

Distal Radius Fracture

(Discharge instructions for Dr. Andrew Federer)

PRESCRIPTIONS: You may be given a prescription for pain medication today. Hopefully, within the first week, your pain will change to where you will need less or no pain medication. Please use your pain medication carefully, as we will probably only renew your medication once if needed. Please take this medication with food if it bothers your stomach. If you are normally able to take nonsteroidal anti-inflammatories (NSAIDs) (e.g. ibuprofen, naproxen, Motrin, Aleve etc.) then it is okay to take this medication in addition to any potential narcotic pain medication you may have been prescribed today. Oftentimes patients who have had previous GI issues (such as GI bleeding) or kidney issues have been recommended to not take nonsteroidal anti-inflammatories by their primary care physicians.

It is illegal in the State of Colorado to drive a car or operate machinery while taking an opioid pain medication, such as the one you may have been prescribed today. Taking this medication in a manner that is different from the prescription instructions can lead to opioid overdose and serious medical complications. After discontinuing the medication, it is not unusual to have symptoms of opioid withdrawal such as irritability, nausea, and/or trouble sleeping.

ICE AND ELEVATION: You may use ice for the first 12 hours, but it is not critical. Elevation, as much as possible for the next 48 hours, is critical for decreasing swelling as well as for pain relief. Elevation means higher than your heart. When sitting, your hand should be at least at the level of your head. When walking, the hand needs to be at least at the shoulder level or higher. If you sleep on your back, then we recommend placing two pillows under your elbow and two pillows under your wrist on top of your chest. If the bandage gets too tight, the ace bandage may be loosened.

DRESSING: Please keep the dressing and splint as it is until you come back to see Dr. Federer in clinic. You will need to keep the splint covered with a waterproof plastic bag for bathing showering.

ACTIVITY AND WORK: You are encouraged to move your fingers by *gently* making a fist and straightening the fingers all the way out. Do this as much as you need to make your fingers move fully and keep the swelling down. In addition, with your elbow at your side and your arm out in front of you, you may start *gently* working on “palm down” and “palm up” motion. Light use of the fingers is allowed, but strong gripping or lifting is often uncomfortable and detrimental to the healing process and should be avoided. For the most part, let discomfort be your guide. You might miss a variable period of time from work and hopefully this issue has been discussed prior to surgery. You may not do any heavy work with your effected hand for some time. Please share this information with your employer and bring any forms that need to be filled out to my medical assistant.

EXPECTATIONS: Hopefully, within the first 4-5 days, your pain will change to where you will need less pain medication. Please use your pain medication carefully, as we very rarely will prescribe any further opiates. The scar will mature over the next 6 months to a year and will become much less visible and tender. If your discomfort or swelling increases, after initially getting better in the first few days, infection may be a concern. Normal time for infection (which is very rare) is between the third and seventh day after surgery.

If you are concerned for any reason, please contact us at **(720) 516-9417** and ask for a **Hand Team Medical Assistant**.

BONE HEALTH: Vitamin D is very important for bone healing. Vitamin D is obtained through sun exposure, diet (milk, dairy products, salmon, fortified cereals) and supplements. In general, I recommend taking vitamin D and calcium supplementation—specifically vitamin D3 1000-2000 IU/day (certain patients may require 5000 IU/day) and 1000 mg of calcium per day. This can be purchased over-the-counter. Occasionally, we may need to check your vitamin D levels. The goal level is greater than 20 ng/mL for bone healing. It is okay to take cumulative dosing (once a week or once a month). The patient is encouraged to follow-up with us or their primary care provider with any questions, comments, or concerns.

FOLLOW-UP APPOINTMENT: This should have been given to you when surgery was scheduled, and will be with Dr. Federer. At this appointment we will take a look at your incision and remove any sutures necessary and set further expectations and/or treatment plan.

Please call **(720) 516-9417** should you have any general questions or need to adjust your post-operative appointment.

For after hour **Emergencies** please call **(720) 516-9417** and ask for the Orthopedic Physician on call.