical therapy protocol.** The protocol is a description for you and your physical therapist that details all of your restrictions and activities through your entire recovery. Please be sure to give this to your physical therapist.
- Please arrange your post-operative physical therapy appointment. Our office can help you with this if needed. You may start as soon as the day following your surgery. They will guide you in exercises to perform while in the clinic and at home. Avoid long periods of sitting without the leg elevated, or long-distance travel for 2 weeks

Call 864-807-9998 with any questions  
about your post-op instructions.



 AMERICAN  
ORTHOPEDICS



## PHYSICAL THERAPY

- You will be discharged with a physical therapy prescription and a physical therapy protocol. The protocol is a description for you and your physical therapist that details all of your restrictions and activities through your entire recovery. Please be sure to give this to your physical therapist.
- Please arrange your post-operative physical therapy appointment. Our office can help you with this if needed. You may start as soon as the day following your surgery, but most prefer the week after surgery. They will guide you in exercises to perform while in the clinic and at home.

## STATIONARY BIKE

- If you have access to a stationary bike, it is good for your hip mobility to do 30 mins of stationary bike per day with no resistance and the seat lowered down such that you never fully extend the hip.

## ICE THERAPY

- Icing is very important to decrease swelling and pain and improve mobility.
- Please use ice for 20 minutes each hour over surgical site.
- After 24 hours, continue to use the ice 3-4 times a day, 15-20 minutes each time.
- Be sure to keep clothing or a towel between ice and skin, as placing the ice directly on skin may cause frostbite. **DO NOT PLACE DIRECTLY ON SKIN.**

## MEDICATIONS

- **If placed, nerve blocks and pain medication injected into the wound will wear off from 8-24 hours after surgery.**
- You will be given a narcotic pain medication. This should be taken as needed every 4-6 hours for pain. Take with a little food.
- Narcotic pain medications **will not alleviate all of your discomfort**
- **Ice and elevation** will aide in additional pain control
- Take medications as prescribed
- **Do not mix narcotics** with alcohol
- Common side effects of narcotic pain medications include
  - Nausea- Take medication with food. If prescribed you may use anti-nausea medication. If nausea persists, call the office to consider having the medication changed.
  - Drowsiness
  - Constipation - We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation. You will be given a prescription for this.
- **Do not drive a vehicle or operate heavy machinery while on narcotic pain medications**
- Narcotic medications cannot be called into the pharmacy. They will require a hand written prescription from the office. Please monitor the amount of pain medications you have remaining in order to not run out.



# HIP ARTHROSCOPY

## Post-Op Instructions – American Orthopedics

864-807-9998

- Narcotics and pain medications will not be refilled on weekends or after hours.
- You will likely be given a prescription for aspirin 325mg to take post-operatively. This is taken only once a day for 4 weeks post-operatively to prevent blood clots. The dosing and duration may change on an individual basis, but it should be reflected in the prescription that you are given.
- You will also be given a prescription for **NAPROXEN 500mg** to be taken twice a day. This is really prescribed **to prevent extra bone from forming in your soft tissues (heterotopic ossification)** but also works to help minimize pain. Do not take if you are taking blood thinners or if instructed not to take the anti-inflammatories by your doctor. Take as directed. Take with food. Stop taking if you get any heartburn symptoms of stomach upset.

## POST-OP OFFICE APPOINTMENT

- If the appointment was not arranged prior to surgery, please contact the office
- Your first post-operative visit will be scheduled in the office prior to surgery.
- Depending on the procedure plan for follow-up visits at 6 weeks, 3 months, and 6 months after surgery.

## EMERGENCIES OR CONCERNS

- Email Dr. Ratner at [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- Or Contact us or go to the nearest emergency room if you have any of the following:
  - Pain worsens or does not go away after pain medication is taken.
  - Any abrupt change in the nature or severity of pain
  - Redness or swelling in your thigh or calf that will not decrease.
  - Redness around incisions
  - Continuous drainage or bleeding from the incision (occasional drainage is expected)
  - Difficulties moving your fingers or extreme pain when moving your fingers
  - Numbness or tingling that does not go away or is getting worse
  - Cold foot or color change in extremity (Please be aware that the skin prep in surgery may have an orange, brown, or blue tint)
  - Develop a fever greater than 101.5 degrees F.
  - Chest pain, shortness of breath, intractable nausea/vomiting, or anything else concerning
  - If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615

Call 864-807-9998 with any questions  
about your post-op instructions.



AMERICAN  
ORTHOPEDICS

# KNEE ARTHROSCOPY

## Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

## INITIAL INSTRUCTIONS

- Ice and elevation along with pain medicine are your keys to initial pain management.
- After you arrive home, rest the remainder of the day. You may be tired or nauseated from the anesthesia and/or pain medication.
- You will be given crutches upon discharge. Continue to use until you can walk without a significant limp.
- If you were fit for, supplied with, or directed to use a brace, be sure to use it as directed.

## DRESSING CHANGE

- Leave the dressing in place for 48 hours following surgery or until you visit physical therapy.
- After this, remove the dressing making sure to leave the sutures of the incisions in place.
- You may apply a new, clean, dry dressing at least once a day. Oftentimes one small band aid over each incision is all that is needed.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.4 degrees F) and drainage from the wound. If you note any of these signs, please call the office immediately.

## BATHING

- You may shower immediately but keep incisions dry. **5 days after your surgery**, you can get your incisions wet as long as the wounds are dry and not draining. Let the water run down over the incisions but do not rub or scrub them.
- If the wounds are draining, then wait until they are dry before getting them wet.
- **Do not soak or submerge** the surgical site until the wounds are completely healed (typically 3-4 weeks after surgery).

## ACTIVITY

- Rest and elevate your leg for the first 24 hours.
- Use a pillow under your calf and ankle. Do not place a pillow under your knee or heel.
- Use your crutches while walking. Unless instructed otherwise, you may be weightbearing as tolerated on your leg as you feel comfortable while wearing the brace provided.
- It is very important to get your leg as straight as possible, as soon as possible.

Call 864-807-9998 with any questions  
about your post-op instructions.



# KNEE ARTHROSCOPY

## Post-Op Instructions – American Orthopedics

864-807-9998

- You may be discharged with a physical therapy prescription.
- If you are instructed to go to physical therapy, please arrange your post-operative physical therapy appointment. Our office can help you with this if needed. You may start as soon as the day following your surgery. They will guide you in exercises to perform while in the clinic and at home.
- Avoid long periods of sitting without the leg elevated, or long-distance travel for 2 weeks

## ICE THERAPY

- Icing is very important to decrease swelling and pain and improve mobility.
- Please use ice for 20 minutes each hour over surgical site.
- After 24 hours, continue to use the ice 3-4 times a day, 15-20 minutes each time.
- Be sure to keep clothing or a towel between ice and skin, as placing the ice directly on skin may cause frostbite. **DO NOT PLACE DIRECTLY ON SKIN.**

## MEDICATIONS

- Recommendation is to take scheduled Tylenol 1000mg three times per day and 800mg ibuprofen three times per day.
- You will be given a narcotic pain medication. This should be taken for breakthrough pain every 8 hours for pain if necessary. Take with a little food
- **Ice and elevation** will aide in additional pain control
- Take medications as prescribed
- **Do not mix narcotics** with alcohol
- Common side effects of narcotic pain medications include
  - Nausea- Take medication with food. If prescribed you may use anti-nausea medication. If nausea persists, call the office to consider having the medication changed.
  - Drowsiness
  - Constipation – We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation. You will be given a prescription for this.
- **Do not drive a vehicle or operate heavy machinery while on narcotic pain medications**
- **Narcotics and pain medications will not be refilled on weekends or after hours.**
- You will likely be given a prescription for aspirin 325mg to take post-operatively. This is taken only once a day for 4 weeks post-operatively to prevent blood clots. The dosing and duration may change on an individual basis, but it should be reflected in the prescription that you are given.

Call 864-807-9998 with any questions  
about your post-op instructions.



# KNEE ARTHROSCOPY

## Post-Op Instructions – American Orthopedics

864-807-9998

### POST-OP OFFICE APPOINTMENT

- If the appointment was not arranged prior to surgery, please contact the office
- Your first post-operative visit will be scheduled in office prior to surgery
- Depending on the exact procedure plan for follow-up visits at 2 weeks, 6 weeks, 3 months, and 6 months after surgery.

### EMERGENCIES OR CONCERNS

- Email Dr. Ratner at [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- Or contact us or go to the nearest emergency room if you have any of the following:
- Pain worsens or does not go away after pain medication is taken.
- Any abrupt change in the nature or severity of pain
- Redness or swelling in your thigh or calf that will not decrease.
- Redness around incisions
- Continuous drainage or bleeding from the incision (occasional drainage is expected)
- Difficulties moving your toes or extreme pain when moving your toes
- Numbness or tingling that does not go away or is getting worse
- Cold foot or color change in extremity (Please be aware that the skin prep in surgery may have an orange, brown, or blue tint)
- Develop a fever greater than 101.5 degrees F.
- Chest pain, shortness of breath, intractable nausea/vomiting, or anything else concerning
- If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

**DREW  
RATNER, MD**

ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615

Call 864-807-9998 with any questions  
about your post-op instructions.



AMERICAN  
ORTHOPEDICS

Page 3



# FRACTURA DE OLÉCRANON

## Instrucciones postoperatorias

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

### INSTRUCCIONES INICIALES

- El hielo junto con los analgésicos son la clave para el control inicial del dolor.
- Cuando llegue a casa, descanse el resto del día. Puede estar cansado o tener náusea por la anestesia o los analgésicos.
- Usted estará en un cabestrillo después de la cirugía.

### CAMBIO DEL VENDAJE

- Deje el vendaje en su sitio hasta la cita de seguimiento.
- Es muy importante mantener la zona quirúrgica limpia y seca en todo momento para evitar infecciones.
- Las señales de infección incluyen enrojecimiento, hinchazón, aumento del dolor, calor, fiebre (superior a 101.4 grados F) y supuración de la herida. Si observa alguna de estas señales, llame inmediatamente al consultorio.

### BAÑO

- Puede ducharse **después de la cirugía**, pero mantenga seco el vendaje.
- Después de que le retiren el vendaje en la primera cita postoperatoria, puede ducharse y limpiar la herida suavemente con agua y jabón, pero **no sumerja ni empape** el área quirúrgica hasta que las heridas estén completamente cicatrizadas (normalmente 3-4 semanas después de la cirugía).

### ACTIVIDAD

- Puede volver al **trabajo SOLAMENTE sedentario** 3-4 días después de la cirugía, si el dolor es tolerable.
- **Está bien usar la computadora.**
- Usted estará sin soporte de peso durante 6 semanas y luego menos de 10 libras hasta 12 semanas después de la operación.
- Comenzará a trabajar el rango de movimiento del codo inmediatamente después de la cirugía.
- Debe trabajar el rango de movimiento de los dedos, muñecas y hombros inmediatamente después de la operación.

### FISIOTERAPIA

- **Se le entregará una prescripción para fisioterapia y un protocolo de fisioterapia después de su primera visita postoperatoria.** El protocolo es una descripción para usted y su fisioterapeuta que detalla sus restricciones y actividades a lo largo de toda su recuperación. Asegúrese de entregárselo a su fisioterapeuta.
- Agende su cita de fisioterapia postoperatoria. Nuestra oficina puede ayudarle con esto si es necesario. Usted puede comenzar después de su primera cita postoperatoria. Le guiarán en los ejercicios a realizar mientras esté en la clínica y en casa.

Llame al 864-807-9998 para preguntas sobre sus instrucciones postoperatorias.



# FRACTURA DE OLÉCRANON

Instrucciones postoperatorias – American Orthopedics

864-807-9998

## TERAPIA DE HIELO

- La aplicación de hielo es muy importante para disminuir la inflamación y el dolor y mejorar la movilidad.
- Utilice hielo durante 20 minutos, 3-4 veces al día sobre el codo
- Asegúrese de mantener ropa o una toalla entre el hielo y la piel, ya que colocar el hielo directamente sobre la piel puede causar quemadura por frío. **NO LO COLOQUE DIRECTAMENTE SOBRE LA PIEL.**

## MEDICAMENTOS

- **Si se colocan, los bloqueos nerviosos y los analgésicos inyectados en la herida desaparecerán**
- de 8 a 24 horas después de la cirugía.
- Se le dará un analgésico opiode. Debe tomarlo cada 4-6 horas para el dolor. Tómelo con un poco de comida.
- Los analgésicos opiodes no aliviarán todas sus molestias.
- **El hielo y la elevación** ayudarán a controlar el dolor.
- Tomar los medicamentos según lo recetado.
- **No mezclar opiodes** con alcohol.
- Los efectos secundarios habituales de los analgésicos opiodes son los siguientes
- Náusea- Tome el medicamento con alimentos. Si se lo recetan, puede utilizar medicamento contra la náusea. Si la náusea persiste, llame al consultorio para que le cambien el medicamento.
- Somnolencia
- Estreñimiento – Le recomendamos comprar un ablandador de heces de venta libre (como colace) para tomarlo según las indicaciones mientras esté tomando los opiodes para prevenir el estreñimiento. Se le dará una receta para esto.
- **No conduzca vehículos ni maneje maquinaria pesada mientras esté tomando analgésicos opiodes.**
- Los medicamentos opiodes no pueden recetarse llamando a la farmacia. Tienen que ser recetados por el consultorio. Por favor, lleve una cuenta de la cantidad de analgésicos que le quedan para que no se le acaben.
- **Los opiodes y analgésicos no se abastecerán los fines de semana ni fuera del horario laboral.**
- Es probable que le receten aspirina 325 mg para el postoperatorio. Ésta se toma una sola vez al día durante 4 semanas para prevenir la formación de coágulos. La dosis y la duración pueden cambiar de forma individual, pero deben reflejarse en la receta que le den.
- También le recomendamos que tome un antiinflamatorio si puede tolerarlo, como Motrin o Naproxeno, a menos que esté usando anticoagulantes o su médico le haya indicado que no tome antiinflamatorios. Tómelo según las indicaciones. Tómelo con alimentos.
- Se le administrarán 50.000 unidades semanales de ergocalciferol (vitamina D2) durante 8 semanas y 500 mg de calcio tres veces al día durante 8 semanas. Ambos medicamentos contribuyen a la curación ósea.

Llame al 864-807-9998 para preguntas sobre sus instrucciones postoperatorias.



AMERICAN  
ORTHOPEDICS

Página 2

# FRACTURA DE OLÉCRANON

Instrucciones postoperatorias – American Orthopedics

864-807-9998

## CITA POSTOPERATORIA

- Si la cita no se agendó antes de la cirugía, póngase en contacto con el consultorio.
- Su primera visita postoperatoria se programará en el consultorio antes de la cirugía.
- Dependiendo del procedimiento, planee visitas de seguimiento a las 6 semanas, 3 meses y 6 meses después de la cirugía.

## EMERGENCIAS O PREOCUPACIONES

- Envíe un correo electrónico al Dr. Ratner a [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- O póngase en contacto con nosotros o vaya a la sala de urgencias más cercana si presenta alguno de los siguientes síntomas:
  - El dolor empeora o no desaparece después de tomar analgésicos.
  - Cualquier cambio brusco en la naturaleza o gravedad del dolor
  - Enrojecimiento o hinchazón en el muslo o la pantorrilla que no disminuye.
  - Enrojecimiento alrededor de las incisiones.
  - Drenaje o sangrado continuo de la incisión (se espera que haya un drenaje ocasional).
  - Dificultades para mover los dedos o dolor extremo al moverlos.
  - Entumecimiento u hormigueo que no desaparece o que empeora.
  - Pie frío o cambio de color en la extremidad (tenga en cuenta que la preparación de la piel en la cirugía puede tener un tinte anaranjado, café o azul).
  - Desarrolla fiebre superior a 101.5 grados F.
  - Dolor en el pecho, falta de aire, náusea/vómito intratable o cualquier otro síntoma preocupante.
  - Si tiene una urgencia que requiera atención inmediata, diríjase a la sala de urgencias más cercana.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615

Llame al 864-807-9998 para preguntas  
sobre sus instrucciones postoperatorias.



AMERICAN  
ORTHOPEDICS

# OLECRANON

## Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

### INITIAL INSTRUCTIONS

- Ice along with pain medicine are your keys to initial pain management.
- After you arrive home, rest the remainder of the day. You may be tired or nauseated from the anesthesia and/or pain medication.
- You will be in a sling after surgery.

### DRESSING CHANGE

- Leave the dressing in place until your follow up appointment.
- It is extremely important to keep the surgical site clean and dry at all times to help prevent infection.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.4 degrees F) and drainage from the wound. If you note any of these signs, please call the office immediately

### BATHING

- You may shower **after your surgery** but keep your dressing dry.
- After your bandage is removed at the first post op appointment, you may shower and clean the wound gently with soap and water but **Do not soak or submerge** the surgical site until the wounds are completely healed (typically 3-4 weeks after surgery).

### ACTIVITY

- May return to **sedentary work ONLY** the day after surgery, if pain is tolerable
- **OK to use computer.**
- You will be non-weight bearing for 6 weeks and then less than 10lbs until 12 weeks post op
- You will begin to work on range of motion of elbow immediately after surgery
- You should work on finger, wrist, and shoulder range of motion beginning immediately post op

### PHYSICAL THERAPY

- **You will be given a physical therapy prescription and a physical therapy protocol after your first post op visit.** The protocol is a description for you and your physical therapist that details your restrictions and activities through your entire recovery. Please be sure to give this to your physical therapist.

Call 864-807-9998 with any questions  
about your post-op instructions.



- Please arrange your post-operative physical therapy appointment. Our office can help you with this if needed. You will begin after your first post op appointment. They will guide you in exercises to perform while in the clinic and at home.

## ICE THERAPY

- Icing is very important to decrease swelling and pain and improve mobility.
- Please use ice for 20 minutes, 3-4 times per day over the elbow
- Be sure to keep clothing or a towel between ice and skin, as placing the ice directly on skin may cause frostbite. **DO NOT PLACE DIRECTLY ON SKIN.**

## MEDICATIONS

- **If placed, nerve blocks and pain medication injected into the wound will wear off from 8-24 hours after surgery.**
- Recommendation is to take scheduled Tylenol 1000mg three times per day and 800mg ibuprofen three times per day.
- You will be given a narcotic pain medication. This should be taken for breakthrough pain every 8 hours for pain if necessary. Take with a little food
- **Ice and elevation** will aide in additional pain control
- Take medications as prescribed
- **Do not mix narcotics** with alcohol
- Common side effects of narcotic pain medications include
- Nausea- Take medication with food. If prescribed you may use anti-nausea medication. If nausea persists, call the office to consider having the medication changed.
- Drowsiness
- Constipation – We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation. You will be given a prescription for this.
- **Do not drive a vehicle or operate heavy machinery while on narcotic pain medications**
- **Narcotics and pain medications will not be refilled on weekends or after hours.**
- You will likely be given a prescription for aspirin 325mg to take post-operatively. This is taken only once a day for 4 weeks post-operatively to prevent blood clots. The dosing and duration may change on an individual basis, but it should be reflected in the prescription that you are given.
- You will be given Ergocalciferol (Vitamin D2) 50,000 units weekly to take for 8 weeks & Calcium 500mg to be taken three times per day for 8 weeks. Both of these medicines aid in bone healing.





### POST-OP OFFICE APPOINTMENT

- If the appointment was not arranged prior to surgery, please contact the office
- Your first post-operative visit will be scheduled in office prior to surgery
- Depending on the procedure plan for follow-up visits at 2 weeks, 6 weeks, 3 months, and 6 months after surgery.

### EMERGENCIES OR CONCERNS

- Email Dr. Ratner at [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- Or Contact us or go to the nearest emergency room if you have any of the following:
  - Pain worsens or does not go away after pain medication is taken.
  - Any abrupt change in the nature or severity of pain
  - Redness or swelling in your thigh or calf that will not decrease.
  - Redness around incisions
  - Continuous drainage or bleeding from the incision (occasional drainage is expected)
  - Difficulties moving your fingers or extreme pain when moving your fingers
  - Numbness or tingling that does not go away or is getting worse
  - Cold foot or color change in extremity (Please be aware that the skin prep in surgery may have an orange, brown, or blue tint)
  - Develop a fever greater than 101.5 degrees F.
  - Chest pain, shortness of breath, intractable nausea/vomiting, or anything else concerning
  - If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615



# PROXIMAL HUMERUS

## Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

### INITIAL INSTRUCTIONS

- Ice along with pain medicine are your keys to initial pain management.
- After you arrive home, rest the remainder of the day. You may be tired or nauseated from the anesthesia and/or pain medication.
- You will be in a sling after surgery.

### DRESSING CHANGE

- Leave the dressing in place until your follow up appointment.
- It is extremely important to keep the surgical site clean and dry at all times to help prevent infection.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.4 degrees F) and drainage from the wound. If you note any of these signs, please call the office immediately

### BATHING

- You may shower **after your surgery** but keep your dressing dry.
- After your bandage is removed at the first post op appointment, you may shower and clean the wound gently with soap and water but **Do not soak or submerge** the surgical site until the wounds are completely healed (typically 3-4 weeks after surgery).

### ACTIVITY

- May return to **sedentary work ONLY** the day after surgery, if pain is tolerable
- **OK to use computer.**
- You will be non-weight bearing for 6 weeks and then less than 10lbs until 12 weeks post op
- You will begin to work on range of motion of shoulder with pendulum exercises beginning immediately. Shoulder range of motion is allowed as long as you can see your hand.
- You should work on finger, wrist, and elbow range of motion beginning immediately post op

### PHYSICAL THERAPY

- **You will be given a physical therapy prescription and therapy protocol before surgery.** The protocol is a description for you and your physical therapist that details all of your restrictions and activities through your entire recovery. Please be sure to give this to your physical therapist.

Call 864-807-9998 with any questions  
about your post-op instructions.



# PROXIMAL HUMERUS

## Post-Op Instructions – American Orthopedics

864-807-9998

- Please arrange your post-operative physical therapy appointment. Our office can help you with this if needed. They will guide you in exercises to perform while in the clinic and at home.

## ICE THERAPY

- Icing is very important to decrease swelling and pain and improve mobility.
- Please use ice for 20 minutes, 3-4 times per day over the shoulder
- Be sure to keep clothing or a towel between ice and skin, as placing the ice directly on skin may cause frostbite. DO NOT PLACE DIRECTLY ON SKIN.

## MEDICATIONS

- **If placed, nerve blocks and pain medication injected into the wound will wear off from 8-24 hours after surgery.**
- Recommendation is to take scheduled Tylenol 1000mg three times per day and 800mg ibuprofen three times per day.
- You will be given a narcotic pain medication. This should be taken for breakthrough pain every 8 hours for pain if necessary. Take with a little food.
- **Ice and elevation** will aid in additional pain control
- Take medications as prescribed
- **Do not mix narcotics** with alcohol
- Common side effects of narcotic pain medications include
- Nausea- Take medication with food. If prescribed you may use anti-nausea medication. If nausea persists, call the office to consider having the medication changed.
- Drowsiness
- Constipation – We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation. You will be given a prescription for this.
- **Do not drive a vehicle or operate heavy machinery while on narcotic pain medications**
- **Narcotics and pain medications will not be refilled on weekends or after hours.**
- You will likely be given a prescription for aspirin 325mg to take post-operatively. This is taken only once a day for 4 weeks post-operatively to prevent blood clots. The dosing and duration may change on an individual basis, but it should be reflected in the prescription that you are given.
- You will be given Ergocalciferol (Vitamin D2) 50,000 units weekly to take for 8 weeks & Calcium 500mg to be taken three times per day for 8 weeks. Both of these medicines aid in bone healing.

Call 864-807-9998 with any questions  
about your post-op instructions.



# PROXIMAL HUMERUS

## Post-Op Instructions – American Orthopedics

864-807-9998

### POST-OP OFFICE APPOINTMENT

- If the appointment was not arranged prior to surgery, please contact the office
- Your first post-operative visit should be 10-14 days after surgery
- Depending on the procedure plan for follow-up visits at 2 weeks, 6 weeks, 3 months, and 6 months after surgery.

### EMERGENCIES OR CONCERNS

- Email Dr. Ratner at [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- Or contact us or go to the nearest emergency room if you have any of the following:
  - Pain worsens or does not go away after pain medication is taken.
  - Any abrupt change in the nature or severity of pain
  - Redness or swelling in your thigh or calf that will not decrease.
  - Redness around incisions
  - Continuous drainage or bleeding from the incision (occasional drainage is expected)
  - Difficulties moving your fingers or extreme pain when moving your fingers
  - Numbness or tingling that does not go away or is getting worse
  - Cold foot or color change in extremity (Please be aware that the skin prep in surgery may have an orange, brown, or blue tint)
  - Develop a fever greater than 101.5 degrees F.
  - Chest pain, shortness of breath, intractable nausea/vomiting, or anything else concerning
  - If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615

Call 864-807-9998 with any questions  
about your post-op instructions.



AMERICAN  
ORTHOPEDICS

# QUAD-PATELLA TENDON

## Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

### INITIAL INSTRUCTIONS

- Ice and elevation along with pain medicine are your keys to initial pain management.
- After you arrive home, rest the remainder of the day. You may be tired or nauseated from the anesthesia and/or pain medication.
- You will be given crutches upon discharge. Continue to use until you can walk without a significant limp.
- You will be in a brace locked in extension after surgery. It is important to not bend your knee for 4 weeks post op.

### DRESSING

- Leave the dressing in place until your follow up appointment.
- It is always extremely important to keep the surgical site clean and dry to help prevent infection.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.4 degrees F) and drainage from the wound. If you note any of these signs, please call the office

### BATHING

- You may take a shower after surgery but make sure you don't get the dressings wet. Please cover with plastic or Saran Wrap.
- Do not soak or submerge the surgical site until the wounds are completely healed (typically 3-4 weeks after surgery).

### ACTIVITY

- Rest and elevate your leg for the first 24 hours.
- Use a pillow under your calf and ankle. Do not place a pillow under your knee
- Use crutches, can or walker initially. You will be weightbearing as tolerated on your leg with your leg locked completely straight in your brace.
- It is very important to get your leg as straight as possible, as soon as possible.
- It is your responsibility to keep your leg straight. The brace is only there to help keep it straight.
- You will be discharged with a physical therapy prescription and a physical therapy protocol. The protocol is a description for you and your physical therapist that details all your restrictions and activities through your entire recovery. Please be sure to give this to your physical therapist.
- Please arrange your post-operative physical therapy appointment. Our office can help you with this if needed. They will guide you in exercises to perform while in the clinic and at home.
- Avoid long periods of sitting without the leg elevated, or long-distance travel for 2 weeks

**Call 864-807-9998 with any questions  
about your post-op instructions.**



# QUAD-PATELLA TENDON

## Post-Op Instructions – American Orthopedics

864-807-9998

### BRACING

- You will be put in a hinged knee brace after surgery.
- You are always to remain in the brace except to shower until instructed otherwise by your therapist or physician.
- The brace will be locked in full extension following surgery. You may be instructed to unlock the brace to allow range of motion while in the brace. The range of motion settings should not be adjusted unless you are instructed to do so.

### ICE THERAPY

- Icing is very important to decrease swelling and pain and improve mobility.
- Please use ice for 20 minutes each hour over surgical site.
- After 24 hours, continue to use the ice 3-4 times a day, 15-20 minutes each time.
- Be sure to keep clothing or a towel between ice and skin, as placing the ice directly on skin may cause frostbite. **DO NOT PLACE DIRECTLY ON SKIN.**

### MEDICATIONS

- **If placed, nerve blocks and pain medication injected into the wound will wear off from 8-24 hours after surgery.**
- Recommendation is to take scheduled Tylenol 1000mg three times per day and 800mg ibuprofen three times per day.
- You will be given a narcotic pain medication. This should be taken for breakthrough pain every 8 hours for pain if necessary. Take with a little food.
- **Ice and elevation** will aide in additional pain control
- Take medications as prescribed
- **Do not mix narcotics** with alcohol
- Common side effects of narcotic pain medications include
  - Nausea- Take medication with food. If prescribed you may use anti-nausea medication. If nausea persists, call the office to consider having the medication changed.
  - Drowsiness
  - Constipation – We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation. You will be given a prescription for this.
- **Do not drive a vehicle or operate heavy machinery while on narcotic pain medications**
- **Narcotics and pain medications will not be refilled on weekends or after hours.**
- You will likely be given a prescription for aspirin 325mg to take post-operatively. This is taken only once a day for 4 weeks post-operatively to prevent blood clots. The dosing and duration may change on an individual basis, but it should be reflected in the prescription that you are given.

Call 864-807-9998 with any questions about your post-op instructions.





# QUAD-PATELLA TENDON

Post-Op Instructions – American Orthopedics

864-807-9998

## POST-OP OFFICE APPOINTMENT

- If the appointment was not arranged prior to surgery, please contact the office.
- Your first post-operative visit will be given to you in the office prior to surgery.
- Depending on the procedure plan for follow-up visits at 2 weeks, 6 weeks, 3 months, and 6 months after surgery.

## EMERGENCIES OR CONCERNS

- Email Dr. Ratner at [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- Or contact us or go to the nearest emergency room if you have any of the following:
  - Pain worsens or does not go away after pain medication is taken.
  - Any abrupt change in the nature or severity of pain
  - Redness or swelling in your thigh or calf that will not decrease.
  - Redness around incisions
  - Continuous drainage or bleeding from the incision (occasional drainage is expected)
  - Difficulties moving your toes or extreme pain when moving your toes
  - Numbness or tingling that does not go away or is getting worse
  - Cold foot or color change in extremity (Please be aware that the skin prep in surgery may have an orange, brown, or blue tint)
  - Develop a fever greater than 101.5 degrees F.
  - Chest pain, shortness of breath, intractable nausea/vomiting, or anything else concerning
  - If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615

Call 864-807-9998 with any questions  
about your post-op instructions.



AMERICAN  
ORTHOPEDICS

# SHOULDER ARTHROPLASTY

## Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

### INITIAL INSTRUCTIONS

- Ice and elevation along with pain medicine are your keys to initial pain management.
- After you arrive home, rest the remainder of the day. You may be tired or nauseated from the anesthesia and/or pain medication.
- You will be placed into a sling postoperatively. Wear the sling at all times. For a reverse total shoulder arthroplasty, you should wear that sling for 2-3 weeks (ie until first post op appointment). For an anatomic total shoulder arthroplasty, you will be in the sling for 6 weeks.

### WOUND CARE

- Leave the dressing in place for 3 weeks following surgery. There is a glue dressing over the incision. If the outer dressing must be changed, leave the glue dressing in place
- It is extremely important to always keep the surgical site clean and dry to help prevent infection.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.4 degrees F) and drainage from the wound. If you note any of these signs, please call the office immediately

### BATHING/SHOWERING

- You may shower but make sure the bandage is covered with saran wrap or some other impermeable layer.
- **Do not soak or submerge** the surgical site until the wounds are completely healed (typically 3-4 weeks after surgery).

### ACTIVITY

- The sling can be removed, and the elbow and hand can be moved as tolerated. Light shoulder range of motion can be performed as long as the hand is always visible.
- Physical therapy will come to your house for the first 3 weeks and then you will go as an outpatient.

### MEDICATIONS

- You will be given Celebrex 200mg to take twice per day. This is an anti-inflammatory. You should take it every day for the first 30 days.
- You will also be given Tylenol (Acetaminophen) 1000mg which you will take 3 times per day for the first 30 days
- For breakthrough pain, you will be given a narcotic pain medication. This should be taken as needed every 8 hours for pain. Take with a little food.
- **Ice and elevation** will aide in additional pain control
- Take medications as prescribed
- **Do not mix narcotics** with alcohol

Call 864-807-9998 with any questions  
about your post-op instructions.



# SHOULDER ARTHROPLASTY

## Post-Op Instructions – American Orthopedics

864-807-9998

- Common side effects of narcotic pain medications include
- Nausea- Take medication with food. If prescribed you may use anti-nausea medication. If nausea persists, call the office to consider having the medication changed.
- Drowsiness
- Constipation – We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation. You will be given a prescription for this.
- **Do not drive a vehicle or operate heavy machinery while on narcotic pain medications**
- You will likely be given a prescription for aspirin 325mg to take post-operatively. This is taken only once a day for 30 days post-operatively to prevent blood clots. The dosing and duration may change on an individual basis, but it should be reflected in the prescription that you are given. If you are on a blood thinner at baseline, then you will not take aspirin in addition.

## POST-OP OFFICE APPOINTMENT

- Your first post-operative visit should be scheduled in the office prior to surgery. If the appointment was not arranged prior to surgery, please contact the office
- You will be seen for follow up visits at 3 weeks, 8 weeks, 12 weeks, and 1 year after surgery

## EMERGENCIES OR CONCERNS

- Email Dr. Ratner at [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- Or Contact us or go to the nearest emergency room if you have any of the following:
  - Any abrupt change in the nature or severity of pain
  - Redness around incisions
  - Continuous drainage or bleeding from the incision (occasional drainage is expected)
  - Develop a fever greater than 101.5 degrees F.
  - Chest pain, shortness of breath, intractable nausea/vomiting, or anything else concerning
  - If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615

Call 864-807-9998 with any questions  
about your post-op instructions.



AMERICAN  
ORTHOPEDICS

# ARTROSCOPIA DE HOMBRO

## Instrucciones postoperatorias

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

### INSTRUCCIONES INICIALES

- El hielo junto con los analgésicos son la clave para el tratamiento inicial del dolor.
- Cuando llegue a casa, descanse el resto del día. Puede estar cansado o tener náusea por la anestesia y/o la medicina para el dolor.
- Llevará puesto un cabestrillo después de la cirugía. Podría llevar puesto este cabestrillo hasta 6 semanas después de la cirugía, dependiendo de su procedimiento.

### CAMBIO DE VENDAJE

- Deje el vendaje en su lugar durante las 48 horas siguientes a la cirugía.
- Después de esto, retire el vendaje asegurándose de dejar las suturas de las incisiones en su lugar.
- Es posible que tenga una pequeña incisión en la axila si se le realizó una tenodesis del bíceps. Esta incisión se cubrirá con pegamento Dermabond.
- Es extremadamente importante mantener el área quirúrgica limpia y seca en todo momento para ayudar a prevenir infecciones.
- Las señales de infección incluyen enrojecimiento, hinchazón, aumento del dolor, calor, fiebre (superior a 101.4 grados F) y supuración de la herida. Si observa alguno de estas señales, llame inmediatamente al consultorio.

### BAÑO

- Puede ducharse **5 días después de la cirugía** y mojar las incisiones siempre y cuando las heridas estén secas y no drenen. Deje que el agua corra sobre las incisiones, pero no las frote ni las restriegue.
- Si las heridas están supurando, entonces espere a que se sequen antes de mojarlas.
- **No empape ni sumerja** el área operada hasta que las heridas estén completamente cicatrizadas (normalmente entre 3 y 4 semanas después de la cirugía).

### ACTIVIDAD

- Mantenga el cabestrillo en su sitio en todo momento, salvo que se le indique lo contrario.
- Puede quitarse el cabestrillo con un movimiento mínimo del brazo para vestirse, asearse y realizar los ejercicios prescritos.
- Puede volver **SOLO al trabajo sedentario** o a la escuela 3-4 días después de la cirugía, si el dolor es tolerable.
- **Puede usar la computadora.** Use la otra mano para poner la extremidad operada sobre el escritorio o el teclado y deje que descanse completamente ahí sin usar sus propios músculos para mantenerla en posición.

### FISIOTERAPIA

- **Lo darán el alta con una prescripción de fisioterapia y un protocolo de fisioterapia.** El protocolo es una descripción para usted y su fisioterapeuta que detalla todas sus restricciones y actividades a lo largo de toda su recuperación. Asegúrese de entregárselo a su fisioterapeuta.
- Por favor, agende su cita de fisioterapia postoperatoria. Nuestra oficina puede ayudarle con esto si es necesario. Puede empezar tan pronto como el día siguiente a la cirugía, pero la mayoría prefieren la semana posterior a la cirugía. Le guiarán en los ejercicios a realizar mientras esté en la clínica y en casa.

Llame al 864-807-9998 para preguntas sobre sus instrucciones postoperatorias.



# FRACTURA DE OLÉCRANON

Instrucciones postoperatorias – American Orthopedics

864-807-9998

## CABESTRILLO/INMOVILIZADOR

- Le pondrán un cabestrillo después de la operación
- Debe llevar puesto el cabestrillo en todo momento (excepto para la higiene y los ejercicios)
- Mantenga la posición del codo contra la almohada e incluso con el costado o de frente a esta posición para minimizar la tensión en la reparación.
- Es posible que use el cabestrillo durante 6 semanas postoperatorias, dependiendo de su procedimiento.

## TERAPIA DE HIELO

- La aplicación de hielo es muy importante para disminuir la hinchazón y el dolor y mejorar la movilidad.
- Por favor, use hielo durante 20 minutos cada hora sobre el área quirúrgica.
- Después de 24 horas, continúe usando el hielo 3-4 veces al día, 15-20 minutos cada vez.
- Asegúrese de mantener ropa o una toalla entre el hielo y la piel, ya que colocar el hielo directamente sobre la piel puede causar congelamiento. **NO LO COLOQUE DIRECTAMENTE SOBRE LA PIEL.**

## MEDICAMENTOS

- **Si se colocan, los bloqueos nerviosos y los analgésicos inyectados en la herida dejarán de hacer efecto de 8 a 24 horas después de la cirugía.**
- Se le administrará un analgésico narcótico. Este debe tomarse según sea necesario cada 4-6 horas para el dolor. Tómelo con un poco de comida.
- Los analgésicos narcóticos **no aliviarán todas sus molestias**
- El **hielo y la elevación** ayudarán a un control del dolor adicional
- Tome los medicamentos tal y como se los han recetado
- **No mezcle narcóticos** con alcohol
- Los efectos secundarios comunes de los analgésicos narcóticos incluyen
  - Náusea- Tome la medicina con comida. Si se la recetan, puede tomar medicina contra la náusea. Si persiste la náusea, llame al consultorio para que le cambien la medicina.
  - Somnolencia
  - Estreñimiento - Le recomendamos que compre un ablandador de heces de venta libre (como colace) para tomarlo según las indicaciones mientras esté tomando narcóticos para prevenir el estreñimiento. Se le dará una receta para este medicamento.
- **No conduzca un vehículo ni opere maquinaria pesada mientras toma analgésicos narcóticos**
- Los medicamentos narcóticos no se pueden pedir en la farmacia. Requerirán una receta escrita a mano de la oficina. Por favor, controle la cantidad de analgésicos que le quedan para que no se quede sin ellos.
- **Los narcóticos y analgésicos no se reabastecerán los fines de semana ni fuera de horario.**
- Es probable que le receten aspirina de 325 mg para tomar en el período postoperatorio. Esta se toma una sola vez al día durante 4 semanas en el período postoperatorio para prevenir los coágulos sanguíneos. La dosis y la duración pueden cambiar de forma individual, pero debe reflejarse en la receta que le den.
- También le recomendamos que tome un antiinflamatorio si es capaz de tolerarlo, como Motrin o Naproxeno, a menos que esté tomando anticoagulantes o su doctor le haya indicado que no tome los antiinflamatorios. Tómelo según las indicaciones. Tómelo con comida.

Llame al 864-807-9998 para preguntas sobre sus instrucciones postoperatorias.





# FRACTURA DE OLÉCRANON

Instrucciones postoperatorias – American Orthopedics

864-807-9998

## CITA POSTOPERATORIA EN EL CONSULTORIO

- Si la cita no se agendó antes de la cirugía, póngase en contacto con la oficina llamando al 864-206-5905.
- Su primera visita postoperatoria se le dará antes de su cirugía.
- Dependiendo del procedimiento, planifique visitas de seguimiento a las 6 semanas, 3 meses y 6 meses después de la intervención.

## EMERGENCIAS O PREOCUPACIONES

- Envíe un correo electrónico al Dr. Ratner a [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- O póngase en contacto con nosotros o vaya a la sala de urgencias más cercana si tiene alguno de los siguientes síntomas:
  - El dolor empeora o no desaparece después de tomar analgésicos.
  - Cualquier cambio brusco en la naturaleza o gravedad del dolor
  - Enrojecimiento o hinchazón en el muslo o la pantorrilla que no disminuya.
  - Enrojecimiento alrededor de las incisiones
  - Drenaje o sangrado continuo de la incisión (se espera un drenaje ocasional)
  - Dificultades para mover los dedos o dolor extremo al moverlos
  - Entumecimiento u hormigueo que no desaparece o que empeora
  - Pie frío o cambio de color en la extremidad (tenga en cuenta que la preparación de la piel en la cirugía puede tener un tinte anaranjado, café o azul).
  - Desarrolla una fiebre superior a 101.5 grados F.
  - Dolor de pecho, dificultad para respirar, náusea/vómito incontrolable o cualquier otra cosa preocupante.
  - Si tiene una emergencia que requiera atención inmediata, diríjase al servicio de urgencias más cercano.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615

Llame al 864-807-9998 para preguntas  
sobre sus instrucciones postoperatorias.



AMERICAN  
ORTHOPEDICS



# SHOULDER ARTHROSCOPY

## Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

### INITIAL INSTRUCTIONS

- Ice along with pain medicine are your keys to initial pain management.
- After you arrive home, rest the remainder of the day. You may be tired or nauseated from the anesthesia and/or pain medication.
- You will be in a sling after surgery. You may be in this sling up to 6 weeks after surgery, depending on your procedure.

### DRESSING CHANGE

- Leave the dressing in place for 48 hours following surgery.
- After this, remove the dressing making sure to leave the sutures of the incisions in place.
- You may have a small incision in your armpit if a biceps tenodesis was performed. This incision will be covered with Dermabond glue.
- It is extremely important to keep the surgical site clean and dry at all times to help prevent infection.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.4 degrees F) and drainage from the wound.

### BATHING

- You may shower immediately but keep your incisions dry. **5 days after your surgery**, you can get your incisions wet as long as the wounds are dry and not draining. Let the water run down over the incisions but do not rub or scrub them.
- If the wounds are draining, then wait until they are dry before getting them wet.
- **Do not soak or submerge** the surgical site until the wounds are completely healed (typically 3-4 weeks after surgery).

### ACTIVITY

- Keep sling in place at all times most of the time.
- OK to remove sling with minimal movement about arm for dressing, hygiene, and prescribed exercises
- May return to **sedentary work ONLY** or school 3-4 days after surgery, if pain is tolerable
- **OK to use computer.** Use your other hand to place your operated extremity on the desk or keyboard and allow it to fully rest there without using your own muscles to keep it in position.

### PHYSICAL THERAPY

- **You will be discharged with a physical therapy prescription and a physical therapy protocol.** The protocol is a description for you and your physical therapist that details all of your restrictions and activities through your entire recovery. Please be sure to give this to your physical therapist.

Call 864-807-9998 with any questions  
about your post-op instructions.



# SHOULDER ARTHROSCOPY

## Post-Op Instructions – American Orthopedics

864-807-9998

- Please arrange your post-operative physical therapy appointment. Our office can help you with this if needed. You may start as soon as the day following your surgery, but most prefer the week after surgery. They will guide you in exercises to perform while in the clinic and at home.

## SLING/IMMOBILIZER

- You will be put in a sling after surgery
- Sling should be worn at all times (except for hygiene and exercises)
- Keep your elbow position against the pillow and even with your side or in front of this position to minimize stress on the repair.
- You may be wearing the sling for 6 weeks post-operatively, depending upon your procedure.

## ICE THERAPY

- Icing is very important to decrease swelling and pain and improve mobility.
- Please use ice for 20 minutes each hour over surgical site.
- After 24 hours, continue to use the ice 3-4 times a day, 15-20 minutes each time.
- Be sure to keep clothing or a towel between ice and skin, as placing the ice directly on skin may cause frostbite. DO NOT PLACE DIRECTLY ON SKIN.

## MEDICATIONS

- **If placed, nerve blocks and pain medication injected into the wound will wear off from 8-24 hours after surgery.**
- Recommendation is to take scheduled Tylenol 1000mg three times per day and 800mg ibuprofen three times per day.
- You will be given a narcotic pain medication. This should be taken for breakthrough pain every 8 hours for pain if necessary. Take with a little food.
- **Ice and elevation** will aide in additional pain control
- Take medications as prescribed
- **Do not mix narcotics** with alcohol
- Common side effects of narcotic pain medications include
- Nausea- Take medication with food. If prescribed you may use anti-nausea medication. If nausea persists, call the office to consider having the medication changed.
- Drowsiness
- Constipation – We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation. You will be given a prescription for this.
- **Do not drive a vehicle or operate heavy machinery while on narcotic pain medications**
- **Narcotics and pain medications will not be refilled on weekends or after hours.**
- You will likely be given a prescription for aspirin 325mg to take post-operatively. This is taken only once a day for 4 weeks post-operatively to prevent blood clots. The dosing and duration may change on an individual basis, but it should be reflected in the prescription that you are given.

Call 864-807-9998 with any questions  
about your post-op instructions.



# SHOULDER ARTHROSCOPY

Post-Op Instructions – American Orthopedics

864-807-9998

## POST-OP OFFICE APPOINTMENT

- If the appointment was not arranged prior to surgery, please contact the office.
- Your first post-operative visit will be given to prior to your surgery.
- Depending on the procedure plan for follow-up visits at 6 weeks, 3 months, and 6 months after surgery.

## EMERGENCIES OR CONCERNS

- Email Dr. Ratner at [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- Or contact us or go to the nearest emergency room if you have any of the following:
  - Pain worsens or does not go away after pain medication is taken.
  - Any abrupt change in the nature or severity of pain
  - Redness or swelling in your thigh or calf that will not decrease.
  - Redness around incisions
  - Continuous drainage or bleeding from the incision (occasional drainage is expected)
  - Difficulties moving your fingers or extreme pain when moving your fingers
  - Numbness or tingling that does not go away or is getting worse
  - Cold foot or color change in extremity (Please be aware that the skin prep in surgery may have an orange, brown, or blue tint)
  - Develop a fever greater than 101.5 degrees F.
  - Chest pain, shortness of breath, intractable nausea/vomiting, or anything else concerning
  - If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

**DREW  
RATNER, MD**

ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615

Call 864-807-9998 with any questions  
about your post-op instructions.



AMERICAN  
ORTHOPEDICS

Page 3

# TOTAL HIP ARTHROPLASTY

## Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

## INITIAL INSTRUCTIONS

- Ice and elevation along with pain medicine are your keys to initial pain management.
- After you arrive home, rest the remainder of the day. You may be tired or nauseated from the anesthesia and/or pain medication.
- You will be given a walker upon discharge. Continue to use until you can walk without a significant limp and therapy allows you to progress to cane. Typically, by 3 weeks post op you will be able to ambulate with no assistive device.

## WOUND CARE

- Leave the dressing in place for 3 weeks following surgery. There is a glue dressing over the incision. If the outer dressing must be changed, leave the glue dressing in place
- It is extremely important to always keep the surgical site clean and dry to help prevent infection.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.4 degrees F) and drainage from the wound. If you note any of these signs, please call the office immediately

## BATHING/SHOWERING

- You may shower but make sure the bandage is covered with saran wrap or some other impermeable layer.
- **Do not soak or submerge** the surgical site until the wounds are completely healed (typically 3-4 weeks after surgery).

## ACTIVITY

- Rest and elevate your leg as much as possible.
- Use a pillow under your calf and ankle. Do not place a pillow under your knee or heel.
- Use your walker while walking. Unless instructed otherwise, you may be weightbearing as tolerated on your leg as you feel comfortable.
- Physical therapy will come to your house for the first 3 weeks and then you will go as an outpatient.
- Avoid long periods of sitting without the leg elevated, or long-distance travel for 6 weeks

Call 864-807-9998 with any questions  
about your post-op instructions.



 AMERICAN  
ORTHOPEDICS

# TOTAL HIP ARTHROPLASTY

Post-Op Instructions – American Orthopedics

864-807-9998

## MEDICATIONS

- You will be given Celebrex 200mg to take twice per day. This is an anti-inflammatory. You should take it every day for the first 30 days.
- You will also be given Tylenol (Acetaminophen) 1000mg which you will take 3 times per day for the first 30 days
- For breakthrough pain, you will be given a narcotic pain medication. This should be taken as needed every 8 hours for pain. Take with a little food.
- **Ice and elevation** will aid in additional pain control
- Take medications as prescribed
- **Do not mix narcotics** with alcohol
- Common side effects of narcotic pain medications include
- Nausea- Take medication with food. If prescribed you may use anti-nausea medication. If nausea persists, call the office to consider having the medication changed.
- Drowsiness
- Constipation - We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation. You will be given a prescription for this.
- **Do not drive a vehicle or operate heavy machinery while on narcotic pain medications**
- You will likely be given a prescription for aspirin 325mg to take post-operatively. This is taken only once a day for 30 days post-operatively to prevent blood clots. The dosing and duration may change on an individual basis, but it should be reflected in the prescription that you are given. If you are on a blood thinner at baseline, then you will not take aspirin in addition.

## POST-OP OFFICE APPOINTMENT

- Your first post-operative visit should be scheduled in the office prior to surgery. If the appointment was not arranged prior to surgery, please contact the office
- You will be seen for follow up visits at 3 weeks, 10 weeks, 14 weeks, and 1 year after surgery

Call 864-807-9998 with any questions  
about your post-op instructions.



# TOTAL HIP ARTHROPLASTY

Post-Op Instructions – American Orthopedics

864-807-9998

## EMERGENCIES OR CONCERNS

- Email Dr. Ratner at [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- Or Contact us or go to the nearest emergency room if you have any of the following:
  - Pain worsens or does not go away after pain medication is taken.
  - Any abrupt change in the nature or severity of pain
  - Redness or swelling in your thigh or calf that will not decrease.
  - Redness around incisions
  - Continuous drainage or bleeding from the incision (occasional drainage is expected)
  - Difficulties moving your toes or extreme pain when moving your toes
  - Numbness or tingling that does not go away or is getting worse
  - Cold foot or color change in extremity (Please be aware that the skin prep in surgery may have an orange, brown, or blue tint)
  - Develop a fever greater than 101.5 degrees F.
  - Chest pain, shortness of breath, intractable nausea/vomiting, or anything else concerning
  - If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615

Call 864-807-9998 with any questions  
about your post-op instructions.



AMERICAN  
ORTHOPEDICS

Page 3



# TOTAL KNEE ARTHROPLASTY

## Post-Op Instructions

 [www.TheAmericanOrthopedics.com/resources](http://www.TheAmericanOrthopedics.com/resources)



Dr. Drew Ratner

## INITIAL INSTRUCTIONS

- Ice and elevation along with pain medicine are your keys to initial pain management.
- After you arrive home, rest the remainder of the day. You may be tired or nauseated from the anesthesia and/or pain medication.
- You will be given a walker upon discharge. Continue to use until you can walk without a significant limp and therapy allows you to progress to cane. Typically, by 3 weeks post op you will be able to ambulate with no assistive device.

## WOUND CARE

- Leave the dressing in place for 3 weeks following surgery. There is a glue dressing over the incision. If the outer dressing has to be changed, leave the glue dressing in place
- It is extremely important to keep the surgical site clean and dry at all times to help prevent infection.
- Signs of infection include redness, swelling, increased pain, warmth, fever (above 101.4 degrees F) and drainage from the wound. If you note any of these signs, please call the office immediately

## BATHING/SHOWERING

- You may shower but make sure the bandage is covered with saran wrap or some other impermeable layer.
- **Do not soak or submerge** the surgical site until the wounds are completely healed (typically 3-4 weeks after surgery).

## ACTIVITY

- Rest and elevate your leg as much as possible.
- Use a pillow under your calf and ankle. Do not place a pillow under your knee or heel.
- Use your walker while walking. Unless instructed otherwise, you may be weightbearing as tolerated on your leg as you feel comfortable.
- It is very important to get your leg as straight as possible, as soon as possible.
- Physical therapy will come to your house for the first 3 weeks and then you will go as an outpatient.
- Avoid long periods of sitting without the leg elevated, or long-distance travel for 6 weeks

Call 864-807-9998 with any questions  
about your post-op instructions.



# TOTAL KNEE ARTHROPLASTY

Post-Op Instructions – American Orthopedics

864-807-9998

## ICE THERAPY

- Icing is very important to decrease swelling and pain and improve mobility.
- Please use ice at least 3 times per day over the surgical site. You can use a bag of ice or the ice machine given to you after surgery.
- Be sure to keep clothing or a towel between ice and skin, as placing the ice directly on skin may cause frostbite. DO NOT PLACE DIRECTLY ON SKIN.

## MEDICATIONS

- You will be given Celebrex 200mg to take twice per day. This is an anti-inflammatory. You should take it every day for the first 30 days.
- You will also be given Tylenol (Acetaminophen) 1000mg which you will take 3 times per day for the first 30 days
- For breakthrough pain, you will be given a narcotic pain medication. This should be taken as needed every 8 hours for pain. Take with a little food.
- **Ice and elevation** will aide in additional pain control
- Take medications as prescribed
- **Do not mix narcotics** with alcohol
- Common side effects of narcotic pain medications include
- Nausea- Take medication with food. If prescribed you may use anti-nausea medication. If nausea persists, call the office to consider having the medication changed.
- Drowsiness
- Constipation – We recommend purchasing an over-the-counter stool softener (such as colace) to take as directed while taking narcotics to prevent constipation. You will be given a prescription for this.
- **Do not drive a vehicle or operate heavy machinery while on narcotic pain medications**
- You will likely be given a prescription for aspirin 325mg to take post-operatively. This is taken only once a day for 30 days post-operatively to prevent blood clots. The dosing and duration may change on an individual basis, but it should be reflected in the prescription that you are given. If you are on a blood thinner at baseline, then you will not take aspirin in addition.

Call 864-807-9998 with any questions  
about your post-op instructions.



# TOTAL KNEE ARTHROPLASTY

Post-Op Instructions – American Orthopedics

864-807-9998

## POST-OP OFFICE APPOINTMENT

- Your first post-operative visit should be scheduled in office prior to surgery. If the appointment was not arranged prior to surgery, please contact the office
- You will be seen for follow up visits at 3 weeks, 8 weeks, 12 weeks, and 1 year after surgery

## EMERGENCIES OR CONCERNS

- Email Dr. Ratner at [drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)
- Or Contact us or go to the nearest emergency room if you have any of the following:
  - Pain worsens or does not go away after pain medication is taken.
  - Any abrupt change in the nature or severity of pain
  - Redness or swelling in your thigh or calf that will not decrease.
  - Redness around incisions
  - Continuous drainage or bleeding from the incision (occasional drainage is expected)
  - Difficulties moving your toes or extreme pain when moving your toes
  - Numbness or tingling that does not go away or is getting worse
  - Cold foot or color change in extremity (Please be aware that the skin prep in surgery may have an orange, brown, or blue tint)
  - Develop a fever greater than 101.5 degrees F.
  - Chest pain, shortness of breath, intractable nausea/vomiting, or anything else concerning
  - If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

**DREW  
RATNER, MD**  
ORTHOPEDIC SURGEON



864-807-9998



[drewratner@theamericanorthopedics.com](mailto:drewratner@theamericanorthopedics.com)



[www.TheAmericanOrthopedics.com](http://www.TheAmericanOrthopedics.com)



10 Enterprise Blvd. Ste 209  
Greenville, SC 29615

Call 864-807-9998 with any questions  
about your post-op instructions.



AMERICAN  
ORTHOPEDICS