



Royal Orthopaedic Hospital NHS Foundation Trust Patient Information

Discharge advice following Foot & Ankle Surgery

Welcome to the Royal Orthopaedic Hospital (ROH).
For further information please visit www.roh.nhs.uk

DRESSINGS

Your foot/ankle has been dressed in wool and bandages. You may have a plaster back slab to give it support. This dressing should not be changed until you are seen at your first follow-up appointment, usually after 2 weeks. The plaster must be kept clean and dry. If you want the dressing looked at before your appointment please contact outpatients.

ELEVATION

It is very important that you rest as much as possible and keep your foot elevated for *at least* the first 5 days after surgery. Try to avoid letting your foot hang down when sitting as this will lead to swelling and pain. This is most apparent within the first 2 weeks but swelling may occur for up to 6 months after surgery, especially after sitting or standing for long periods. In bed, put your foot on a pillow or raise the foot of the bed with books.

ANALGESIA

You will usually receive a prescription for pain medication on discharge. Pain is often due to swelling and this is eased by rest and elevation of the foot. If you have had surgery to the bones in the foot it is best to avoid NSAIDs (ibuprofen/neurofen, diclofenac/voltarol etc) as there is some evidence that these may slow bone healing. Smoking reduces bone healing and increases the risk of blood clots and infection – it **must** be avoided.

WALKING

A physiotherapist will have shown you how to use crutches if you require these. After many operations you should not put any weight on the foot. In any case you should be cautious for the

first few weeks and avoid tripping or falling.

Moving your toes and ankle (if not in a plaster) will reduce swelling and may reduce the risk of blood clots. Gentle hip and knee exercises while sitting will be beneficial. After toe surgery you are often given a special shoe to wear. This protects the toes when walking and should be worn for six weeks.

FOLLOW-UP

After discharge the hospital will contact you to make a follow-up appointment. You will usually be seen after approximately 2 weeks when your plaster will be removed (if you have one) and we will remove or trim any sutures. At this stage a full fibreglass cast or an 'aircast' special boot may be applied and you **may** be allowed to start putting a little weight through the foot. The foot may require immobilising for up to 12 weeks depending on your surgery. You will normally be seen again after 6 weeks when you may have an X-ray and if all is well you will be allowed to take more weight on the foot. You may be seen again at 3 months after the surgery, if required. It often takes 6 months for all swelling to resolve following surgery and so minor swelling late in the day is not unusual and should not be a cause for concern.

DRIVING

Depending on your operation you may not be able to drive a manual car for 12 weeks following surgery. After this you should start gradually, to see if you are comfortable. It normally takes a few days to feel confident. Ensure you can safely do an emergency stop before going out onto public or busy roads. If

you have an automatic car and have only had the left foot operated on, then you may drive when you have recovered from the anaesthetic and the swelling has gone down. If you have any concerns about driving please contact your insurer and the DVLA or discuss it with us.

IF CONCERNED:

You will often be given written information specific to your condition. Please consult this for further advice.

The nurses on the wards and in clinic are always available to answer any further questions and, after leaving the ward, if you have any problems, please feel free to contact them at any time.

The Royal Orthopaedic Hospital: 0121 685 4000

Wound problems: 0121 685 4354

ROCS (community support) for any other issues:
0121 685 4020

Alternatively you can contact the medical
secretaries on:
0121 685 4212

Further information <http://orthoinfo.aaos.org/menus/foot.cfm>

<http://www.footeducation.com/page/foot-and-ankle-surgical-complications>