

Orthopedic Surgery Recovery Plan

Date: [Insert Date]

Patient Name: [Insert Patient Name]

Patient ID: [Insert Patient ID]

Surgery Details

Type of Surgery: Tendon Repair

Date of Surgery: [Insert Surgery Date]

Post-Operative Instructions

- Rest and Elevation: Keep the affected limb elevated to reduce swelling.
- Ice Application: Apply ice packs for 20 minutes every 1-2 hours.
- Pain Management: Take prescribed pain medications as directed.
- Wound Care: Keep the surgical site clean and dry.
- Follow-Up Appointment: Scheduled for [Insert Date].

Physical Therapy Plan

Begin physical therapy sessions [Insert Start Date] as per the following plan:

- Weeks 1-2: Gentle range of motion exercises.
- Weeks 3-6: Progressive strengthening exercises.
- Weeks 7-12: Functional training and gradual return to daily activities.

Signs of Complications

Contact your healthcare provider if you experience:

- Increased pain or swelling.
- Redness or warmth at the incision site.
- Fever over 100.4degF (38degC).

Contact Information

If you have any questions or concerns, please contact our office at [Insert Phone Number].

Sincerely,

[Your Name]

[Your Title]

[Your Practice Name]