

Post-Operative Instructions: Patella Fracture Repair

Coming Home

- It is normal to feel like your knee is stiff and swollen with fluid. This will improve over time.
- You may bear weight on your operative leg with your knee brace in position. Use crutches/walker for assistance with ambulation.
- Keep your knee brace locked in full extension, except as directed otherwise by Dr. Gross or your physical therapist.
- Ice your knee in 30-minute intervals to assist with pain and swelling.
- Keep your knee and leg elevated for 48 hours after surgery to help diminish swelling.

Dressings/Hygiene

- Keep your dressings dry and intact. They will be removed in the office at your first post-op visit.
- You may shower once the initial dressings are removed. Until then, please perform sponge baths in order to avoid getting the dressings wet.
- Once the dressings have been removed and the wounds are dry, it is safe to leave the wounds open to air. You may apply band-aids over the wounds for additional protection if you prefer.

Medications

- **Aspirin / Rivaroxaban (Xarelto) / Enoxaparin (Lovenox)**: You have been prescribed one of these medications to help lower the risk of blood clots. It is important to take the full amount of medication as directed. The over-the-counter aspirin dose is 325 mg daily for 30 days.
- **Acetaminophen (Tylenol):** This medication helps with pain. It should be taken on a scheduled basis (1000 mg every 8 hours) for as long as needed.
- Oxycodone / Tramadol / Hydrocodone: These are narcotic medications that can be taken as needed for pain control. You should taper off and discontinue these medications as soon as you feel you no longer need them.
- **Meloxicam / Ibuprofen**: These are anti-inflammatory medications that help with pain and swelling. You should take the medication as prescribed on a scheduled basis at least until you are off narcotic pain medication. You may keep taking the anti-inflammatory for as long as it is required to manage your pain, but it should not be taken longer than necessary.
- **Gabapentin**: This medication helps diminish pain signals along the sensory nerves. If prescribed, it should be taken as prescribed on a scheduled basis at least until you are off narcotic pain medication. You may keep taking the gabapentin for as long as it is beneficial.

Follow-up and Contacts

- Your first post-operative visit has likely already been scheduled, typically in about 2 weeks.
- Physical therapy may be recommended. Dr. Gross will review this with you at your follow-up visit.
- If you have any questions or concerns, please do not hesitate to call:

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