

# CONGRESS ORTHOPAEDIC ASSOCIATES, INC.

WWW.CONGRESSMEDICAL.COM

## IN MEMORIAM

C.W. LAMBERT, M.D.  
ROSS LAMBERT, M.D.  
GEORGE L. MULFINGER, M.D.

## ORTHOPAEDIC SURGERY

**PASADENA LOCATION**  
RICHARD C. DIEHL, JR., M.D.  
GREGORY J. ADAMSON, M.D.  
JAMES A. SHANKWILER, M.D.  
MICHAEL J. FRAIPONT, M.D.  
WILLIAM M. COSTIGAN, M.D.  
TODD B. DIETRICK, M.D.  
KENNETH R. SABBAG, M.D.  
THOMAS G. HARRIS, M.D.  
ROY F. ASHFORD, M.D.  
TIMOTHY J. JACKSON, M.D.

## PASADENA

800 S. RAYMOND  
PASADENA, CALIFORNIA 91105  
(626) 795-8051  
Fax (626) 795-0356

## ARCADIA

289 W. HUNTINGTON DRIVE  
SUITE # 103  
ARCADIA, CA 91007  
(626) 821-0707  
Fax (626)821-0239

## BILLING CORRESPONDENCE

P.O. BOX 90730  
PASADENA, CA 91109

## ORTHOPAEDIC SURGERY

**ARCADIA LOCATION**  
GARY M. MOSCARELLO, M.D.  
JOHN T. QUIGLEY, M.D.  
BRADFORD H. HACK, M.D.  
RISHI GARG, M.D.  
JOE Y.B. LEE, M.D.  
STEVEN D. LIN, M.D.  
PAMELA C. LUK, M.D.

**INTERNAL MEDICINE/RHEUMATOLOGY**  
IN CHANG KIM, M.D., F.A.C.P.

**PHYSICAL MEDICINE & REHABILITATION**  
RAYMOND D. GRITTON, M.D.

**OCCUPATIONAL MEDICINE**  
WILLIAM R. DIETRICK, M.D.

**ANESTHESIOLOGY**  
AMY KIM, M.D.  
KALYANI V. KARANDIKAR, M.D.

## ACHILLES TENDON REPAIR POST-OPERATIVE GUIDELINES

### INITIAL SURGICAL DRESSING

A gauze dressing will 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 after operation. During the period of bed rest, the feet are elevated above the level of the heart. 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.

Remain nonweight bearing for the first two weeks after surgery. The use of crutches, a walker, wheelchair or knee scooter should be used as a walking aid.

### 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. If pain is intolerable during the first 24 to 48 hours: Phone the surgeon on call

## **DRESSING, WEIGHTBEARING AND PHYSICAL THERAPY**

**First week: (days 0-6) The bandage will be covered by a splint. The patient is to remain nonweight bearing with the help of a walking aid.**

**Second week: (days 7-13) In the splint isometric exercises can be done. Tighten the muscles of the thigh. Lift the leg off the bed and push the leg into the bed. Avoid tightening the muscles of the lower leg or calf or attempting to move the 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.**

**Third week: (day 14-20) Sutures are removed and a removable walker boot with three heel wedges is applied. The removable walker boot is used at all times, even when sleeping. It is removed for doing exercises and showering. Partial weight bearing with crutches and the walking boot with three wedges in place. Formal physical therapy begins.**

**Fourth week: (day 21-27): One wedge is taken out of walking boot. Weight bear as tolerated with crutches.**

**Continue taking one wedge out each week and weight bear as tolerated.**

**The ultimate goal is to be in tennis shoes with a heel lift six weeks after surgery. Everyone is different, however, and it is important not to push it. If pain is felt, take a step back.**

## **SHOWERING AND DRIVING**

**While a splint is in place, keep it dry when showering. This can be done with a cast bag or trash bags secured with duct tape or a thick rubber band.**

**Once the cast/splint is removed, showering can begin. Do not soak the ankle in a tub or spa until one week after the cast/splint is removed and the surgical wound is well healed and there is no drainage.**

**Driving is usually not safe for about eight to ten weeks after operation if the right foot is operated upon. If the left foot is operated upon, driving is usually practical at two to three weeks.**

## **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.**