



Discharge Instructions for Clavicle Fracture Surgery

Activity:

Use arm sling at all times. Start pendulum exercises the day after surgery. You are allowed to remove the sling a few times a day to move the elbow, wrist and fingers. No active range of motion of shoulder. No lifting.

Wound Care:

Unless there is a contraindication, your incision will be closed using absorbable suture and sealed with skin glue. Keep your dressing and incision clean and dry until you return to the office for wound check. You may remove your dressing after 3-5 days. Use new clean dry gauze to cover.

Ice/Cold Therapy:

Ice can help decrease swelling, soreness, and pain. Put ice or a cold therapy pad over the surgical area for 20 minutes at a time with at least an hour off between icing. A skin barrier, such as a towel, should always be used to prevent injury to the skin.

Bathing:

Take sponge baths until 2 weeks after date of surgery. After your first follow-up appointment, you may take regular showers. Do not scrub your incision. You may clean it with plain warm water, and gently pat it dry. Keep the area clean and dry. No baths or soaking the incision for at least 3 weeks after surgery.

Diet:

Resume your normal diet when you feel well. If your stomach is upset, try bland, low-fat foods like plain toast, broiled chicken, toast, and yogurt. Continue to drink plenty of fluids. Many people are constipated after surgery. This can be due to the pain medicine and a lack of activity. Be sure you get plenty of fluids and take a fiber supplement such as Citrucel or Metamucil or a stool softener like Colace.

Medications:

- Please use narcotic medications (Norco, Percocet) sparingly and slowly try to decrease the amount and frequency over the next two weeks.
- If you feel the narcotic pain medication is too strong, you may use acetaminophen instead. Avoid taking ibuprofen since it has been shown to delayed bone healing.
- If you choose to take anything other than what was prescribed, please consult the pharmacist to ensure that you are not overdosing on a certain class of medication which can lead to severe kidney/liver damage.
- One of the side effects of narcotics is constipation. Be sure you drink plenty of fluids, and take a fiber supplement such as methylcellulose (Citrucel) or psyllium (Metamucil) or a stool softener like docusate (Colace).
- Please continue all medications that you were taking prior to your surgery in addition to the medications prescribed for post-operative pain. If you have questions regarding those medications that you were on prior to surgery, please contact your primary care physician.

**Driving:**

It may be 6-8 weeks after surgery before it is safe for you to drive. For your safety, you must not drive until you are no longer taking narcotic pain medicines and you can move and react easily.

Follow-up Appointments:

- Your first post-operative appointment will be in 10-14 days.
- If you do not have these appointments set up, please call the appointment line **817-809-2660**
- If there is an emergency and you are unable to reach anyone in the office, please go straight to the emergency room.
- Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

When to call for help:

Call 911 anytime you think you may need emergency care. For example, call if:

You pass out (lose consciousness).

You have severe trouble breathing.

You have sudden chest pain and shortness of breath, or you cough up blood.

You have severe nausea or vomiting.

Call the office if:

You have pain that does not go away after you take pain pills.

You have a fever over 100.4°F.

You have loose stitches, or your incision comes open.

Your incision keeps bleeding 3 days after your surgery.

You have signs of infection, such as redness around incision or pus draining from your incision.