

Please read this handout before you leave hospital and keep it at home for reference.

1. Rest and Elevation (First 3–5 Days)

- Keep your operated foot or ankle elevated above the level of your heart as much as possible for the first few days — lying on the couch or bed with the leg up on pillows is ideal.
- Limit standing and walking to essential trips only (toilet, meals). The more you elevate early on, the less swelling and pain you will have.
- Ice packs (wrapped, never directly on skin) for 20 minutes at a time can help with swelling and discomfort in the first 2–3 days.

2. Wound and Dressing Care

- Leave the original dressing intact and dry until your follow-up appointment, unless you have been given specific instructions otherwise.
- A small amount of blood staining on the dressing in the first 24–48 hours is normal.
- Do not shower or bathe with the dressing exposed to water unless you have been given a waterproof cover or specific instruction to do so.
- Do not apply creams, powders, or ointments to the wound.

3. Pain Relief

- Take your prescribed pain medication regularly for the first few days, rather than waiting until pain becomes severe — this is more effective.
- Pain and swelling are usually worst on days 2–3 and gradually settle after that.
- If your pain is not controlled by the medication provided, or is steadily getting worse rather than better, contact the rooms.

4. Weight-Bearing and Mobility

- Follow the weight-bearing instructions given to you at discharge — these vary depending on your surgery.
- Use your crutches, boot, or cast exactly as instructed, even if your foot feels comfortable.
- Driving is not permitted until discussed individually with Dr. Hogan at follow-up — this depends on which side was operated on.

5. If You Are Concerned

- For urgent concerns outside normal wound issues (chest pain, shortness of breath, heavy uncontrolled bleeding), go to your nearest Emergency Department or call 000.
- For wound or pain concerns that are not an emergency, contact the rooms during business hours.
- If in doubt, it is always reasonable to be seen and checked — do not wait until your booked follow-up if something feels wrong.

6. General Advice

- Keep the leg elevated whenever sitting or lying down, not just at night.
- Avoid smoking, as it slows wound and bone healing.
- Gently move your toes and ankle within any restrictions given, to help circulation.
- Continue any blood-thinning medication or compression stockings exactly as instructed.

7. Follow-Up

- Your first postoperative review is usually 10–14 days after surgery, in the rooms. This has been arranged for you.

Seek urgent medical attention if you notice:

- Bleeding that soaks through the dressing and does not stop with elevation and a firm additional bandage.
- Increasing redness, warmth, swelling, or pus from the wound, especially with fever.
- Calf pain, swelling, or tenderness in either leg.
- Chest pain or sudden shortness of breath — call 000 immediately if this occurs.
- Severe pain not relieved by your prescribed medication.
- Numbness, persistent pins and needles, or the foot/toes becoming pale, blue, or cold.