

Foot and Ankle Surgery

How to prepare and what to expect

This handout explains how to prepare for your foot and ankle surgery. It includes what to expect at your follow-up visits at the Sigvard T. Hansen Foot and Ankle Institute.

Before Your Surgery



Getting Ready

- We will give you:
 - 2 packages of chlorhexidine cloths to prepare your skin, with instructions on how to use them
 - A handout on when you need to stop eating and drink before your surgery
- Ask your primary care provider (PCP) if there is anything else you need to do to prepare for this surgery.
- If you have questions and your surgeon is not in clinic on that day, we may refer you to your primary care clinic, urgent care, or the Emergency Department.

Prepare Your Home

If you can, set up a place in your home where you will be able to sit with your foot up. Have a small table next to your chair or recliner for water, medicine, and food.



Sign Up for eCare

UW Medicine eCare is a free, secure, and easy way to access your health information and manage clinic visits online.

You can use eCare to:

- Send messages and photos to your care team
- Access test or lab results
- Print your referrals
- Access some of your medical records

To sign up for eCare:

- Visit <http://ecare.uwmedicine.org/prod01/accesscheck.asp>.
- Or, text text the word "ecare" to 206.520.5000.

Assistive Devices



You may need to buy or rent assistive devices. These are also called *durable medical equipment* (DME). To find the devices you need, look for a medical supply store in your area. Or search online for “medical supplies.”

You may have a consult with a Physical Therapist (PT) to learn how to use your equipment safely. We can help you get a short-term permit for disabled parking, if needed.

Devices you might need include:

- Knee scooter, crutches, walker, or iWalk (*bring to the hospital on surgery day*)
- Walker boot or special shoe
- Wheelchair with raised foot pedal
- Long-handled reacher
- Raised toilet set
- Non-slip mat for both inside and outside your shower or bathtub
- Bath board or shower chair
- Hand-held shower hose attachment

After Surgery



For your safety:

- A responsible adult **must** be with you on your ride home from the hospital.
- This person or another adult **should** stay with you for the first 24 hours.

Pain Control



Please read these handouts:

- “Opioid Safety and Pain Control”
- “Prescription Opioids for Surgical Pain”

You can find these handouts online at <https://healthonline.washington.edu>. Enter the word “opioid” in the “Search by Keyword” box and then click on the red “Search” button.



If You Smoke

*You must stop using all nicotine products **at least 4 weeks** before your surgery. If you need help quitting, call the Washington State Tobacco Quitline at 1.800.QUIT.NOW (1.800.784.8669)*

If you are actively smoking at the time of your surgery, we will cancel your surgery. Smoking interferes with bone healing.

Self-care at Home

Rest!

Get lots of rest for the first few days. Settle into the chair or recliner that you set up before surgery. Take your pain medicine as prescribed.

Reduce Swelling

It is normal to have swelling in your foot and ankle after surgery. To help lessen swelling:

- Raise your entire foot above the level of your heart no more than 6 inches
- Change your position often.

Ice Packs

To help ease pain and swelling, try using an ice pack:

- Place a bag of ice over the injured area 3 times a day, **no more than 20 minutes** at a time.
- Never put an ice pack right on your skin. Place a clean towel on your skin and place the ice pack on top of it.
- You can place an ice pack right on top of a cast or splint. As the ice melts, be careful that the cast or splint does not get wet.

Incision Care

- Do **NOT** soak your incision in water until it is fully healed and dry.
- Do **not** apply any creams directly to the incision during this time.
- We will remove your *sutures* (stitches) 14 to 18 days after the surgery. There may be a small amount of oozing from the wound after the sutures are removed. You can either leave the wound open to the air or apply a thin, sterile gauze dressing.
- When you no longer wear the cast or splint, check your incisions every day for signs of infection (see “When to Call” on page 4).
- Ask your surgeon when you can get your foot wet and who should change the dressings.

Avoid Constipation

The combination of pain pills, dehydration, and having to rest after surgery may cause constipation. To lessen this problem:

- Drink lots of fluids.
- Eat lots of fruit, vegetables, and high-fiber foods.
- Use a stool softener such as Colace (docusate). Stop using it if your stool is loose.

When to Call

- Call 911 **right away** if you:
 - Have chest pains
 - Feel short of breath
- Call your provider if:
 - Swelling gets worse, even though you elevate your foot
 - Pain gets worse, even though you are taking pain medicine
 - You have a fever above 101.5°F (38.6°C) that lasts longer than 4 hours
 - You have signs of infection: your wound smells bad, or there is redness, swelling, or new drainage from your wound
 - Your foot or ankle changes color or feels different
 - You have pain and tightness at the back of your leg
 - You have concerns about your cast or splint

Swelling and Numbness

If swelling gets very bad, it will affect the nerves in your foot. If your foot is very sore, or if your toes feel numb, even after keeping your foot raised, call Harborview Foot and Ankle Clinic or go to the nearest emergency room.

Follow-up Visits

As soon as you get home from your surgery, check the dates of your follow-up visits. If you have questions, call Harborview Foot and Ankle Clinic at 206.744.4830 and press 2.

If you do not live in the Seattle area, one of your other healthcare providers may be able to do this follow-up. Check with your healthcare team during your visit before surgery.

Here is what to expect at your follow-up visits.

Visit #1

2½ to 3 weeks after your surgery date:

- Doctor's exam
- Cast, boot, or splint removed
- Suture or staples removed
- Steri-strips (white tape) applied
- Cast, boot, or splint re-applied

After this visit:

- See a PT if your surgeon advises it.
 - Review your self-care instructions.
 - Make sure you have the date of your next follow-up visit. Call our clinic if you have questions.
-

Visit #2

6 to 7 weeks after your surgery date:

- Cast or boot removed (if not removed at visit #1)
- X-rays taken (not needed for *gastroc* procedures or hardware removal)
- Doctor's exam
- Boot applied
- Review weight-bearing and cast or boot instructions

After this visit:

- See your PT for strength and mobility exercises.
 - Ask your provider if you need another follow-up visit.
-

Visit #3

12 weeks after your surgery date:

- X-rays taken
- Doctor's exam
- Review weight-bearing

After this visit:

- See your PT for review.
 - Ask your provider if you need another follow-up visit.
-

Questions?

Your questions are important. Call your doctor or healthcare provider if you have any questions or concerns.

Harborview Outpatient Orthopedic Pharmacy

If you have questions about your medicines, call our voice mail line weekdays, 8 a.m. to 4:30 p.m. at **206.744.8701** (or call toll free: 877.744.3718). Please leave a detailed message and a pharmacist will call you back.

Harborview Foot and Ankle Clinic

Weekdays between 8 a.m. and 4 p.m., call 206.744.4830. Press 2 when you hear the recording.

Clinic fax: 206.744.5573

UW Medicine Nurse Line

After hours and on weekends and holidays, call 206.520.5000.

You may also send your question in an eCare message (see "Sign Up for eCare" on page 2).