HARDWARE REMOVAL POST-OPERATIVE GUIDELINES

INITIAL SURGICAL DRESSING

A gauze dressing will be in place and may be covered by a padded cast called a splint. Caution is used to avoid sliding when the cast is resting on a hard floor surface. The dressing will be removed on your first post-operative appointment in the office. Keep the dressing/splint clean and dry. You may notice bleeding or drainage on your bandage. This is not unusual. Do not remove the bandage. You may apply another bandage over if necessary. If bleeding is excessive, call the Surgeon on call.

BED REST, ELEVATION, AND WEIGHTBEARING

Bed rest is prescribed for at least three days <u>after</u> operation. During the period of bed rest, the feet are elevated above the level of the heart. Partial weightbearing is allowed after the first 24 hours only when absolutely necessary. Continue elevating the foot/feet when at rest as often as possible; this will help decrease swelling and pain. It is better to be up frequently for short periods of time rather than being up fewer for longer periods of time and this will increase swelling and pain. Confinement to the house for the first week is recommended.

PAIN MANAGEMENT

Local anesthetic and often a nerve block is used to anesthetize or numb the surgical area. This will numb the pain for approximately 4-24 hours after surgery.

Oral pain medication is prescribed, and given to the patient before surgery. Fill the prescriptions as soon as possible and begin taking them as directed for the first three days, as this tends to be the most painful period. Then the pain medication can be scaled back as pain lessens. Pain medication is constipating. Increased fluid intake and over the counter stool softeners are recommended to be started after surgery. If pain is intolerable during the first 24 to 48 hours: Phone the surgeon on call

CRUTCHES/WALKER/CANE

Crutches or a walker are usually used for the first week as needed. A walker is recommended if one is not feeling secure with the crutches. After using the crutches, a period of using a cane may be useful while transitioning to full weightbearing.

BANDAGES AND CASTS

First week (days 0-6): The soft bandage may be covered by a splint.

Second week (days 7-13): Soft bandage will be applied.

Third week (days 14-20): Sutures will be removed and a soft dressing applied and transition into normal shoes is allowed as swelling and pain allow.

SHOWERING AND DRIVING

Keep the operative area dry when showering. This can be done with a cast bag or trash bags secured with duct tape or a thick rubber band. The incision site can get wet 24 hours after the sutures are removed.

Driving may not be safe for about 1-2 weeks after operation if the right foot is operated upon. If the left foot is operated upon, driving is usually practical earlier.

REHABILITATIVE EXERCISES

First week (days 0 - 6): Tighten the muscles of the foot and leg without excessive deliberate motion in the toes or ankle. Tighten the muscles for 20 seconds, relax briefly and repeat. A "set" of isometric contractions is 5. Do a set each hour until the cast is discontinued.

Second Week (days 7-13): Gentle range of motion exercises can begin when splint is removed.

Third Week (days 14-20): Increase activity as weight bearing is allowed and tolerated. Physical therapy can be started at this point if the patient chooses to do so.

SKIN CARE

Beginning when the cast is taken off, soften the skin with Vaseline, vitamin E ointment or a thick hand lotion like Curel. Avoid the surgical sites until they are completely healed and there is no drainage. Do 2 or 3 times a day.