

Post-Op Medication Tracker

Take everything exactly as prescribed

Patient _____ Surgery _____ Date _____

Write in your actual prescriptions below. The names shown are the medicines Dr. Pettit commonly uses — your exact medicines, doses, and timing come from your prescription labels and post-op protocol.

MEDICATION	WHAT IT'S FOR	MY DOSE	WHEN / HOW OFTEN	NOTES
Acetaminophen Tylenol	Base pain control — take around the clock	_____	_____	Foundation medicine. Do not exceed your daily limit (per Dr. Pettit's protocol, no more than 3,000 mg in 24 hours). Avoid other products that also contain acetaminophen.
Anti-inflammatory (NSAID) Celebrex, Meloxicam, or Ibuprofen	Reduce pain & swelling	_____	_____	Take with food . Alternate with Tylenol. Do not combine with other NSAIDs (Advil, Aleve).
Breakthrough pain Oxycodone	Only for severe pain not controlled by the above	_____	_____	No driving, alcohol, or machinery. May cause drowsiness & constipation. Take only as needed.
Nonopioid pain medicine Journavx (suzetrigine)	Moderate to severe pain — replaces oxycodone	_____	_____	If prescribed, this replaces oxycodone — do not take both. Loading dose 100 mg the evening of surgery, then one 50 mg tablet every 12 hours; do not take before surgery. No grapefruit or grapefruit juice. Tell us if you have liver disease, take hormonal birth control, or take a CYP3A medicine.
Blood thinner (clot prevention) Aspirin — or Eliquis / Lovenox	Prevent blood clots (DVT)	_____	_____	Keep taking for the full course (often about 30 days). Do not stop without asking us.
Anti-nausea Zofran (ondansetron)	Nausea, as needed	_____	_____	
Muscle relaxer Flexeril (cyclobenzaprine)	Muscle spasms, as needed	_____	_____	Causes drowsiness.
Antibiotic As prescribed	Help prevent infection	_____	_____	Finish the entire course.
Stool softener Colace (docusate) ± MiraLAX	Prevent constipation from pain meds	_____	_____	Start the day of surgery. No bowel movement in 2 days → add a gentle laxative; 5 days → stop the opioid and call the office.
Other / home medication	—	_____	_____	
Other / home medication	—	_____	_____	

MEDICATION SAFETY

- Tylenol + an anti-inflammatory are the **foundation**; use breakthrough pain medicine only when needed.
- If you were prescribed **Journavx, it replaces oxycodone** — do not take both, and avoid grapefruit.
- Keep a daily **stool softener** going while on pain medicine.
- Take the NSAID and antibiotic **with food**; don't mix two NSAIDs.
- Keep taking your **blood thinner** for the full course to prevent clots.
- **No driving, alcohol, or machinery** while taking opioid pain medicine.
- Dispose of leftover narcotics at a police or fire station.



www.robertpettitmd.com

Evidence. Experience. Exceptional Care.

✓ **Daily dose log**

WRITE THE TIME YOU TAKE EACH DOSE

DATE	PAIN 0–10	TYLENOL (TIMES)	ANTI-INFLAM.	BREAKTHROUGH	BLOOD THINNER	OTHER	BM ✓

CALL THE OFFICE RIGHT AWAY FOR

- ⚠ Fever of 101°F or higher

⚠ Wound redness or drainage (other than a little blood)

⚠ Deep calf pain and swelling
- ⚠ Sudden increase in pain or swelling

⚠ Increased warmth around the incision

⚠ Severe abdominal pain, or no bowel movement in 5 days

Call the office: (513) 354-3700 · Direct line (513) 441-5639 — Call 911 for chest pain or trouble breathing.



www.robertpettitmd.com

Evidence. Experience. Exceptional Care.