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**Postoperative Instructions after SURGICAL FIXATION OF TIBIAL PLATEAU FRACTURE**

1. Activity instructions:
  - a. No weight bearing with your surgical lower extremity.
  - b. You must use crutches or a walker to keep weight off of your surgical lower extremity when moving around.
  - c. If you were provided with a hinged knee brace, wear it at all times (other than showering).
  - d. You may work on gentle range of motion of your knee while wearing the hinged knee brace.
2. Surgical dressing instructions:
  - a. You may remove the Ace wrap and cotton dressing on postoperative day #3.
  - b. You have a water-resistant dressing beneath the Ace wrap and cotton. This dressing may remain in place until your first follow-up appointment, unless otherwise specified (see below).
  - c. You may be recommended for use of a collagen surgical dressing to help speed wound healing and improve the surgical scar. If you are participating in this program, a dressing supply kit will be mailed directly to your home after surgery and will include further instructions.
  - d. The initial postoperative dressing and the collagen surgical dressings are water-resistant and you may shower with either type of dressing in place, when desired, but do not submerge in a bath tub.
3. Prevention of deep venous thrombosis (blood clot):
  - a. If you do not usually take any other blood thinning medications, then you will start taking **aspirin** 81 mg by mouth once per day on the morning of postoperative day #1 and continue this for 4 weeks.
  - b. If you already take a blood thinning medication at baseline, then your instructions are as follows: \_\_\_\_\_  
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4. Pain control:
  - a. The best way to control pain is to control swelling. The best way to control swelling is to **elevate** the surgical lower extremity above the level of your heart and apply **ice** often.

- b. An electronic prescription has been sent to your pharmacy for a 1 week supply of **narcotic pain medication**. Narcotic pain medication is sedating and constipating. Increase your fluid intake and use over-the-counter stool softeners as needed to help with constipation. Use the narcotic pain medication when your pain is most severe. Wean yourself off of the narcotic pain medication as soon as possible.
  - c. You may take **acetaminophen** in addition to, or in substitution for your narcotic pain medication, but do not exceed 3000 mg of acetaminophen in a 24 hour period from all sources.
  - d. You may take **non-steroidal anti-inflammatory drugs** (NSAIDs) such as ibuprofen in addition to, or in substitution for your narcotic pain medication. Some patients have been advised by their family physician to avoid NSAIDs. If you are unsure, call your family physician.
  - e. It is safe to alternate between narcotic pain medication, acetaminophen, and NSAIDs.
5. Reasons to call the office:
- a. Foul odor or excessive drainage from your surgical dressing.
  - b. Increasing pain not relieved by pain medication.
  - c. New numbness or tingling.
  - d. Signs or symptoms of systemic illness (fever, chills, nausea, generalized weakness or body aches, etc.).
6. Follow-up:
- a. A 2 week follow-up appointment was made in the office on the day that you scheduled your surgery. If you do not know the date of the follow-up appointment, please call the office at your convenience for a reminder.