

**Post-Operative Instructions**  
**Jason Ahuero, MD**  
**713-441-9000**

1. You will be sent home with a prescription for narcotic pain relievers. Initially take the narcotic as directed just like “clockwork” for 24 to 48 hours. It is easier to stay ahead of the pain than try to catch up. You may supplement with ibuprofen (Advil, Motrin) in between the narcotic doses. For example, 400mg (2 pills) ibuprofen then two hours later the narcotic medication then two hours later the ibuprofen again. The maximum dose of ibuprofen is 2400mg per day. Each tablet is usually 200mg therefore no more than 12 ibuprofen pills per day. Or you may supplement with two Aleve twice a day (12 hour apart.)
  - People with a history of stomach ulcers or problems will need to use caution as they can irritate the stomach lining.
  - Patients on blood thinners should consult their family doctor before taking NSAIDs such as ibuprofen or Aleve as these medications are contraindicated.
  - Patients with aspirin sensitivity or allergy should not take Advil, Aleve, etc.
  - Do not take any Tylenol (acetaminophen) containing products while on the narcotic as there is a component of acetaminophen within it.
  - While on these medications your decision-making may be clouded. Do not put yourself in a position to mix narcotics with situations that require decision making (i.e. driving, child care, etc.)
2. If you have a day surgery procedure, take a pain pill before you develop any pain. This seems to work better than taking the pain pill after your pain develops as it is harder to control pain after it becomes severe. The recovery room nurse will let you know when your last pain medication dose was and when your next one should be.
3. If you had a nerve block, this medication will wear off 8-24 hours post op. Be prepared to take your pain medicine when you first notice this to minimize the onset of pain. Call your anesthesiologist if you have any questions about the block.
4. The pain will be the worst the first night after the surgery. The pain will always seem worse at night because you do not have the distractions of the day to take your mind off the pain. The second night can be as bad as the first especially if you were not diligent in keeping your leg elevated. Persevere, the pain almost always decreases by the third postoperative day.
5. Keep your foot and leg elevated. Any part of you that is kept below your heart level after it is operated on will swell. Swelling increases your pain and may increase your risk of infection. The key to controlling swelling is **RICE (Rest, Ice, Compression, and Elevation.)** For the first four days after surgery it is best to keep your foot strictly elevated, walking only to the bathroom or kitchen. The rest of the time keep your leg up. After day four, you can move about more, but elevate as much as possible. You will know if you have been up too much by the amount of swelling and/or pain.
6. At the hospital, you will be taught the amount of weight you can place on your leg. **If you have any doubt, do not place any weight on it.** Use your crutches and or knee walker instead. We will clear up any question if you will call us during office hours.
7. Constipation can occur from decreased activity level and narcotic pain medication. A stool softener or laxative of choice can be taken such as colace or milk of magnesia.

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8. An infection can occur after any surgery no matter how minor the procedure. An infection is usually characterized by fever, chills, worsening pain, swelling and later in the course a red streak extending from the incision area up your leg. Often people will describe the symptoms of an infection as like having the flu. Please call the office if you have any of these symptoms.
9. The doctor will tell you when to remove your bandages. As a rule, he does not want you to remove them at home. He will specifically tell you if it is OK to change them. Keep your dressing clean, dry and intact until you are seen for a follow up. You may shower but must do so while keeping your dressing /cast dry. If you get your dressing/cast wet, please notify the office ASAP to come in and have it changed. Continued wear of a wet cast can cause skin breakdown. If you are interested, a cast protector/cover may be purchased at your local Walgreen's or CVS pharmacy. This applies to any "black boots" or post op shoes as well. Removal of these devices could affect the outcome of your surgery. If you have any questions, please call the office.
10. Call the office to make your postoperative appointment if you have not already had one made. Most of the time the doctor will want you to return to the office about 10-14 days after the surgery. If you have a problem, we will need to see you sooner, so please do not be afraid to call and let us know.
11. Please take an adult strength aspirin once a day until you return to your regular activity level. This is to reduce the risk of developing a blood clot. Most aspirin will be marked 325mg. Just take one aspirin daily. For our patients with asthma, we ask you take one 81mg aspirin daily. If you have trouble with aspirin products, allergic to aspirin or on blood thinners, please let us know so we can make other arrangements for you.
12. **Pain medication will be refilled ONLY during office hours (Monday – Friday 8am – 4pm). Afterhours, on-call physicians cannot call in pain medication refills.**
13. Please feel free to call the office with any questions or concerns at **713-441-9000** (available 24 hours a day). It is important for you to understand that we are available. We would rather have you call too much than not enough.

**REMEMBER TO CALL OUR OFFICE WITH ANY OF THE FOLLOWING:**

- Fever over 101 degrees, chills.
- Drainage from the wounds that has increased or changed in color.
- Severe foot or ankle pain.
- Very dark blue, black, or white discoloration of the foot and/or toes.
- Redness in the foot, leg, or calf
- Swelling that does not go away with elevation or calf pain.

**CHEST PAIN OR DIFFICUTLY BREATHING – CALL 911**