

When Your Child Needs Orthopedic Surgery

Your child is having bone or joint surgery. A doctor called an **orthopedic surgeon** will do the surgery. This sheet will help you and your child get ready and know what to expect.

How is the surgery done?

There are two types of surgery. The doctor will talk with you about which surgery your child will have.

- **Open surgery.** This is done through one incision (cut). This cut is large enough for the surgeon to have a direct view of the area to be operated on.
- **Arthroscopic surgery.** This is done through a few small incisions. This is called arthroscopy. A tube with a tiny video camera and a light, called an arthroscope, is used. It is put in one of the incisions. This gives the surgeon a clear view of the area being operated on. The surgery is done through the other small incisions.

Helping your child prepare

Having surgery can seem scary. You can help your child by getting ready in advance. How you do this depends on your child's needs. Our hospital has Child-Life Specialists who can help you and your child prepare. Here are some tips:

- Explain the surgery to your child in brief and simple terms. Young children have shorter attention spans, so do this shortly before the surgery. Older children can be given more time to understand the surgery.
- Point out the body part that will be operated on.
- Tell your child that they will get medicine so they don't remember the surgery. It will seem like they are sleeping. Tell your child that they won't feel the surgery being done.
- Let your child ask questions.
- Use play when appropriate. Role play with your child's favorite toy or object. It may help older children to see drawings of what will be done during surgery.
- Help your child pick a small comfort item to bring to the hospital. This can be a toy, stuffed animal, blanket or other comfort item. Your child will be able to keep the item until surgery starts.

The weeks before surgery

Someone will most likely need to stay home with your child after surgery. Parents may need to plan on taking time off for this surgery. If you have not already done so, work with your employer to plan for time off of work. Your child's surgery qualifies for Family Medical Leave Act (FMLA). Your health care provider can help you fill out the forms that are needed.

You will be given instructions to help your child prepare for surgery. Carefully follow the instructions given to you by your child's surgeon. Below are common instructions for most surgeries.

- **Tell your child's doctor what medicines your child takes.** This includes over-the-counter medicines like ibuprofen, herbs and supplements. Your child may need to stop taking some medicines before the surgery. This will help prevent bleeding and other problems during and after the surgery.
- **Make sure your child's stomach is empty the morning of surgery.** You will get instructions about not eating and drinking before the surgery. Follow the instructions carefully. If your child eats or drinks, the surgery may be cancelled.
- **A bowel preparation may need to be done to prevent constipation.** Follow your health care provider's directions. This may include using a laxative, such as Miralax™ as well as giving more fluids and fiber.

The day of surgery

- Get to the hospital on time. You will need to fill out some forms.
- Your child will be given a gown to wear.
- An **anesthesiologist** will meet with you. They will talk about the medicines that will be given to your child for surgery. Please be sure to ask any questions you have.
- Many people will ask you to tell them which part of the body is being operated on. This is required and is for your child's safety. The body part may also be marked with a pen.
- Your child will be given an intravenous (IV) line. It is used to give your child fluids and medicine. Depending your child's age, the IV line may be put into the arm or the hand. The IV may be started after your child has the anesthesia.

During the surgery

- Your child will be given general anesthesia. This is medicine that keeps your child from remembering the surgery.
- A soft tube called a catheter may be put into your child's bladder. This helps drain urine during and right after the surgery.
- Drain lines may be used to take blood and other body fluids away from the wound.

After surgery: In the hospital

- After surgery, your child will go to the recovery room. This is also called the post-anesthesia care unit or PACU. Monitors will be attached to your child. The monitors watch over your child's breathing, blood pressure and pulse.
- Your child will be given pain medicine as needed.
- If a catheter was used to drain urine, it will likely be removed shortly after surgery. The IV line will stay in for a few days.
- In some cases, the surgery is done as an outpatient. This means your child goes home the same day. Other times, your child needs to stay one or more days in the hospital.

After surgery: At home

- Give your child all medicines as instructed. Pain control after surgery is important to help with healing, so give pain medicines on schedule for the first few days. Your child will start to go longer before asking or acting like pain medicine is needed. Pain medicine may make it hard for your child to have bowel movements (pooping). This is called constipation.

At home (continued)

- Medicines for constipation will be started either before or after surgery. Miralax™ is an over-the-counter type that is used. Laxatives or stool softeners should be used at home until your child is off pain medicines.
- Schedule a follow-up visit with your health care provider as instructed.
- Being active helps your child heal, but too much activity can harm the incision. Be sure to follow the activity instructions you are given.
- If your child needs physical therapy during recovery, it may be started soon after surgery. Most often this is after the wound is healed and your child is feeling up to it.
- You will learn about daily wound care before discharge. Try to keep your child's wound clean and dry. If there is drainage, the dressing should be changed. You may need to change the dressing twice a day to keep the wound dry.
- The health care provider will tell you when your child may shower. This will be after the wound is closed up.
- Return to school or work. At first, your child will need extra help at home with their basic needs. Your child may return to school or work when they feel up to it. This depends on the surgery your child had as well as their own recovery. It may be helpful for your child to start with half days and then slowly work up to full days.
- Follow all other instructions that your child's health care provider gives you.

If your child has a cast or splint, call your child's health care provider if:

- The part of the body with the cast tingles or feels numb.
- The cast feels too tight or too loose.
- You see a rash under the cast or splint.
- Fingers or toes swell, feel very cold, or turn blue or gray.
- The cast or splint cracks or has rough edges that hurt.
- The cast gets wet (unless your child has a waterproof cast).

ALERT: Call your child's doctor, nurse, or clinic if you have any questions or concerns or if your child has:

- A fever of 102° F (38.9° C).
- A hard time pooping, or has very hard stools.
- Pain or swelling at an incision site.
- Drainage from an incision that gets worse or changes color.
- Redness around an incision that gets worse.
- Bleeding from the incision.
- Special health care needs that were not covered by this information.

This teaching sheet is meant to help you care for your child. It does not take the place of medical care. Talk with your healthcare provider for diagnosis, treatment, and follow-up.