

**Frequently Asked Questions for Vascular Surgery**

**LEGS: DAYS FOLLOWING SURGERY**

**ACTIVITY LEVELS:**

* Use common sense. If it hurts, don’t do it. No bending or deep knee bends for 3 – 4 weeks. No lifting of >10 – 20 pounds for 3 – 4 weeks.
* Mild elevation is useful. If elevation causes pain, coolness, numbness; then don’t elevate. Keeping the legs down may be most comfortable. You do not need to elevate after 3 – 5 days if the swelling is improving.
* Exercises where you sit in a chair and point and flex at the ankle, as well as drawing a circle with the foot are good activities to help with circulation and will help decrease swelling in the lower leg.
* Walking: Start low and go slow. If walking causes the leg to hurt, then you’ve done too much activity in one period of time. Do walk frequently, as that will speed your recovery. Ensure you have someone walking with you until you are sure of your balance.

**CONSTIPATION:**

* Decreased activity, reaction to anesthesia, pain medication, and change in appetite postoperatively can all contribute to constipation. Start early with your laxative of choice. A stool softener like Miralax or Colace is good. Bulking agents are not the best when the bowels are not moving. Increase fluids and start walking to help get bowel patterns back to normal.

**DRESSINGS AND INCISION CARE:**

* The biggest concern is getting an incision or wound infected once at home. No bath-tub, pools, or hot tub submersions of the wound. Once suture/staples are removed, the physician will let you know when these activities are permissible. In the meantime, showering is fine using soap and water. Pat dry the wound and let the wound dry completely before applying guaze dressing. Do not apply topical antibiotic ointments or creams on incision(s) at this time. Gauze dressing or bandaid coverage is required if drainage is still seen.

**DRIVING:**

* If you were driving before surgery, you may drive in 2 - 4 weeks once cleared in office after sutures/staples are removed and you have stopped taking narcotic pain medications. You have to be able to react suddenly and be able to have the strength to stop the automobile for emergency stops. If you cannot drive safely, do not drive.

**NUTRITION:**

* Most patients have special diets based on renal disease, heart disease, diabetes, etc. Please eat a well-balanced diet. All food groups in the special diet help with wound healing and recovery from the strain of surgery.

**PAIN:**

* Pain prescriptions should be filled. You may need something later in the day or night-time post-surgery. Pain is expected post-operatively, and the doctors want your pain to remain manageable. We recommend that when pain gets to #3 on a 1 – 10 scale (#10 being worst pain), medication should be taken.

**PERSONAL HYGIENE:**

* No bath tubs or pools or hot tub submersions of wounds. Once suture/staples are removed, the physician will let you know when these activities are ok. In the meantime, showering is ok using soap and water. Pat dry the wound and let dry before applying guaze dressing. No topical antibiotic ointments or creams on incision(s) at this time. Gauze dressing or bandaid coverage is required if drainage is still seen.

**WORRISOME SYMPTOMS:**

* Fever greater than 100.5 (oral thermometer); Increased redness, yellow cloudy drainage; and /or increasing pain at wound/incision site. Call the office at any time the incision/insertion site becomes warm to touch, red, develops a lump, or increases in pain.
* Coolness, weakness of extremity should improve daily.
* Options: Call office for follow up visit or go to the Emergency Department when in doubt.