

Recovering from Complex Foot and Ankle Surgery

Read this handout to prepare for your complex foot and ankle surgery:

- Know what to expect immediately after your surgery
- Know how to prepare your home for your recovery

Recovery for complex foot and ankle surgery is different from other foot and ankle surgeries. For more information about having foot and ankle surgery at UHN please refer to the below documents:

- "My Surgery: An Information Guide and Personal-Care Tool"
- "Having Foot or Ankle Surgery"
- "After Your Foot or Ankle Surgery"

Preparing for Surgery

Pre-admission visit

During the Pre-Admission visit:

- you learn how to prepare for surgery and what happens during surgery
- you will see a nurse and physician who will do a complete check of your health history. You may have tests such as blood work, ECG's and x-rays
- you see a physiotherapist for an assessment. They give you a list of equipment you may need after surgery. You will need to purchase or rent the equipment. The physiotherapist will tell you what equipment you will need. Some examples of equipment that might be required include:
 - a walking aid, such as a 2 wheeled walker, crutches, or knee scooter
 - commode chair (special chair for the toilet)
 - tub transfer bench or shower chair
 - grab bars and other bathroom safety equipment

The Pre-Admission visit can take up to 4 hours. Bring food or snacks with you.

Note: You must attend your Pre-Admission visit, either in person or on the phone. If you do not attend, we cannot do your surgery.

Special instructions

Before coming to the hospital for your surgery:

- Arrange for a family member or friend to drive you home from the hospital. Ask them to bring your walking aid.
- Ask a family member or friend to stay with you while you recover. Most people find it helpful to have someone stay with them for the first 4 to 6 days after leaving the hospital.
- Make sure you have food, toiletries (such as tissues, toothbrush, toothpaste, comb, brush, soap and shampoo) and medicines for 1 to 2 weeks.
- Make your meals ahead of time.
- Prepare your home for your recovery:
 - Set up your equipment so it is ready to use as soon as you get home.
 - Move furniture and rugs to make clear paths in your home. You need more room when using a walking aid.
 - If your home has stairs: Set up a space to sleep on the same floor as the bathroom and kitchen. Avoid using the stairs as much as possible.

After Surgery

Do not put any weight on your foot after surgery unless instructed by your physician. (You will likely be non-weight bearing for up to 3 months). Your physiotherapist shows you how to walk safely using your walking aid or transfer safely from bed to chair or wheel chair without bearing any weight if it is possible for you.

You will have a follow-up appointment 2 weeks after surgery. Your surgeon will check the incision and remove the sutures. A new cast or splint may be applied. At your next

follow up (usually at 6 weeks) the surgeon takes an x-ray of your foot to see how your bone is healing. They tell you if and when it is safe to put weight on your foot.

Important: Do not put any weight on your foot until your surgeon tells you it is OK.

Going Home from Hospital

Most people leave the hospital 2 to 3 days after surgery.

You may need help after leaving the hospital.

- Ask a family member or friend to stay with you while you recover.
- Hire a paid professional caregiver to visit you at home. Some health insurance plans cover the cost of professional caregivers. Check your plan or call your insurance company.
- In rare cases, if you are eligible: You may qualify for a short stay in a 24 hour care facility ("convalescent care" or "reintegration care units"). Patients can stay in these facilities for 60 to 90 days each calendar year.

Pain Management

Most patients have a popliteal nerve block to control pain immediately after surgery. A popliteal nerve block is local anesthetic (numbing medicine) a doctor injects medication into a catheter line that freezes the nerves in your foot and ankle. While you have the nerve block you may not feel much or anything or be able to move your foot and ankle.

We remove the popliteal nerve block the day after surgery. You then use prescription pain medicines orally to control pain.

- You get a prescription for narcotic pain medicine that you take every 2 to 4 hours. Common narcotic pain medicines are Hydromorphone or Oxycodone.
- Most people also get a prescription for Tylenol Extra Strength. You should take this routinely to help control pain.

Important: Do not take other pain medicines without asking your surgeon first. Some pain medicines affect how your bone heals after surgery.

- If you take pain medicines regularly: Your surgeon tells you what pain medicines to stop before and after your surgery. Do not take these pain medicines until your surgeon tells you it is OK. Common pain medicines include Celebrex®, Naproxen (Aleve®), Ibuprofen (Advil®). Medications like Methotrexate, or biologics such as Humira may be stopped by your surgeon before and after surgery.

Safely store and dispose of your pain medicine

Pain medicine that is not stored or disposed of safely could be stolen or taken by mistake.

Safe storage:

- Store pain medicine in a locked drawer or cabinet.
- Do not share your pain medicine. Pain medicine prescribed to you can be dangerous to others.

Safe disposal:

It is dangerous to keep unused or expired pain medicine that you no longer need.

- Take unused or expired pain medicine to a pharmacy for safe disposal.
- Do not flush medicine down the toilet.
- Do not throw medicine in the garbage.

When to Get Medical Help

Call your Surgeon, Nursing Unit or Fracture Clinic if you have:

- Persistent fever (temperature over 38 °C or 100 °F)
- Increasing redness around the incision (cut)
- Persistent discharge (fluid) coming from the incision
- Persistent, excessive swelling with increasing pain