After Your Orthopaedic Surgery: What You Need to Know

Arthroplasty, Fracture Surgery, Sports Medicine

- You should have a followup visit with your surgeon in 2-6 weeks. If you are not given an appointment when you leave the hospital, please call your surgeon’s office to make one.

- Staples or sutures will be taken out 10-14 days after your operation. Your surgeon, your family doctor, or VON will do this.

- You will have an X-ray at the followup visit if you had arthroplasty (knee, hip, or shoulder replacement surgery), fracture surgery, or some sports medicine procedures.

- You will need medication to prevent blood clots for at least 14 days after arthroplasty surgery. Make sure that you have your prescription for this medication. If you were on warfarin before your surgery, you should be back on your usual dose at home. You should make arrangements with your family doctor to make sure your INR is back to 2.0. You will need to have blood work done after you go home to check your INR.

- Make sure that you are taking the medicine your surgeon has recommended to manage your pain. This may include acetaminophen (Tylenol®), an anti-inflammatory, and an opioid. Make sure you have your opioid prescription when you leave the hospital, if needed. Make sure you understand your opioid dosage, how long to take it at home to manage your pain, and when to stop taking it. Applying ice and keeping your limb raised up may help if your physiotherapist or surgeon suggests this.

- It is important that you understand what activities you can and can’t do. The physiotherapist will go over these with you and answer any questions. This includes your weight-bearing limit, how much you can lift, how far you should be able to move your joint, and how long you will need splints and slings. If you had arthroplasty make sure you have outpatient physiotherapy set up for within a week of discharge.
• Complications may happen after you go home. If you feel that you are having a problem, contact your family doctor. If that is not possible, go to the nearest Emergency Department. Watch out for these signs:
  › Having more pain even though you are taking pain medication regularly. You might have an infection. Make sure you are taking your pain medications as instructed. Fever, sweats/chills, and more than usual drainage from your wound may also mean there is an infection. Keep your wound clean and dry. Contact your surgeon’s office, or family doctor, or go to the Emergency Department if you have any of these symptoms.
  › Sudden chest pain, shortness of breath, or the feeling that your heart is racing. This may be a blood clot or a heart problem. **Call 911 or go to the nearest Emergency Department right away.**
  › Swelling of the limb. Keep the limb above the level of your heart. If your swelling does not go down with your limb raised up and your pain is getting worse, especially with movement of your toes or fingers, go to the nearest Emergency Department. Warning signs include pain that is getting worse, pain with movement, or paleness or numbness of the limb.
  › Swelling in your calf after joint replacement. This may be of concern if you also have a lot of pain in your calf. A compression stocking may help if it is just a swelling problem. If you have calf pain and swelling, go to the nearest Emergency Department.
  › If you have questions about your health, call 811 and a nurse can help you.

• If you had a fracture, you must keep your cast dry. If the cast or splint gets wet or damaged, contact your surgeon’s office.

• If you have any complications, contact your surgeon’s office to let them know. **If you are worried that you have any of the complications above, it is important to talk to your surgeon’s office, or family doctor, or go to the Emergency Department.** Early treatment is important.