

Achilles Tendon Repair

Post-Operative Guidelines

This document will help you plan for your post-operative recovery course following surgery. **Please read and retain this information for future reference.** Many of the questions you may have later can be answered by referring to this information.

DIET

- Begin with clear liquids and light foods (jellos, soups, etc.).
- Progress to your normal diet if you are not nauseated.

ACTIVITY

- In the recovery room, pillows will be placed under your lower leg to keep the swelling down. This is a critical time in your recovery.
- When you get home, you **MUST TRY AND KEEP YOUR FOOT ELEVATED** as much as possible until you come in and see us.
 - This helps your incision to heal without opening up while also keep the swelling down.
- If surgery is on your right foot, you will not be able to drive for approximately 6 weeks.
- If surgery is on your left foot, you may drive an automatic car once you get into the boot (approximately 2 weeks after surgery) and are not taking any pain medication.

SPLINT

- You will have a splint on your leg from your knee to your toes. This will come off in 3-10 days. You must use crutches and not put any weight on your foot so as not to harm the repair and damage this splint.
- **You will be transitioned from a splint into a boot at your first follow-up visit to be worn for a total duration of 4-6 weeks after your surgery.**

WOUND CARE

- **Keep the splint clean and dry – it will be removed at your first post-operative visit.**
- You may begin showering the day after your surgery.
 - To shower, use a waterproof shower bag (can be purchased on Amazon) or a well-sealed Saran wrap to keep the splint dry.
- Do not apply creams, ointment, or lotions to your incisions while they are healing (4 weeks).

NORMAL SENSATIONS AND FINDINGS AFTER SURGERY

- Pain
- Toe swelling / stiffness up to 2 weeks
- Numbness and tingling in the fingers, this should resolve in 36 hours.
- Bruising
- Low grade temperature less than 101.0 for up to a week after surgery

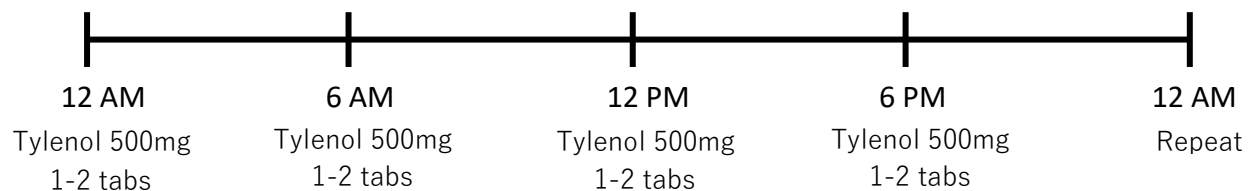
PAIN MANAGEMENT

- A nerve block may be used at the time of surgery. This will wear off within 12-24 hours and it is not uncommon for patients to encounter more pain on the first or second day after surgery when swelling peaks.
- Most patients will require some narcotic pain medication for a short period of time – this can be taken as per directions on the bottle.
- If you are having problems with nausea and vomiting, contact the office to possibly have your medications changed.
- Please avoid alcohol use while taking narcotic pain medication.
- **Please avoid NSAIDs for the first 4 weeks (Advil, Aleve, Mobic, etc.) as they may slow down the healing process.**

NON-NARCOTIC PAIN MEDICATIONS

Extra-Strength Tylenol (Acetaminophen) 500mg Tablets *(available over the counter)*

- Indication: pain, non-narcotic pain reliever
- Use: Take 1-2 tablets every 6 hours. Do not exceed 8 tablets in a 24-hour period.



NARCOTIC PAIN MEDICATIONS

OPIOIDS/NARCOTICS are prescription pain medications. One of the following medications will be prescribed and should only be used if adequate pain control is not achieved with combination of ice, Aleve, and extra-strength Tylenol outlined above. Side effects include constipation, nausea, drowsiness, dry mouth, itchiness. Use a 0-10 pain scale to decide how much medication to take:

Pain 0-4/10: No narcotics necessary

Pain 5-7/10: Take one tablet

Pain 8-10/10: Take two tablets

Tramadol (Ultram) 50mg tablet

- Indication: pain 5/10 or greater. Non-opioid *narcotic like* medication
- Use: 1-2 tabs every 6 hours as needed for pain. Do not take more than 8 tablets in any 24-hour time period.

Narcotics may cause nausea and constipation. Bowel regimen is recommended.

Colace (Docusate) 100 mg - available OTC

- Indication: constipation, stool softener. Take consistently while on narcotics.
- Use: Take 1 pill three times per day while you are taking narcotics.

Senokot (Senna) 8.6 mg - available OTC

- Indication: constipation, stool laxative. Take consistently while on narcotics.
- Use: Take 2 pills at bedtime. Increase to 2 pills twice daily if no bowel movement by post-surgery day 2.

Zofran (Ondansetron ODT) 4 mg - Prescription sent to pharmacy

- Indication: nausea. Take as needed.
- Use: Take 1 pill AS NEEDED every 8 hours, do not exceed 3 pills in 24 hours.

EXERCISES

- Physical therapy is an important part of your recovery process.
- After your first post-operative visit with Dr. Ahsan, you will see a physical therapist 2 times a week.
- Additionally, you will perform home exercises 4 times a day.

EMERGENCIES**

Contact Dr. Ahsan's Team via **MyChart** or at **630-646-7000** if any of the following are present:

- Unrelenting pain.
- Fever (over 101° – it is normal to have a low-grade fever for the first day or two following surgery)
- Color change in toes (cold and blue)
- Difficulty breathing.
- Excessive nausea/vomiting
- If you have an emergency after office hours or on the weekend, contact the office at 630-646-7000 and you will be connected to our pager service. This will connect you with the Physician on call.
- If you have an emergency that requires immediate attention proceed to the nearest emergency room.

FOLLOW-UP CARE/QUESTIONS

- Your first post-operative appointment will be 3-10 days following surgery for splint removal, wound evaluation and to answer any questions you have regarding the procedure.
- Typically, the first physical therapy appointment is to begin immediately after splint removal.
- If you have any further questions, please contact Dr. Ahsan's team directly.