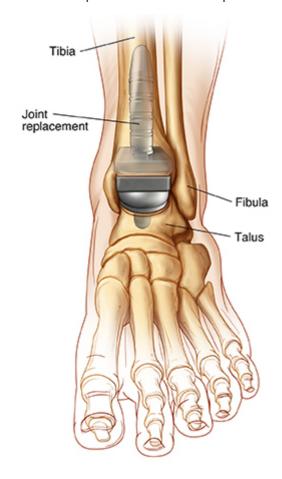
Having Ankle Replacement Surgery



Ankle replacement surgery is a procedure to treat arthritis of the ankle joint. The damaged ankle joint is removed. It's replaced with an artificial implant. The implant may be made of metal and plastic.



What to tell your healthcare provider

Tell your healthcare provider about all the medicines you take. This includes over-the-counter medicines like ibuprofen and aspirin. It also includes vitamins, herbs, and other supplements. And tell your provider if you:

- Have had any recent health conditions or changes in your health, such as an infection or fever
- Are sensitive or allergic to any metals, medicines, latex, tape, or anesthetic medicines (local and general)
- · Are pregnant or think you may be pregnant

Tests before your surgery

Before your surgery, you may need imaging tests. These may include CT scan, ultrasound, X-rays, or MRI.

Getting ready for your surgery

Your ankle replacement surgery will be done by an orthopedic surgeon. This is a surgeon who specializes in treating bone, muscle, joint, and tendon problems. Talk with your surgeon about how to get ready for your

surgery. You may need to stop taking some medicines before the procedure, such as blood thinners and aspirin. If you smoke, you may need to stop before your surgery. Smoking can delay healing. Talk with your surgeon if you need help to stop smoking.

Also, make sure to:

- Write down all of your questions about the surgery and make certain they are answered. Questions may include such things as:
 - What are the most serious and the most frequent complications of this surgery?
 - What are the risks if I don't have surgery?
 - How much pain can I expect? How will it be controlled in the hospital and after I go home?
 - How long will the joint replacement last? What can I do to make it last as long as possible?
 - What will I be able to do or not do after my total joint replacement?
 - Will I be able to contact you after the surgery if I have a question or problem?
- Ask a family member or friend to take you home from the hospital. You can't drive yourself.
- Plan some changes at home to help you recover. You won't be able to walk on your foot normally for a
 while. You may need help at home.
- Follow any directions you are given for not eating or drinking before surgery.
- Follow all other directions from your healthcare provider.

You will be asked to sign a consent form that gives your permission to do the surgery. Read the form carefully. Ask questions if something is not clear.

On the day of surgery

The surgery can be done in several ways. Ask your surgeon about the details of your surgery. The preparation and surgery may take a couple of hours. During your surgery:

- You will likely have general anesthesia. This is medicine that allows you to sleep through the surgery.
- A healthcare provider will watch your vital signs, such as your heart rate and blood pressure, during the surgery.
- The surgeon will make a cut (incision) through the skin and muscle of your ankle. An incision may also be made on your foot.
- Your surgeon will remove the damaged parts of your shinbone and talus.
- Next, your surgeon will attach the artificial joints to your shinbone and talus. A special type of cement
 may be used to hold them in place. A piece of plastic may be put between the new metal joint spaces.
 This is so they can glide easily against each other.
- Other repairs are made to the area as needed.
- The surgeon will close the layers of muscle and skin around your ankle and foot with stitches (sutures), staples, or other means.

After your surgery

Just after surgery, your leg will likely be elevated and in a brace or splint to keep it from moving. Nurses will check your breathing, heart rate, blood pressure, and ankle. You may stay in the hospital for a day or 2. Or you may go home right after surgery.

You will have pain after your surgery, especially in the first few days. Pain medicines will help relieve your pain. Keep your leg elevated as much as possible. This can help reduce swelling and pain. Make sure to tell your surgeon right away if you have a high fever or if pain in your ankle or calf gets worse.

When you go home, you will likely need to use crutches or a walker. This is so you can keep weight off your leg while the ankle heals. You may need help at home while you recover.

Follow-up care

After your surgery, you will likely need to wear a splint for a couple of weeks. You might also need to use crutches for several weeks. Your surgeon will give you directions about how you can move your ankle and foot as you recover. You won't be able to put your full weight on it for a few months. You may need help at home during this time.

You may have your splint replaced with a cast or a boot a couple of weeks after surgery. You will likely have physical therapy for a few months. This is to help with strength and range of motion in your ankle. It may be several months before you can go back to all your normal activities. For the best chance of recovery, follow your surgeon's advice on which daily activities you can do and which you must stay away from.

Make sure to follow all your surgeon's directions about medicines, wound care, and exercises. This will help to make sure the surgery is successful. If you have any questions or concerns, call the surgeon's office.

Make sure you keep your follow-up appointments.

When to call your healthcare provider

Call your healthcare provider right away if any of the following occur:

- Chest pain or trouble breathing (call 911)
- Fever of 100.4°F (38°C) or higher, or as directed by your healthcare provider
- Shaking chills
- Splint or cast that seems too tight or too loose
- · Ankle splint, cast, or dressing that gets wet or soggy
- · Pale color or discoloration of the skin around the cast
- · Numbness or tingling near or under the cast or to the foot
- Foot or toes that are pale, blue, or cool to touch
- · Pain that gets worse with or without activity
- · Painful calf that is warm to the touch and tender with pressure
- Increased redness, tenderness, bleeding, or swelling of the incision
- Drainage from or opening of the incision
- Swelling in the foot, ankle, or calf that is not relieved by raising the feet
- Other signs or symptoms as directed by your healthcare provider

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