

GEELONG VASCULAR SERVICE

A/PROF DAVID NEALE MCCLURE

 $\label{eq:M.B.B.S.Melb} M.S.(Melb), F.R.A.C.S., F.R.A.C.S.(Vascular) \\ \textbf{Vascular \& Endovascular Surgeon}$

Provider no: 057413PB

15A The Esplanade (P.O. Box 2065) Geelong Vic 3220 Phone: +61 3 5229 0024

Fax: +61 3 5229 2819

Email: <u>GeelongVascular@grvs.com.au</u>
Web: <u>www.geelongvascular.com.au</u>

POST OPERATIVE CARE FOLLOWING LOWER LIMB ARTERIAL BYPASS SURGERY OR ENDARTERECTOMY

These notes are intended to assist you in your care following discharge from hospital following lower limb arterial revascularisation.

Immediately following your surgery it is anticipated that you will spend the first evening in Intensive Care. Your leg may be a little uncomfortable but your discomfort will be controlled to some degree by epidural or intravenous analgesia. Provided your condition is stable you will be transferred to the general ward the following morning. As each day passes you will be expected to slowly increase your mobility. In the first instance this may require the assistance of a physiotherapist. Your drain tubes will generally be removed within the first 24-48 hours and your leg wounds re-dressed as often as required. If your wound has been closed with the use of skin staples these will generally be removed one week following your operation. For most people the in-hospital stay following this surgery is 4-10 days. By the time of your discharge you should be able to mobilise freely about the ward, attend to your showering and toiletry needs as normal, and be able to cope reasonably well at home. If this is not the case a short period of rehabilitation may need to be arranged by you.

Following Discharge:

- 1. Wound Care: In most cases the wound is almost healed at the time of discharge and would require no special attention. If there is a discharge from a small area of the wound, application of a dry dressing may be required to protect your clothing. In a very small percentage of patients a fluid collection in the groin, or drainage of lymphatic fluid from the leg, may be an ongoing problem. This can be managed with the application of a bag to collect the fluid and direction for managing this will be given to you in this circumstance. In a small percentage numbness in the lower part of the leg can occur. Generally this settles as inflammation in the leg resolves. If it remains a problem, or the sensation is painful, please notify us at Geelong Vascular Service. When your wound is completely healed it may be encouraged to mature with the application of a moisturising cream.
- 2. **Swelling in the leg**: It is very common for the lower limb to swell following arterial bypass surgery. Your leg needs to learn to cope with the increased blood flow it is now receiving. For 6-8 weeks your leg may be more puffy than normal, especially as you begin to mobilise. In most cases you can be assisted in reducing the swelling by the use of compression stockings.
- 3. Pain Relief: In most cases pain in the leg following discharge can be controlled with oral analgesics like Panadol or Panadeine. Two Panadol tablets every four hours is permitted. Excessive pain would be most unusual and if it occurs you should contact our service, or your GP.
- **Mobility:** For the first 2-3 weeks following surgery you may feel a little lethargic and in need of regular rest. This is quite normal. While you may engage in most of your normal activities, any movement that increases the strain on your leg wound should be avoided. It would be wise to restrict yourself from heavy lifting or heavy pushing for 4-6 weeks following your operation. Walking is good exercise, but active gym work or sporting pursuits like golf or bowling should be avoided for approximately 6 weeks. Provided you feel confident of being able to stop in an emergency, there is no reason for you not to be able to drive a motor vehicle following your discharge from hospital.
- **5. Warnings:** Excessive pain, swelling of the leg or bleeding from your wound is not expected. If any of these occur please contact our service, or your GP.
- **6. Review Appointment:** Arrangements will be made for your review appointment with A/Professor McClure at the time of your hospital discharge. This is usually made for six weeks. An ultrasound of your leg arteries will be undertaken prior to this visit.

I trust your hospital stay is a pleasant one. Our staff at Geelong Vascular Service are happy to handle any concerns you may have should you need to call Monday to Friday 09.00 – 16.30 hours.

Yours sincerely,

A/Prof David McClure Vascular & Endovascular Surgeon