### **WHealth**

# Health Facts for you

### **Lower Leg Bypass Graft**

This handout will tell you how to take care of yourself at home after your lower leg bypass graft (surgery to restore blood flow to your legs). Your nurse will review this sheet with you before you go home.

### Care of the Incision

There are several layers of stitches holding your wound together on the inside. By the time you go home, your skin is usually closed on the outside with staples. At your first clinic visit, your staples may be removed. Small pieces of tape called Steri-Strips® may be placed along the incision to help support it for a few days. The staples may get wet in the shower. Do not swim or take tub baths. Clean the area gently with mild soap and water removing any dried drainage. Leave the incision open to air unless told otherwise.

You may also shower with the Steri-Strips® in place. Just allow the water to flow gently over the area. When done in the shower, gently pat the incision dry. Do not soak them for any length of time. Do not rub the incision. As your wound heals, the Steri-Strips® will begin to curl up at the ends. You may trim the curled ends with a scissors. In time the Steri-Strips® will fall off on their own. If they do not, then you can remove them after one week.

### **Activity**

By the time you go home from the hospital, you should be back to some of your basic daily activities. You will need to allow for extra rest times. You may notice that you get tired easier than before surgery. This is **normal**. Your strength and energy level will increase as your body recovers from surgery. Walking is good for you. Start slowly and increase your distance a little bit each day.

This will help you become stronger. Walking also helps prevent constipation and blood clots. If your legs swell, raise your legs when sitting.

There are some things that should be avoided in the first few weeks after surgery.

- Do not lift anything heavier than 5-10 pounds for 2 weeks. This includes groceries, pets, and children. One gallon of milk weighs about 8 pounds.
- Do not drive until your doctor says it is okay. **Do not** drive while taking narcotic pain medicine.
- Avoid contact sports or vigorous exercise.
- Ask your doctor at your follow-up visit when you may return to work and resume sexual activity.
- Do not sit with your knees bent for long periods of time. Use a recliner if possible.

### **Pain Control**

It is normal to have some pain at the suture line. You will have less pain as the incision heals. Your doctor has prescribed pain medicine for you to use at home. This is often the same medicine you have been getting here. As time passes, you should need less pain medicine. You may then wish to use an over-the-counter pain medicine. Talk to your doctor before starting this. It may interfere with other medicines you are taking. Do not drive while taking narcotic pain medicine.

Narcotic pain medicine can make you constipated. Use over-the-counter stool softeners as needed. Drink plenty of fluids and eat high fiber foods. Fruits and vegetables (prunes, raisins, apples, oranges,

potatoes, spinach, and carrots) and whole grain breads and rice have fiber. Staying active also helps prevent constipation.

#### Diet

Eat a heart healthy diet:

- Eat less saturated fat. Eat less fatty meats, fried foods, butter and whole milk dairy products. Eat more fish, chicken, turkey and veal and less beef, lamb, and pork.
- Limit eating organ meats (liver, kidneys, etc.) to once a month.
- Use polyunsaturated oils, such as canola, safflower, soybean, sunflower, sesame, and cottonseed oils
- Drink skim milk instead of whole milk.
- Eat sherbet or Italian ice instead of ice cream.
- Eat less trans fats. Eat fewer sweets such as donuts, cookies, and desserts.
- Eat fewer carbohydrates. Eat less sugars and sweetened drinks.
- Eat less sodium. Eat less processed foods. Do not add extra salt to your food.
- Eat less cholesterol. Eat less egg yolks and shrimp.

### Are you at risk for poor blood flow to the legs and feet?

You are more likely to have poor blood flow to the legs if you:

- Smoke.
- Have high blood pressure.
- Have high cholesterol.
- Have diabetes.
- Are over age 50.
- Do not exercise.
- Have heart disease in your family

## How do I take care of legs and feet with poor blood flow?

- Look at your legs and feet daily. If you can't see them, have someone else check them. Let your doctor know if you see any sores, scratches, cracks, blisters or reddened areas.
- Wash your legs and feet daily with mild soap and water. Dry them well.
- Put lotion on dry skin daily. Do not put lotion between your toes.
- Avoid soaking your feet for long periods. It dries out your skin.
  Always check the temperature of the water with your hand or elbow instead of your foot.
- Let a doctor or nurse clip your toenails or show you how to clip your toenails.
- Wear shoes that fit well.
- Wear white cotton or wool socks.
- Check shoes and socks for stones, sharp things, or holes.
- Protect your feet from extreme heat or cold.
- Do not use heating pads or hot water bottles on legs or feet.
- Avoid walking barefoot.
- See a podiatrist if you need corns, calluses, or ingrown toenails removed.

#### **Smoking**

Try to quit. Smoking delays wound healing. It can decrease blood flow. It shrinks arteries and raises your blood pressure. If you would like help quitting, call the Quit Line: 1-800-QUITNOW (784-8669)

### Follow Up

You will be seen in the Vascular Surgery Clinic about 2 weeks after you go home. If you still have staples, they may be removed at this visit.

### When to Call your Doctor

Look at your staples twice a day. Please call the Vascular Surgery Clinic or the vascular surgery doctor on call if you have:

- An increase in redness or warmth at the site of the incision.
- Red streaks on your skin that extend from the incision.
- Bulging or swelling at the incision.
- New drainage or bleeding from your incision. Call if the drainage is cloudy, yellow, green, or foulsmelling.
- Open spots between the staples where the skin is pulling apart.
- If you notice the skin along the incision is getting darker or turning black.
- Sudden increase in pain that is not relieved by your pain medicine.
- A temperature of more than 101.5°F (38.5°C) by mouth for two readings taken 4 hours apart.
- A new onset of weakness or numbness in your foot or leg.
- Your leg or foot becomes cooler to the touch.
- A change in the color of your leg; it becomes grey/white or bluish/purple.
- More swelling in your leg than you have had before. Or if swelling does not go down after raising them overnight.

#### **Phone Numbers**

Vascular Surgery Clinic at (608) 263-8915 from 8:00 am to 5:00 pm Monday through Friday. If you live out of the area, call 1-800-323-8942.

After hours, your call will be answered by a paging operator. Ask for the Vascular Surgery doctor on call. Giver your name and phone number with area code. The doctor will call you back.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 9/2018 University of Wisconsin Hospitals and Clinics Authority, All rights reserved. Produced by the Department of Nursing. HF#4888