Dr A. Scott Newman

Orthopaedic Foot & Ankle Surgeon

POST-OPERATIVE INSTRUCTIONS

OSTEOTOMY OF THE HINDFOOT +/- TENDON REPAIR

The first 2 weeks

You have just undergone an osteotomy (bone-cutting and moving operation) +/- tendon repair or transfer, in your foot.

Special bone screws +/- plates have been used to hold the bones in position. Either at the commencement or at the end of the procedure, a local anaesthetic agent was injected, in order to reduce post-operative pain. The wound(s) was closed with small sutures, covered with a dressing and wrapped in a bandage. A "half-cast" was then applied, to protect the position of your foot and improve post-operative comfort.

Expect *some* pain in your foot, particularly when the local anaesthetic wears off, but this should be controllable with elevation and oral pain-killers, and should improve dramatically over the next 48 hours.

When you are able to comfortably stand and mobilise independently, you can go home, but you will need at least 2 nights in hospital.

You may get out of bed the day after the operation, but you will sit or lie with your foot strictly elevated, until the 2nd post-operative day. A physiotherapist will then see you and teach you to safely use crutches or a walking frame.

An anti-coagulant will be administered for 6 weeks, to lessen the risk of a DVT (clot in the calf).

Occasionally, there can be some blood seepage into the dressings and cast, causing staining. This is rarely a cause for concern, unless copious.

It is important that you don't stand or walk on your operated limb.

You may shower, but it is important to keep the cast and dressings dry. These must remain intact until your first post-operative appointment.

At home, keep your foot elevated as much as possible. Hip height is ideal when you are seated.

If you have any concerns regarding your progress before your first post-operative appointment, please ring the rooms, during normal hours, or your local doctor, if available after hours. If you require urgent out-of-hours attention, please ring or present to a hospital Emergency Department at any time. Both Norwest Private and Sydney Adventist Hospitals provide this service.

Subsequent weeks

It remains crucial that you not bear any weight on your operative limb! Keep using either crutches, a walking frame or similar device. Further elevation will help to control swelling and discomfort. It is normal for there to be some toe discolouration when the foot hangs.

At your two week post-operative visit, the temporary $\frac{1}{2}$ cast will be removed, sutures extracted and a new light-weight cast applied. After usually 6 weeks, the cast will be removed. It should then be possible for you to begin bearing weight on the limb.