



# UNION GENERAL ORTHOPEDICS & SPORTS MEDICINE

AFFILIATE OF: UNION GENERAL HEALTH SYSTEM

## Post-Op Instructions for Open Reduction and Internal Fixation of the Clavicle

Jacob B. Stirton, MD

### DIET

- Begin with clear liquids and light foods (jello, soups, etc).
- Progress to your normal diet if you are not nauseated.

### WOUND CARE

- Maintain your operative dressing until the third post-operative day.
- It is normal for the shoulder to swell following surgery. If blood soaks onto the bandage, do not become alarmed, reinforce with more dressings.
- Remove surgical dressing on the third day after surgery and change daily thereafter.
- You can get the incision wet in the shower (water and soap lightly run over the incisions and pat dry). Simply pad dry afterwards and reapply dressing.
- To avoid infection, NO immersion of the operative arm (i.e. bath or pool) until six weeks after surgery.
- Please do not place any ointments lotions or creams on the incisions.

### MEDICATIONS

- A nerve block is typically administered by the anesthesia team unless the patient specifically requests otherwise. This will wear off within 24-36 hours. Patients commonly encounter more pain on the first or second day after surgery when swelling peaks.
- Some patients will require narcotic pain medication for a short period of time – I prescribe oxycodone which can be taken 1-2 tabs every 3 hours as needed for pain.
- To minimize the need for narcotics, I prescribe ibuprofen and Tylenol to be taken three times per day each for the first 2 weeks.
- Common side effects of the pain medication are nausea, drowsiness, and constipation. To decrease the side effects, take the medication with food. We prescribe a stool softener to help prevent constipation but be sure to drink plenty of water as well. If you are having problems with nausea and vomiting, we prescribe an antiemetic, Zofran. If this fails to resolve the issue please contact the office.
- Do not drive a car or operate machinery while taking the narcotic medication.
- Please avoid alcohol use while taking narcotic pain medication.



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## ACTIVITY

- Begin exercises (pendulums and active elbow extension/flexion without resistance) 24 hours after surgery unless otherwise instructed.
- While maintaining your elbow by the side, begin elbow, hand, and wrist exercises immediately.
- When sleeping or resting, inclined positions (i.e. reclining chair) and a pillow under the forearm for support may provide better comfort.
- Avoid long periods of sitting (without arm supported) or long distance traveling for 2 weeks.
- NO driving until instructed otherwise by physician.
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable.

## SLING

- Use the sling when walking or out of house for first 2 weeks until seen in clinic.

## ICE THERAPY

- Icing is very important in the initial post-operative period and should begin immediately after surgery.
- Use icing machine continuously or ice packs (if machine not prescribed) for 20-30 minutes every 2 hours daily until your first post-operative visit – remember to keep leg elevated to level of chest while icing. Avoid frostbite to the skin by not using icepacks for more than 30 minutes at a time.
- You do not need to wake up in the middle of the night to change over the ice machine or icepacks unless you are uncomfortable.

## EXERCISE

- You may begin shoulder pendulum exercises and wrist and hand range of motion on the first post-operative day about 2-3 times per day.
- Formal physical therapy (PT) typically begins after you are seen at your first post-operative appointment 2 weeks after surgery. Timing and a protocol will be provided at your first post-op visit.



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## **EMERGENCIES**

\*Contact Dr. Stirton's office at 706-439-6858 if any of the following are present:

- Fever (over 101° F – it is normal to have a low-grade fever (<100°) for the first day or two following surgery) or chills
- Redness around incisions
- Color change in hand or wrist
- Continuous drainage or bleeding from incision (a small amount of drainage is expected)

\*If you have any of the following emergencies that require immediate attention proceed to the nearest emergency room.

- Excessive nausea/vomiting
- Unrelenting pain or calf pain
- Difficulty breathing

## **FOLLOW-UP CARE/QUESTIONS**

- If you do not already have a post-operative appointment scheduled, please contact our scheduler at 706-439-6858 to schedule.
- If you have any further questions please contact Dr. Stirton's office.