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Gluteal tendon Repair Post-Op Instructions

Sports Medicine

MEDICATION

- A strong pain medication has been prescribed for you. Take as instructed and as needed.
 - o Pain medication may cause constipation. You may take an over the counter stool softener (Colace, Senekot, etc) to help prevent this problem.
 - o You should take these medicines with food or they may nauseate you.
 - o You may not drive or operate heavy equipment while on narcotics
- If you have a nerve block, begin taking the pills as you feel your sensation returning to prevent a sudden onset of extreme pain (typically 10-12 hours after your surgery). **DO NOT WAIT UNTIL THE BLOCK COMPLETELY WEARS OFF.**
 - o Most patients find it helpful to take two pills 10-12 hours after surgery and another 1-2, four hours later to help transition to oral pain medications.
 - o The first 48 hours are typically the worst for pain and gradually improves.
- You will be prescribed **Aspirin** for prevention of blood clots, begin the day AFTER surgery.
- Resume all home medications unless otherwise instructed.
- Call immediately to the office, (979) 776-0169, if you are having an adverse reaction to the medicine or have any questions

WOUND CARE

- Leave your bandage on. You can shower over the bandage but do not submerge UNDER water (no baths, hot tubs, pools yet)

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CRUTCHES

- It's ok to place your foot on the ground with 25% of your weight on the operative leg x 3 weeks
- Crutches or a walker will be needed until your physical therapist and Dr. Luedke deem them unnecessary. This decision will be based on strength in the involved leg and your ability to walk with a normal gait (heel to toe walking without a limp).

BRACE

- You should not need a brace after surgery unless specifically instructed and provided

EXERCISE

- No moving the hip past 90⁰ flexion, No internal rotation or turning the knee inward, No Abduction (moving leg outwards as in getting out of a car) past 10⁰, no climbing stairs or sitting in low lying chairs

SLEEP

- Nighttime will probably be the most uncomfortable time. You should use the sleeping aid as prescribed or take a Benadryl if needed to assist you in resting well.

COLD THERAPY

- Ice or cryo-cuff (if you are given one) should be used for comfort and swelling. Use it at least 20 minutes at a time. Many patients use it an hour on then an hour off while awake for the first 2-3 days.
- Never apply directly to exposed skin. Place a dishtowel or t-shirt between your skin and the ice or cryo-cuff.
- A simple bag of frozen peas may be used as an inexpensive ice pack. Buy several bags of peas, place in a gallon size zip-lock bag making



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them about an inch thick and removing as much air as possible. Return to freezer, lying flat after you have finished.

BRUISING

- The lower leg may become swollen and bruised, which is normal. This is from the fluid and blood from the knee moving down the leg and should resolve in 10- 14 days.
- If you experience severe calf pain and swelling, call the office immediately.

EMERGENCIES • If you have an emergency contact Dr. Luedke's office at (979) 776-0169 and he will be contacted.

- Contact the office if you notice any of the following:
 - Uncontrolled nausea or vomiting
 - reaction to medication
 - inability to urinate
 - fever greater than 101.5 (low grade fevers 1-2 days after surgery is normal)
 - severe pain not relieved by pain medication/ice/elevation of leg
 - redness or continued drainage around incisions (a small amount is normal for a few days)
 - calf pain or severe swelling.
- **If you are having chest pain or difficulty breathing, call 911 or go to the closest emergency room.**

DRIVING – if surgery is on the right leg

- You may drive when off all narcotics and have stopped using crutches. Typically this is at 4-6 weeks when cleared by your physician
- You must be able to brake firmly and comfortably.

If you have any questions, please do not hesitate to contact the office.

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