



HOW TO PREPARE FOR FOOT OR ANKLE SURGERY: DAY OF SURGERY

PART 2: THE DAY OF YOUR SURGERY

Use this three-part guide to help make your orthopaedic foot or ankle surgery and recovery go smoothly. You achieve the best results when you work with your [foot and ankle orthopaedic surgeon](#) to prepare for surgery and post-surgical recovery. Part 2 will focus on what to do the day of your surgery.

When do you have to arrive at the hospital or surgical center?

A physician, nurse, or administrator will usually call you the day before your surgery. Please note that if the surgery is on a Monday, you will likely get the pre-surgical phone call the previous Friday. If you do not receive this call, you should contact your surgeon.

The purpose of this pre-surgical phone call is to ask preadmission questions and tell you when and where to go on the day of surgery. While each hospital or surgical center has different policies, most will ask you to come in one to a few hours before your scheduled time of surgery and to bring all your medications in the original bottles.

What should you bring with you?

While each center has different policies, it is highly recommended that you bring the following with you on your day of surgery:

- Medical insurance card
- Passport or driver's license as legal identification
- List of medications that are regularly taken (or the original bottles if requested)
- Immunization record if patient is a minor
- Credit card and small amount of cash
- Copy of pre-surgical test results. This is very important to have if these tests were done at a location different from the place of surgery.
- Assistive devices, such as crutches or a walker, to be used after surgery
- Small bag for personal belongings

While each hospital or surgical center may have different policies, it is not recommended for you to bring jewelry (including rings and piercings), large amounts of cash and more than one credit card on the day of surgery. Small items like these can be misplaced at a busy hospital or surgical center.

What should you wear?

On the day of surgery, you should wear loose, comfortable clothing. You often will have a bulky dressing and/or plaster splint on your operated leg, ankle, and/or foot after surgery, and your clothes must fit around your dressing and/or splint. Examples of such clothes include shorts or sweat pants without elastic bottoms.

Due to the post-surgical dressing and/or splint, you cannot wear normal shoes on the operated foot until it is healed. This means that you should bring a supportive, non-slip shoe with rubber soles to wear on your non-surgical foot.

Just before surgery, you will be asked to change into a hospital gown. Depending on the policies of the hospital or surgical center, you may be asked to remove your underwear while wearing the hospital gown. You will continue to wear the hospital gown until you leave the hospital or surgical center. If you stay in the hospital after surgery, it is recommended that you bring a short robe to wear over the hospital gown.

Who will you meet with?

Once you are dressed in your gown, you will meet with a pre-surgical nurse or physician's assistant (PA). They may review notes and tests, shave and cleanse the part of the body to receive surgery, and perform a physical exam. They will also place an IV in one of your arms. This IV allows you to receive fluids and/or medicines without eating or drinking.

After the IV is placed you will meet with the surgical team. This team includes the surgeon, surgical nurses, PAs, and possibly assisting surgeons in training. Such assisting surgeons are common at university or academic hospitals and are known as orthopaedic surgical residents and fellows. While patients will meet with many people who are part of the surgical team, it is important to recognize that the **foot and ankle orthopaedic surgeon** is the leader of the team and will be performing the actual surgery. Nurses, PAs, and assisting surgeons help the surgeon during surgery.

As the leader of the team, the foot and ankle orthopaedic surgeon will speak with you again about your surgery. Many surgeons will have already discussed what to expect from surgery, but this lets you ask any last-minute questions or express concerns to the surgeon. At this time, the surgeon will use a pen or marker to mark your surgical area with his/her initials and will verify with you that it is correct. To ensure the entire team is aware of the plan, other members of the surgical team will check that the correct area on the patient has been marked for surgery.

You will meet with the anesthesia team before having surgery. This team includes the anesthesiologist who will make sure that the patient feels neither pain nor discomfort during surgery, nurse anesthetists (CRNAs), and possibly assisting anesthesiologists in training. Such assisting doctors are common at university or academic hospitals and are known as resident anesthesiologists. While you will meet with many people that are a part of the anesthesia team, it is important to recognize that the anesthesiologist is the leader of the team and will be responsible for the anesthesia care. Nurses and residents assist the anesthesiologist and are an important part of the team providing patient care.

What is anesthesia and what are your options for anesthesia during surgery?

Anesthesia is a condition where you experience no pain and limited memory from a situation. Some form of anesthesia is needed to safely receive any kind of foot or ankle surgery. Anesthesia options include general anesthesia, sedation, regional anesthesia (block), or local anesthesia.

With general anesthesia, you are completely asleep during surgery. You receive medicine through your IV to make you fall asleep. Once asleep, you receive a tube in your mouth (laryngeal mask airway or LMA) or windpipe (endotracheal tube or ETT) to protect your lungs and keep you breathing during surgery.

Regional anesthesia allows you to breathe on your own by numbing the surgical area. This may include a spinal or epidural where numbing medicine is injected into the back and spinal cord, near the spinal nerves.

Another example of regional anesthesia is a nerve block where numbing medicine is injected into the thigh, back of the knee, or leg, near large nerves that supply sensation to the foot and ankle. Whether the numbing medicine is given in the back, thigh, or leg, the regional anesthesia works by affecting large nerves above the involved foot and ankle. One advantage that such regional anesthesia has over general anesthesia is that you may have pain relief many hours after surgery when the nerves above the operated foot and ankle are left numb. Another advantage of regional anesthesia is that you often do not experience the nausea, vomiting and sore throat that are more common after general anesthesia.

How long will you have to stay in the hospital after surgery?

Your surgery will be scheduled either as outpatient or inpatient. If you are outpatient, you will go home on the same day after becoming fully awake in a recovery room after surgery. The amount of time from surgery to being fully awake is typically between three and six hours. While each hospital or surgical center may have different policies for when a patient is ready to go home after surgery, you should be able to:

- Safely stand without feeling dizzy or lightheaded, losing balance and falling.
- Safely walk independently for short distances using crutches or other assistive devices.

- Urinate without problems.
- Eat and/or drink small amounts without nausea or vomiting.

If you are admitted as an inpatient, you will stay at the hospital after surgery for one or more nights. Your surgeon will decide if you are an inpatient based on how complex your surgery is, the amount of pain anticipated, the rehabilitation needs, or your medical conditions. Insurance companies often have criteria that determine whether you will be an inpatient or an outpatient.

Where will your family members wait or stay during your surgery?

While each hospital or surgical center may have different policies, all medical staff will provide as much comfort for family members at this time. Some hospitals and surgical centers will allow family to stay with you in the pre-surgical area until you are brought to the operating room. Many hospitals and surgical centers have an assigned waiting room where family members can stay while you receive surgery.

After your surgery is done, some hospitals and surgical centers will allow family to briefly visit you in the post-surgical recovery room. Many hospitals and surgical centers have an assigned post-surgical discharge area where family can be formally reunited with you when you are awake and ready to go home. If you are to be admitted to the hospital after surgery, family members may have to wait until you are brought to your hospital room before they can see you.

Next: [Part 3 – The Days After Surgery](#)

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