



**Post-Operative Instruction Sheet for Foot and Ankle Surgery
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These precautions MUST be followed for the first 24 hours after surgery:

- Upon discharge, go directly home.
- You **MUST** make arrangements for a responsible adult to stay with you the first night following surgery. Surgery may be cancelled if you do not have someone that can stay with you.
- **DO NOT DRINK ALCOHOLIC BEVERAGES.**
- It is not unusual to feel lightheaded up to 24 hours after surgery or while taking pain medications. If you feel lightheaded, sit up for a few minutes before standing and have someone assist you when you get up to walk or use the restroom.
- Do not use any mechanical equipment or heavy machinery.
- Do not make any important or legal decisions for 24 hours or while on pain medication.
- You may experience dry mouth, sore throat, or sleep disturbances from the anesthesia and medications used during surgery. Generalized muscle aches can sometimes occur. These symptoms generally disappear by 24 hours.

The following are general guidelines and instructions about what to expect the first weeks following surgery. These are not specific, and your recovery may be slightly different. Please follow the instructions that are specifically written out for you after the surgery if there are any questions.

Pain Management

If you have received a nerve block, the pain relief can last anywhere from 12-30 hours, this also means you may not have sensation or movement in your foot for that amount of time. **You will have pain after the block wears off!** Anticipate this and start pain meds prior to the block wearing off.

- Take your first dose of the prescribed pain medication a few hours after you get home, even if you have no pain.
- Continue to take your medications as prescribed for the first 24-48 hours – **ensure that the patient (you) are alert and have no difficulty breathing before taking the medication.** Often it may be helpful to set an alarm throughout the night to ensure you don't miss a dose of the medication and wake up with a lot more pain.
- You can expect that the first two nights will be the most painful and uncomfortable. I will give you strong medication to make you as comfortable as possible, but you may still have some break-through pain. This is not unexpected, as there are many nerve endings in the foot and ankle and many patients state the pain from foot surgery is worse than most other injuries or procedures!
- After the first few days, take the medication as needed for pain.
- As your pain improves, you can gradually decrease your pain meds by utilizing Tylenol or an anti-inflammatory medication. You should also use these medications as directed early in the post-operative process to supplement the narcotic pain medication.

Dressing

Bleeding through the dressings is quite common.

- This usually occurs for the first 1-2 hours after surgery. The actual bleeding has stopped by the time you see the drainage through your dressings.
- You can reinforce the outside of the dressing with gauze and an Ace wrap unless otherwise directed.

In most cases, your first dressing change will be performed at your first clinic follow-up visit. In some cases, I may allow you to change your dressings sooner. Your dressing should be kept DRY at all times – **do not shower, bathe, or wet your dressing in any way after surgery!**

Wound Care

Once your stitches are removed, you can shower with soapy water and gently cleanse the incision if it is completely dry.

- Do not shower or wash the incision(s) if parts of the incision(s) are open or still draining.
- Do not soak the incision(s) in a bathtub or hot tub until the incision(s) is completely dry for one week.
- Do not soak the incision(s) in lake or ocean water for at least one month post-operatively.

Elevation

I recommend strict elevation of your foot above the level of your heart for 4-5 days. Elevation of the foot remains important up to two weeks after surgery to limit swelling and help wound healing.

- Elevate your foot/ankle to at least your waist level but above your heart would be best. The more you elevate your foot and ankle, the less pain you will have.
- In the first few days following surgery, restrict the time your foot is “down” to 10 minutes or less at a time.
- It is also good to keep your blood flowing through the operated leg and limit the risk of blood clots. The first day following surgery, I would encourage you to get up and move around the house for a few minutes every hour and then return to elevating the foot.
- After the strict elevation period (see above) is completed, you may gradually become more active. You should “listen” to your foot/ankle as to when to get off of it and elevate it again. This may help even months after surgery. Remember: avoid anything that hurts or makes your foot/ankle swell!

Icing

Icing can be very useful to decrease the pain and swelling of the foot.

- Start by first placing a large garbage bag over the dressing. Ice may then be placed around the extremity by using **either** bags of ice taped around the extremity or you may place the extremity in a bucket filled with ice (the dressing **MUST** be covered with a plastic bag!). Bags of frozen peas work well!
- You should ice for no more than 20 minutes at a time and repeat at 2 hour intervals.
- Do NOT place ice directly on your skin or dressing.

Activity

- In most cases (unless otherwise instructed), you may not bear weight on your operated foot/ankle for 2 weeks after surgery. That means the foot may not touch the ground when

upright! Specific weight bearing instructions for your surgery will be provided on the day of surgery.

- Your toes may experience bruising after surgery and become darker when the foot hangs down. Unless you had surgery on those toes, it is important to actively wiggle your toes for 5-10 minutes each hour.
- Many of your questions can be addressed at your 2-week follow-up appointment – please make a list of things to ask us as they come up during your recovery.

What to watch for...

- Severe swelling and/or pain in the calf: this could indicate a deep vein thrombosis (blood clot in leg) which requires urgent evaluation and treatment!
- Profuse bleeding: that which soaks through your dressing and increases in size throughout the first day after surgery.
- Blue or white toes: this indicates a lack of blood flow to the foot.
- Fever greater than 101.5: fevers less than this are very common the first few days after surgery and are unlikely to indicate infection or any unexpected problem.
- Severe pain: that which does not improve after pain medication, except for the first two nights.

If you have any of the above problems or any concerns, please contact my office (952-456-7000) and further instructions will be provided. If you are unable to reach anyone or feel you have a medical emergency, please do not hesitate to go to the nearest urgent care or emergency department.

Medications

Medications may take up to 24 hours to be refilled by my office.

All pain medications, along with inactivity following surgery, can cause constipation. Use the stool softeners as recommended, increase fluid intake to at least 1 quart per day, and increase your dietary fiber. (The “p” fruits – peaches, plums, pears, and prunes – as well as anise/black licorice are generally helpful.)

- **Antibiotics may be prescribed to limit the risk of infection only in limited circumstances.**
Kelfex (cephalexin) 500 mg – This is an antibiotic given in addition to the antibiotic given during surgery to help reduce the chance of post-operative infection.
Dosage: 1 tablet by mouth 4 times a day.

OR

Cleocin (clindamycin) 600 mg – This is an antibiotic given to those patients who are allergic to penicillin in addition to the antibiotic given during surgery to help reduce the chance of post-operative infection.
Dosage: 1 tablet by mouth 3 times a day.

- **Anti-nausea and spasms**
Hydroxyzine 25 mg – This medicine should be taken if you experience any nausea or vomiting. If you know you are sensitive to narcotics please take 1 tablet 30 minutes prior to pain medication. This may also help with any mild itching experienced with the pain medication or muscle spasms.

Dosage: 1 tablet by mouth every 6 hours as needed for nausea, itching, spasms, or adjuvant pain control.

- **Pain medications (you will only be given a prescription for ONE of the following!)**
Ultram (tramadol) 50mg – This is a pain medication that should be taken EVERY 4 TO 6 HOURS for pain relief. You should start the medication when you arrive home after surgery, before the nerve block wears off. The first 1-2 nights you may need to take 2 tablets every 4 hours. You should be given enough medication to last to the first office visit. This medication cannot be refilled over the phone!
Dosage: 1-2 tablets every 4-6 hours as needed for pain relief.

OR

Oxycodone 5mg – This is a pain medication that may be taken EVERY 3 to 4 HOURS for pain relief. You should start the medication when you arrive home after surgery, before the nerve block wears off. The first 1-2 nights you may need to take up to 2 or even 3 tablets every 3-4 hours. You should be given enough medication to last to the first office visit. This medication cannot be refilled over the phone!
Dosage: 1-2 (or 3) tablets every 3-4 hours as needed for pain relief.

OR

Norco (hydrocodone/acetaminophen) 5/325 mg – This is a pain medication that should be taken EVERY 4 TO 6 HOURS for pain relief. You should start the medication when you arrive home after surgery, before the nerve block wears off. The first 1-2 nights you may need to take 2 tablets every 4 hours. You should be given enough medication to last to the first office visit. This medication cannot be refilled over the phone!
Dosage: 1-2 tablets every 4-6 hours as needed for pain relief.

*Do NOT take any Tylenol while taking this medication! You may alternate Tylenol with this medication provided you do not take greater than 3 grams of Tylenol in total over a 24 hour time period.

- **Blood thinner**
Depending on the type of surgery and your personal risk factors, I may prescribe a medication to help limit the risk of developing a blood clot after your surgery. The length of time to take the recommended medication will be provided and typically lasts until you are moving about normally or bearing weight on the operated foot/ankle.
ECASA (enteric coated aspirin) 325mg tablet daily.
Lovenox (enoxaparin) 40mg subcutaneous injection daily.
Xarelto 10mg tablet daily.
- **Stool Softener**
Take an over the counter stool softener such as senna or Miralax starting the day after your surgery to prevent constipation. This is a common side effect of the narcotic pain medications. You may stop taking this after you have regular bowel movements or no longer require use of narcotic pain medications.

Dental Implications

Dental procedures should be avoided until your incisions are healed. Furthermore, surgical procedures including hardware or an allograft require taking an antibiotic within one hour of all dental work within 6 months of surgery. Total ankle replacements require indefinite use of

antibiotics prior to dental procedures. We would be happy to provide you with the necessary prescription upon request.

Follow-up Visits

You should have your initial post-operative visits already scheduled but if you do not recall the exact dates or do not believe they have been scheduled, please contact Emily right away to ensure that we have the appropriate visits in the system.

You will likely follow-up with my physician assistant for your first post-operative visit and for a few of the additional follow-up visits. He works directly with me on all patients and will be able to inform me if there are any concerns during your recovery process!

You can often find additional information about your procedure or condition on the TCO website at <https://www.tcomn.com/physicians/jeffrey-seybold> or <https://www.tcomn.com/specialties/ankle-care>.

Additional information from reputable orthopaedic foot and ankle surgeons affiliated with the American Orthopaedic Foot and Ankle Society can be found at <http://www.footcaremd.com>.