

Post-Operative Instructions Peroneal Tendon Repair

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WOUND CARE

- You will be placed into a splint at the time of surgery. This splint should remain in place and be kept clean and dry until your follow-up appointment.
- Cover splint with plastic for bathing. If your splint gets wet, a hair dryer on "cool" can help. If it is still wet, call the office for a splint change.
- If your splint feels like it is pinching or rubbing, or if you feel burning in your heel, call the office.
- Do not stick anything into the splint.
- Your splint will be removed at your first post-op visit. If your skin is healed, your sutures will be removed, Steri-Strips will be placed, and you will be given a removable boot.
- Wiggle your toes frequently within your splint. This encourages blood flow and reduces swelling.
- Once your sutures are out, you may get your incision wet in the shower.
- Steri-Strips will fall off in a few days. If they have not fallen off 5 days after your sutures are removed, you should remove them to allow air to the incision.
- Do not soak your incision in a tub, pool, hot tub, or lake until the incision is fully healed.
- Do not put lotions, creams, or ointments directly on the incision until it is fully healed.

ACTIVITY

- You should elevate your ankle as much as possible after surgery. This helps reduce swelling and promote healing.
- You should ice your ankle for 20 minutes at least twice a day until your follow-up appointment.
- After your first post-op appointment, you should remove your boot for 1 hour three times per day to work on ankle range of motion exercises. These will be explained at your first post-op appointment.
- You may sleep without your boot once you are 4 weeks from surgery.
- You should be non-weight bearing for the first 4 weeks after surgery. This means no walking on your ankle. You may, however, use your toes for balance. Likely at 4 weeks after surgery you will be allowed to bear weight on your ankle as tolerated in your boot. This may change based on skin healing or other added procedures.
- Use your crutches, walker, or knee scooter for a total of 4 weeks after surgery.
- You may begin walking without the boot when you are 8 weeks from surgery.

- Returning to driving will depend on which ankle has surgery and use of narcotic medications.
- Return to work will be discussed at your post-op appointment and will depend on your job requirements.

DIET

- Anesthetic medications and pain medicines can cause nausea and constipation. It is wise to begin with liquids and bland foods until any nausea has resolved. If you have persistent nausea and vomiting, call the office.
- Be sure to drink plenty of fluids as you are recovering, especially while taking pain medicine. This will reduce the risk of constipation.
- An over-the-counter stool softener is also advised while taking narcotic pain medicine.
- Smoking severely inhibits healing, particularly after ankle or foot surgery. **DO NOT SMOKE** while you are recovering from your ankle procedure.

MEDICATION

- You may resume your regular pre-operative medications the evening of surgery unless otherwise directed.
- You will be prescribed narcotic pain medicine after surgery. Use as directed. Usually this will be needed for several days to weeks after surgery. This medicine has side effects and can be addicting. Try and wean off the narcotics as soon as you can. In most cases, patients should be off all narcotic pain medicine 6 weeks after surgery.
- You likely had a nerve block at the time of your surgery. This helps with post-op pain but will wear off 12 24 hours after your surgery. Don't wait until the block is fully worn off to start taking medicine. It is wise to have some medicine on board before the block wears off.
- Over-the-counter medicines such as Tylenol and ibuprofen are helpful. You should alternate these at the prescribed doses along with your prescribed medication.
- Pain medication will help with but not eliminate pain after surgery. Some discomfort is to be expected.

BLOOD CLOTS

- Blood clots, also known as deep vein thrombosis or DVT, are an uncommon occurrence after ankle or foot surgery but can be dangerous, even life threatening.
- Wiggling your toes and moving around help prevent blood clots.
- You will also be instructed to take medication, likely daily aspirin, to help prevent blood clots. You should stay on your aspirin until you are walking without your boot.
- Tell your surgeon if you have a personal or family history of blood clots.
- Women on oral contraceptives have an increased risk of blood clots.
- If your calf or leg becomes increasingly swollen and tender, call the office.
- If you develop pain in your chest or shortness of breath, call 911.

FOLLOW-UP

- Your first two follow-up appointments are scheduled when your surgery is scheduled. Your first appointment should be roughly two weeks after surgery. If you don't have an appointment, call the office.
- Call the office if you have any of the following:
 - Fever greater than 101.5 degrees
 - o Pain that is not controlled with medication
 - o Persistent nausea or vomiting
 - o Worsening numbness or tingling in your toes (after your block wears off)
 - o Worsening redness or drainage from your incision
 - \circ Any other concerns