

DR. SMITH'S POSTOPERATIVE INSTRUCTIONS
Anterior Cruciate Ligament (ACL) Surgery



BANDAGE CARE & BATHING: If you have a follow up the next day: please leave the ace-wrap or bandage in place. If you DO NOT have a follow up the next day: you may remove the bandage and dressing, however leave the steri-strips on. A lot of bloody, watery drainage is normal. You may shower and lightly clean the wound with soap and water. **DO NOT** submerge in a tub, pool or ocean until cleared by Dr. Smith. After showering apply band-aids over the wound.



CRUTCHES:

Weight bear as tolerated with the assistance of your crutches.



ICE: Ice can help reduce pain and inflammation. Put a light towel over the incision and apply ice packs every 15-20 minutes, every 2 hours while awake.



DIET: No restrictions: Start with clear liquids, plain foods and work your way up to regular diet as tolerated. Avoid greasy, heavy & spicy foods, they can make you nauseous.



DRIVING: **DO NOT** drive until OFF of prescription pain medicine & can safely move your feet and push the pedals.



ACTIVITY: Rest today, it is not unusual to feel sleepy or tired for a day or so after your procedure. No strenuous activity. While resting keep your knee elevated above your heart to reduce swelling.



PAIN MANAGEMENT: You may have been administered a nerve block to reduce post-op pain. This usually produces numbness down the extremity which keeps post-operative pain to a minimum. This block usually last 10 to 12 hours but may last 24 hours or longer. The longer the numbness lasts, the better, so this is not a cause of concern. Start taking your prescribed pain medication such as oxycodone HCl/acetaminophen (Xartemis XR), hydrocodone/acetaminophen (Vicodin), codeine/acetaminophen (Tylenol with Codeine #3), or oxycodone/acetaminophen (Percocet) as soon as you start to feel increasing pain. We recommend you take a dose prior to going to sleep the first night so you do not wake up in the middle of the night with pain. Follow the labeled instruction on your prescription. If the prescription does not control your discomfort, you may take non-prescription pain medicine such as acetaminophen (Tylenol), naproxen (Aleve), ibuprofen (Advil or Motrin) in addition to the prescribed pain medicine. Do NOT drink alcohol, drive or operate machinery while taking prescribed pain meds.



NAUSEA: Anesthesia and pain medication can cause nausea. You may be given promethazine (Phenergan) or ondansetron (Zofran) for nausea. Take these along with your prescription pain medicine to prevent nausea. **CONSTIPATION:** Prescription pain medication can cause constipation. Drink plenty of fluids. You may take over the counter stool softeners such as docusate (Dulcolax) or Senna. Prunes, prune juice or any food that can help move bowels. Take these along with your prescription pain medicine as needed.

ITCHING OR RASH: If you get MILD itching or rash, take non-prescription allergy medicine such as Benadryl, Claritin, or Allerest. If you get a SEVERE reaction or have any difficulty breathing, call 911 or immediately go to the nearest emergency facility.

DR. SMITH'S POSTOPERATIVE INSTRUCTIONS
Anterior Cruciate Ligament (ACL) Surgery



When to call:

**Dr. Smith's office @ 521-8102 or All Access Ortho @ 356-5699 M-F 8am – 8pm, Sat/Sun 9am-5pm
Physicians Exchange after hours @ 808-524-2575.**

1. Fever is above 101.5°F and/or chills. Fever is common after any surgery with general anesthesia and is rarely due to infection.
2. Excessive nausea, vomiting, difficulty breathing, inability to urinate or severe pain unrelieved with medication ordered.
3. Extensive swelling around the operative area, numb, dusky or pale color in toes, or pus type drainage.



**If you need IMMEDIATE ATTENTION (such as difficulty breathing)
Call 911 or go to the NEAREST EMERGENCY ROOM**



A Registered Nurse from MIS Hawaii will be calling to follow up on your procedure with you after your surgery to answer any post-op questions. The discharge instructions were explained to me and I have received a copy of these instructions. I understand these instructions are necessary for continuing medical care after I (the patient) leave MIS Hawaii.

Patient or Authorized Person Signature

Date/Time

Nurse Signature

Date/Time

DR. SMITH'S POSTOPERATIVE INSTRUCTIONS

Knee Arthroscopy Surgery



BANDAGE CARE & BATHING: You may take OFF the bandage 24 hours after the surgery. You may shower, washing the incision lightly with soap and water. **DO NOT** submerge the incision under water in a bath tub/pool/ ocean until Dr. Smith advises it is OK. After shower, cover the incision with simple band aids or light gauze and elastic wrap. If you have steri-strips leave on until they fall off.



CRUTCHES:

If given crutches, weight bear as tolerated.



ICE: Ice can help reduce pain and



inflammation. Put a light towel over the incision and apply ice packs every 15-20 minutes, every 2 hours while awake.

DIET:

No restrictions: Start with clear liquids, plain foods and work your way up to regular diet as tolerated. Avoid greasy, heavy & spicy foods, they can make you nauseous.



DRIVING:

DO NOT drive until OFF of prescription pain medicine & can safely move your feet and push the pedals.



ACTIVITY:

Rest today, it is not unusual to feel sleepy or tired for a day or so after your procedure. No strenuous activity. While resting keep your knee elevated above your heart to reduce swelling.



PAIN MANAGEMENT: At the end of your surgery, your knee was injected with a mixture of long-acting pain medication. This will wear off in 6 – 8 hours; however it may last up to 24 hours. Start taking your prescribed pain medication such as oxycodone HCl/acetaminophen (Xartemis XR), hydrocodone/acetaminophen (Vicodin), codeine/acetaminophen (Tylenol with Codeine #3), or oxycodone/acetaminophen (Percocet) as soon as you start to feel increasing pain. We recommend you take a dose prior to going to sleep the first night so you do not wake up in the middle of the night with pain. Follow the labeled instruction on your prescription. If the prescription does not control your discomfort, you may take non-prescription pain medicine such as acetaminophen (Tylenol), naproxen (Aleve), ibuprofen (Advil or Motrin) in addition to the prescribed pain medicine. Do NOT drink alcohol, drive or operate machinery while taking prescribed pain meds.



NAUSEA: Anesthesia and pain medication can cause nausea. You may be given promethazine (Phenergan) or ondansetron (Zofran) for nausea. Take these along with your prescription pain medicine to prevent nausea.

CONSTIPATION: Prescription pain medication can cause constipation. Drink plenty of fluids. You may take over the counter stool softeners such as docusate (Dulcolax) or Senna. Prunes, prune juice or any food that can help move bowels. Take these along with your prescription pain medicine as needed.

ITCHING OR RASH: If you get MILD itching or rash, take non-prescription allergy medicine such as Benadryl, Claritin, or Allerest. If you get a SEVERE reaction or have any difficulty breathing, call 911 or immediately go to the nearest emergency facility.



When to call:

Dr. Smith's office @ 521-8102 or All Access Ortho @ 356-5699 M-F 8am – 8pm, Sat/Sun 9am-5pm
Physicians Exchange after hours @ 808-524-2575.

1. Fever is above 101.5°F and/or chills. Fever is common after any surgery with general anesthesia and is rarely due to infection.
2. Excessive nausea, vomiting, difficulty breathing, inability to urinate or severe pain unrelieved with medication ordered.
3. Extensive swelling around the operative area, numb, dusky or pale color in toes, or pus type drainage.

DR. SMITH'S POSTOPERATIVE INSTRUCTIONS

Knee Arthroscopy Surgery



If you need IMMEDIATE ATTENTION (such as difficulty breathing)
Call 911 or go to the NEAREST EMERGENCY ROOM



A Registered Nurse from MIS Hawaii will be calling to follow up on your procedure with you after your surgery to answer any post-op questions. The discharge instructions were explained to me and I have received a copy of these instructions. I understand these instructions are necessary for continuing medical care after I (the patient) leave MIS Hawaii.

Patient or Authorized Person Signature

Date/Time

Nurse Signature

Date/Time

DR. SMITH'S POSTOPERATIVE INSTRUCTIONS

Rotator Cuff Surgery



BANDAGE CARE & BATHING: If you have a follow up the next day: please leave the ace-wrap or bandage in place. If you DO NOT have a follow up the next day: you may remove the bandage and dressing, however leave the steri-strips on. A lot of bloody, watery drainage is normal. You may shower and lightly clean the wound with soap and water. **DO NOT** submerge in a tub, pool or ocean until cleared by Dr. Smith. After showering apply band-aids over the wound.



SLING: You do not need to wear the sling if it is uncomfortable just do not lift your arm. Although, you may wear it while you sleep. **SCARRING:** Sunlight can cause scars to darken so use sunscreen when the wounds are healing (usually after 2 weeks).



ICE: Ice can help reduce pain and inflammation. Put a light towel over the incision and apply ice packs every 15-20 minutes, 2 to 3 times per day while awake.



DIET: No restrictions: Start with clear liquids, plain foods and work your way up to regular diet as tolerated. Avoid greasy, heavy & spicy foods, they can make you nauseous.



DRIVING: **DO NOT** drive until OFF of prescription pain medicine.



ACTIVITY: Rest today. It is not unusual to feel sleepy or tired for a day or so after your procedure. No strenuous activity. No lifting with the operative arm. Do not raise your arm under your own power. Keep the elbow at your side until you go to therapy. The majority of patients find sleeping in an upright position to be most comfortable.



PAIN MANAGEMENT: You may have been administered a nerve block to reduce post-op pain. This usually produces numbness down the extremity which keeps post-operative pain to a minimum. This block usually last 10 to 12 hours but may last 24 hours or longer. The longer the numbness lasts, the better, so this is not a cause of concern. Start taking your prescribed pain medication such as oxycodone HCl/acetaminophen (Xartemis XR), hydrocodone/acetaminophen (Vicodin), codeine/acetaminophen (Tylenol with Codeine #3), or oxycodone/acetaminophen (Percocet) as soon as you start to feel increasing pain. We recommend you take a dose prior to going to sleep the first night so you do not wake up in the middle of the night with pain. Follow the labeled instruction on your prescription. If the prescription does not control your discomfort, you may take non-prescription pain medicine such as acetaminophen (Tylenol), naproxen (Aleve), ibuprofen (Advil or Motrin) in addition to the prescribed pain medicine. Do NOT drink alcohol, drive or operate machinery while taking prescribed pain meds.



NAUSEA: Anesthesia and pain medication can cause nausea. You may be given promethazine (Phenergan) or ondansetron (Zofran) for nausea. Take these along with your prescription pain medicine to prevent nausea. **CONSTIPATION:** Prescription pain medication can cause constipation. Drink plenty of fluids. You may take over the counter stool softeners such as docusate (Dulcolax) or Senna. Prunes, prune juice or any food that can help move bowels. Take these along with your prescription pain medicine as needed.

ITCHING OR RASH: If you get MILD itching or rash, take non-prescription allergy medicine such as Benadryl, Claritin, or Allerest. If you get a SEVERE reaction or have any difficulty breathing, call 911 or immediately go to the nearest emergency facility.

DR. SMITH'S POSTOPERATIVE INSTRUCTIONS

Rotator Cuff Surgery



When to call:

Dr. Smith's office @ 521-8102 or All Access Ortho @ 356-5699 M-F 8am – 8pm, Sat/Sun 9am-5pm
Physicians Exchange after hours @ 808-524-2575.

1. Fever is above 101.5°F and/or chills. Fever is common after any surgery with general anesthesia and is rarely due to infection.
2. Excessive nausea, vomiting, difficulty breathing, inability to urinate or severe pain unrelieved with medication ordered.
3. Extensive swelling around the operative area, numb, dusky or pale color in toes, or pus type drainage.



If you need IMMEDIATE ATTENTION (such as difficulty breathing)
Call 911 or go to the NEAREST EMERGENCY ROOM



A Registered Nurse from MIS Hawaii will be calling to follow up on your procedure with you after your surgery to answer any post-op questions. The discharge instructions were explained to me and I have received a copy of these instructions. I understand these instructions are necessary for continuing medical care after I (the patient) leave MIS Hawaii.

Patient or Authorized Person Signature

Date/Time

Nurse Signature

Date/Time

DR. SMITH'S POSTOPERATIVE INSTRUCTIONS

Shoulder Manipulation



BANDAGE CARE & BATHING: You may take OFF the bandage 24 hours after the manipulation. You may shower, washing the incision lightly with soap and water. **DO NOT** submerge the incision under water in a bath tub/pool/ ocean until Dr. Smith advises it is OK. After shower, cover the incision with simple band aids or light gauze and elastic wrap. If you have steri-strips leave on until they fall off.



SLING: The sling is provided to protect your arm and hand from being injured. You may remove the sling after the numbing medication has worn off unless otherwise instructed by Dr. Smith or his assistants.



ICE: Using ice can help pain but also makes joints feel stiff. If you choose to use ice for pain, use immediately AFTER stretching and NOT before stretching. Apply a sealed ice bag over a light towel for 20 minutes and repeat every 2 hour as needed while awake.



DIET: No restrictions: Start with clear liquids, plain foods and work your way up to regular diet as tolerated. Avoid greasy, heavy & spicy foods, they can make you nauseous.



DRIVING: **DO NOT** drive until OFF of prescription pain medicine



ACTIVITY: You may apply a **WARM HEAT** pack to your joint for 5 minutes then **STRETCH** your joint slow and firm in each direction as far as it can go with moderate pain and hold for 5 seconds and repeat 5 times every hour while awake. No strenuous activity.



PAIN MANAGEMENT: You may have been administered a nerve block to reduce post-op pain. This usually produces numbness down the extremity which keeps post-operative pain to a minimum. This block usually last 10 to 12 hours but may last 24 hours or longer. The longer the numbness lasts, the better, so this is not a cause of concern. Start taking your prescribed pain medication such as oxycodone HCl/acetaminophen (Xartemis XR), hydrocodone/acetaminophen (Vicodin), codeine/acetaminophen (Tylenol with Codeine #3), or oxycodone/acetaminophen (Percocet) as soon as you start to feel increasing pain. We recommend you take a dose prior to going to sleep the first night so you do not wake up in the middle of the night with pain. Follow the labeled instructions on your prescription. If the prescription does not control your discomfort, you may take non-prescription pain medicine such as acetaminophen (Tylenol), naproxen (Aleve), ibuprofen (Advil or Motrin) in addition to the prescribed pain medicine. Do NOT drink alcohol, drive or operate machinery while taking prescribed pain meds.



NAUSEA: Anesthesia and pain medication can cause nausea. You may be given promethazine (Phenergan) or ondansetron (Zofran) for nausea. Take these along with your prescription pain medicine to prevent nausea. **CONSTIPATION:** Prescription pain medication can cause constipation. Drink plenty of fluids. You may take over the counter stool softeners such as docusate (Dulcolax) or Senna. Prunes, prune juice or any food that can help move bowels. Take these along with your prescription pain medicine as needed.

ITCHING OR RASH: If you get MILD itching or rash, take non-prescription allergy medicine such as Benadryl, Claritin, or Allerest. If you get a SEVERE reaction or have any difficulty breathing, call 911 or immediately go to the nearest emergency facility.

DR. SMITH'S POSTOPERATIVE INSTRUCTIONS

Shoulder Manipulation



When to call:

Dr. Smith's office @ 521-8102 or All Access Ortho @ 356-5699 M-F 8am – 8pm, Sat/Sun 9am-5pm
Physicians Exchange after hours @ 808-524-2575.

1. Fever is above 101.5°F and/or chills. Fever is common after any surgery with general anesthesia and is rarely due to infection.
2. Excessive nausea, vomiting, difficulty breathing, inability to urinate or severe pain unrelieved with medication ordered.
3. Extensive swelling around the operative area, numb, dusky or pale color in toes, or pus type drainage.



If you need IMMEDIATE ATTENTION (such as difficulty breathing)
Call 911 or go to the NEAREST EMERGENCY ROOM



A Registered Nurse from MIS Hawaii will be calling to follow up on your procedure with you after your surgery to answer any post-op questions. The discharge instructions were explained to me and I have received a copy of these instructions. I understand these instructions are necessary for continuing medical care after I (the patient) leave MIS Hawaii.

Patient or Authorized Person Signature

Date/Time

Nurse Signature

Date/Time