

# Post-Operative Care Recovery Protocol

Date: [Insert Date]

To: [Patient's Name]

From: [Doctor's Name / Clinic Name]

Subject: Recovery Protocol Following Your Recent Surgery

**Dear [Patient's Name],**

We hope this message finds you well. As you recover from your recent surgery on [Insert Date of Surgery], we would like to provide you with a comprehensive recovery protocol to ensure a smooth healing process.

## **Post-Operative Care Instructions:**

- **Rest and Relaxation:** Ensure you get plenty of rest. Avoid strenuous activities for [insert duration].
- **Medication:** Take prescribed medications as directed. Do not exceed the recommended dosage.
- **Wound Care:** Keep the surgical site clean and dry. Change dressings as instructed.
- **Diet:** Follow a light diet for the first few days. Gradually return to normal eating as tolerated.
- **Follow-Up Appointments:** Attend follow-up appointments on [insert date] to monitor your progress.

## **Signs to Watch For:**

Contact our office immediately if you experience:

- Increased pain not relieved by medication
- Fever above 101degF (38.3degC)
- Unexpected swelling or redness around the surgical site
- Nausea or vomiting that persists

Your health and wellbeing are our top priority. Please do not hesitate to reach out if you have any questions or concerns during your recovery.

**Wishing you a smooth and speedy recovery!**

Sincerely,

[Doctor's Name]

[Clinic Name]

[Contact Information]