

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.

Incision Care

There are several layers of stitches holding your wound together on the inside. Your skin is usually closed on the outside with staples. At your first clinic visit, your staples may be removed. You may also have small pieces of tape, called Steri-Strips[®], placed along the incision to help support it for a few days.

As your wound heals, the Steri-Strips[®] will begin to curl up at the ends. You may trim the curled ends with scissors. In time the Steri-Strips[®] will fall off on their own. If they do not, then you can remove them after one week.

Bathing

It is okay to shower. The staples or Steri-Strips[®] may get wet but **do not** soak the incision, swim or take tub baths. Just allow the water to flow gently over the area. Clean the area gently with mild soap and water removing any dried drainage. **Do not** rub the incision. When done in the shower, gently pat the incision dry. Leave the incision open to air unless told otherwise.

Activity

By the time you go home, you should be back to some of your basic daily activities. Make sure you allow yourself time to rest. You may notice that you get tired more easily. This is **normal**. Your strength and energy level will increase as you heal.

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.

Activity Restrictions

Follow the guidelines below for the first few weeks after surgery.

- **Do not** lift over 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.
- **Do not** return to work or resume sex until approved by your doctor. Discuss this with your doctor at your follow-up visit.
- **Do not** sit with your knees bent for long periods of time. Use a recliner if you can.

Pain Control

Pain is normal and will improve as you heal. Your doctor has prescribed pain medicine for you to use at home. As your pain improves you can then switch to using an over-the-counter pain medicine. Talk to your doctor before starting this, though. It may interfere with other medicines you are taking.

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. Refer to HFFY #189 “Nutrition Guidelines for Heart and Blood Vessel Disease.”

People at High Risk for Poor Blood Flow

There are certain things that increase your risk for poor blood flow to the legs and feet. These include:

- Smoking
- High blood pressure
- High cholesterol
- Diabetes
- Age over 50
- Lack of exercise
- Heart disease in your family

Caring for Your Legs and Feet

- 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 and 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

Look at your staples twice a day. 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 foul-smelling.
- Open spots between the staples where the skin is pulling apart.
- Skin along the incision that is getting darker or turning black.
- A sudden increase in pain that is not relieved by your pain medicine.
- A fever over 101.5°F (38.5°C) taken by mouth for two readings, 4 hours apart.

- A new onset of weakness or numbness in your foot or leg.
- A leg or foot that 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.

Who to Call

Vascular Surgery Clinic

Monday through Friday, 8 am to 5 pm

(608) 263-8915 or (800) 323-8942

After hours, your call will be answered by a paging operator. Ask for the Vascular Surgery doctor on call. Give 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 © 11/2021 University of Wisconsin Hospitals and Clinics Authority, All rights reserved. Produced by the Department of Nursing. HF#4888