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The practicalities of **ANKLE and HINDFOOT/ MIDFOOT surgery**

1. CAST/ BACK SLAB, MOONBOOT* - At the end of the surgery your foot will be placed into one of these. The most common is a back slab which is a ¾ cast to allow for swelling. Contact the rooms if too tight, bleeding or wet.
2. PAIN CONTROL: **Local anaesthetic** will be placed into the area of surgery, or a nerve block. The nerve block can make the foot numb for up to 48 hrs. The local block wears off in 6-12 hours. Make sure you are taking pain medication prescribed BEFORE the pain block wears off.
3. MOBILITY: After most surgeries unless told, you will need to be **NON- WEIGHT BEARING** (not putting any weight on the foot/ankle) - this means using crutches, a frame, or a KNEE SCOOTER for ambulation/ moving around. If you anticipate difficulty, pre-surgery training with a **physiotherapist #** can be valuable.
4. ELEVATION: Swelling after Foot and Ankle surgery can be significant. Being upright/erect, can lead to excessive swelling. It's important to keep the foot elevated at the level of your heart (roughly) as much as possible for the first 10 days. That's 2 pillows. Don't let the foot hang dependent/ down for longer than 20-30 minutes when moving around in this time.
5. SHOWERING/ BATHING - It's really important to keep the dressings and the cast dry until removed and instructed after your post-surgery visit and examination. Ways of doing this are:

   1. Place a plastic bag over the thigh and shower sitting down on a plastic stool/chair placed in the shower with the op foot elevated on a second stool. Not cling wrap!

   2. Use a **cast cover*** which seals the limb for showering.

   3. Bath with one's foot on the edge of the bath- but still seal with a plastic bag.
6. PAIN CONTROL - the first 48 hrs. are the worst, then it starts easing off. Wean yourself from the high schedule drugs if pain improving. (e.g.Targinact/ Tramadol ...) Your foot/ankle will respond favorably to elevation with regards pain.
7. OTHER ADVICE - Watch for **constipation** and take a laxative if vulnerable.
8. POST OP VISIT - This will usually be 9-12 days post-surgery. The practice will let you know a time - on a Wednesday afternoon, at Prof's rooms, Kingsbury Med suites - most likely. At this visit you will have the back slab splint/cast/boot removed and the incisions checked and re-dressed. Then depending on the surgery placed into a boot or a cast. You will be given instructions at this time about further post op care.
9. DRIVING: No driving after surgery even after a local anaesthetic due to risks of side effects of medication. When you can get back to driving a car depends on the side of surgery (right or left) and the surgery done its self: Generally if you have had surgery on the Right foot/ankle you cannot drive for 6-8 weeks. If on the L foot, Ankle you may be able to drive an AUTOMATIC car after 3 weeks, being careful getting in and out of the vehicle. At the post-surgery visit you will get more further instructions.

 # Physiotherapists - Your own physio OR
WEST Physiotherapists- Claremont (KBY) - 021 671 5300

***Items** – avail to buy from:

Malcolm Freedman – orthotist/ prosthetist,
ORTHOPRO, at 1st Floor, Kingsbury Med Suites
021 206 7877
or Medical suppliers/ local pharmacies
MOONBOOT – If borrowing - Try on boot for correct size. Ensure that boot has all parts and works properly. Wash before use!

Boot size	Shoe size
check that calf fits too	
Small	**3 - 6**
Med	**7 - 9**
Large	**9 - 11**
X-large	**11 +**

GENERAL EXPECTATIONS + GUIDELINES see overleaf

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GENERAL EXPECTATIONS + GUIDELINES

These guidelines are adjusted according to your specific surgery.

- You **will** require **help at home** while on 2 crutches/ non-weight bearing.
- **Elevation** - Elevate op leg at home, most of the time/ as directed for at least 2 weeks – gutter pillow (opt) / 2-3 cushions i.e. foot higher than heart, until first post-op appmt at 9-12 days.
- Avoid lying/sitting with heel on same spot, turn foot from side to side. Place a pillow under calf and ankle, NOT under heel.

Equipment

- ***Crutches*** *(metal, elbow)* * - If required -Please obtain before surgery and practice if possible / available after op in ward – physio will show you how to use them and teach post-op exercises.
- Moon boot (long) – check size needed, and long loose stretchy cotton sock – usually only needed at first post-op visit.
- Knee Scooter – if indicated

Keep cast or bandages on operated foot dry

- Shower/ basin wash initially or Bathing. *Cast cover** / plastic bag + towel on thigh
- Take anti-clotting medications if prescribed.

PREPARATIONS AT HOME - for post-op period

Bathroom

Keep dressings dry – cast cover or plastic bag + towel
Plastic chair in shower + higher stool, or bath with foot on edge.
Non-slip rubber mat/ towel on shower floor

Seating – avoid sitting still for long periods of time – to prevent stiffness, swollen feet + possible clots.
Helpful - Upright chairs with armrests

Reduce risk of tripping – wet floor, loose rugs/ carpets, animals, electrical cords, toys....

Stairs with crutches

– UP - Good leg up first, followed by op leg
– DOWN - Crutches first, then op leg, then good leg.

Other helpful tips

Crutches* – store in corner/ upside down
To carry items with you on while on 2 crutches
- Bag with long handles over neck/ backpack/ moonbag
Plastic urinal "bottle" for men/ women - useful at night - optional
A satin/ microfibre pillowcase is useful at night as your foot can slide more easily, and it keeps your sheets cleaner once weight bearing.

No open wounds pre-op.

Stop some meds pre-op (to reduce risk of bleeding)
- **?** days pre op – anti-clotting + anti-inflammatory meds e.g. Disprin, Ecotrin, Nurofen, Voltaren, Coxflam etc

Allowed pre-op for pain – Panado/ Painblok, Stilpane, Synaleve, Tramacet

Reduce risk of **constipation** especially if vulnerable.
- Pre-op - Avoid heavy meal with meat and fat day before op.
- Post-op – fluids++, veg, fruit, yogurt, oat bran, laxatives etc

Night before Operation

- Nil per mouth - 6 hours pre-admission or as directed.
- Do not shave operation site at home, and don't shave legs for last 3 days pre-op (micro-cuts).

BRING TO HOSP

Loose trousers/ shorts/ skirt to fit over bandage/ cast.

Crutches - if your med aid does not cover orthopaedic appliances
NO VALUABLES except cellphone

- **ALL VALUABLES AT OWN RISK**

HOSPITAL

Bring ID document + Med Aid card.
Admission time - as directed by Prof's secretary – see op info notes issued.

Anaesthetist

- Discuss anaesthetic, pain meds. Pre-med if indicated pre-op.

Foot soak in antiseptic solution

➔ Operating Theatre
➔ Drip/ IV, nerve block + conscious sedation/ asleep for op
➔ Op > Recovery > Ward - Discharge

Pain control – prescribed as appropriate to patient's needs.

Wound - covered with bandages and a ¾ cast or moonboot.

CALL – DON'T FALL! Ask a nurse to walk with you while at hospital.

Physio – practice: walk (crutches), chair, toilet, stairs, + exercises.
Ask any questions before going home.

Hosp Stay – usually on the day of op. Overnight if indicated

DISCHARGE – loose clothing – to fit over bulky bandage/ cast.
Prescription provided – meds to be obtained from own pharmacy:
- Meds for pain – take regularly as needed, not compulsory.
- Anti clotting tablets – if prescribed, complete the course.
- Crutches/ knee scooter, cast/ boot/ post-op shoe as per surgeon.

AT HOME

Elevate – as directed to reduce swelling and pain.
Expect:- bruising, swelling, warmth, numbness, + discomfort/ pain.

- Do basic leg **exercises** as per physio in hospital - to improve circulation.

- Take **pain medication** +/ anti-inflammatories regularly initially, as needed – if no pain then meds are not compulsory.

Dressing change: 9-12 days post-op, usually Wed afternoon. Sec will call you to book appointment. Bring a borrowed Moonboot (long**, not short boot**)* + long loose sock - see previous page for sizes. New boots + socks are available to buy at Doctor's rooms.

REPORT any **unusual/ new symptoms** such as**:** fever; excessive/ increasing pain or swelling that doesn't settle; bleeding; wet/ very loose dressing; irritation from cast - email photo