

# SVO

SILICON VALLEY  
ORTHOPAEDICS

## Postoperative Instructions: Clavicle Fracture Open Reduction and Internal Fixation

### ❖ GENERAL

- Your surgery was performed over an incision on the top of your collar bone (clavicle). This is generally where you will experience any sharp pain that should resolve over the next several days.

### ❖ DIET

- Begin with clear liquids and light foods (jellos, soups, etc.)
- Progress to your normal diet if you are not nauseated.

### ❖ WOUND CARE

- It is normal to notice some blood on your operative dressing following surgery- if blood soaks through the bandage, do not become alarmed- reinforce with additional dressing.
- Remove surgical dressing on the **third post-operative day**- if minimal drainage is present, apply dry gauze over incisions and change daily- you may then shave around the wound as long as the wounds remain sealed with a large piece of gauze and tape.
  - REMOVE THE ACE WRAP, GAUZE WRAP AND GAUZE. **DO NOT REMOVE THE WHITE BANDAIDS (STERISTRIPS) ACROSS THE SKIN OR ANY SUTURE MATERIAL YOU NOTICE.**
- If you note increasing drainage on the gauze, increased redness around the wound (spreading), or milky drainage from the wound, please call the office.
- To avoid infection, keep surgical incisions clean and dry- you may shower by placing a large garbage bag over the brace starting the day after surgery- NO immersion of operative arm (i.e. bath/pool) and no water running over the wound.

### ❖ MEDICATIONS

- The incisions are injected with a medication that makes the area numb; however, this will wear off in 8-12 hours. We recommend that you start pain medications when you get home so that it's in your system before this wears off.

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- Along with this, some patients receive a block that makes the entire arm numb. This also wears off in 8-12 hours and you'll notice a difference in your pain control.
- Most patients will require narcotic pain medications for a short period of time (max. 6 weeks)- this must only be taken as prescribed/written on the bottle.
- Common side effects of the pain medication are nausea, drowsiness, and constipation- to decrease the side effects, take medication with food- if constipation occurs, consider taking an over-the-counter laxative.
- If you are having problems with nausea and vomiting, please contact the office at (510) 739-6520 and speak with a staff member about possible medication changes.
- **Do not** drive a car or operate machinery while taking the narcotic medication.
- Ibuprofen 800mg (i.e. Advil) may be taken in between narcotic pain medication to provide baseline relief, reduce the overall amount of pain medication required, and to help increase the time intervals between narcotic medication usage.

### ❖ ACTIVITY

- Keep your arm in the sling at all times until the first post-operative visit except for performing the pendulum exercises seen below. Perform these exercises with the splint on.



- NO driving until instructed otherwise by physician and no driving while taking narcotic pain medications.
- May return to sedentary work ONLY or school 3-4 days after surgery, if pain is tolerable. If any work/school notes are needed, please contact Becca or your designated clinic (U.S. Healthworks).

### ❖ SLING

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- Your sling can be worn at all times (day and night-exercises) except for
- The sling can be removed for showering but the arm should remain supported.

## ❖ ICE THERAPY

- Begin immediately after surgery.
- Use ice machine or ice (if machine not prescribed) every hour for 30 minutes daily until your first post-operative visit. Icing is a perfect time to also perform elevation.

## ❖ EXERCISE

- Formal physical therapy (PT) will begin after your first post-operative visit and the script is sent directly to the PT location.

## ❖ EMERGENCIES\*\*

- Contact Becca (cell phone: 408-707-0613) if any of the following are present:
  - Painful swelling or numbness
  - Unrelenting pain
  - Fever greater than 101.5° at least 48 hours after surgery or chills
  - Redness that is spreading around incisions
  - Continuous drainage or bleeding from incision (a small amount is expected)
  - Excessive nausea/vomiting
  - Difficulty breathing/chest pain- Consider going directly to the nearest emergency room if this is persistent
- \*\*If you have an emergency after hours or on the weekend, contact Becca on her cell number. She can connect you with me.
- **\*Do NOT call the hospital or surgery center.**
- \*\*If you have an emergency that requires immediate attention, proceed to the nearest emergency room.

## ❖ FOLLOW-UP CARE/QUESTIONS

- You will receive a call within 48 hours of your surgery to check on your status.
- If you have additional questions, please feel free to email them to [becca.lopez@formortho.com](mailto:becca.lopez@formortho.com)
- If you do not already have a postoperative appointment scheduled, please contact the office during normal business hours (8:00am-5:00pm) and ask to schedule between 7-14 days after your surgery.

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Please discharge patient when discharge criteria have been met. Patient is alert, oriented, and ready for discharge.

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PHYSICIAN SIGNATURE

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DATE

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RN SIGNATURE

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DATE