

A guide to your Ankle Fracture Repair Surgery



This booklet will help you understand and prepare for your surgery.
Bring this booklet with you on the day of your surgery.

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Health Centre

Office d'éducation des patients
Patient Education Office

PRET SURE
Parcours de rétablissement chirurgical du CUSM
MUHC Surgery Recovery Program

This booklet was developed by the MUHC Surgical Recovery (SURE) working group.

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IMPORTANT

Information provided by this booklet is for educational purposes. It is not intended to replace the advice or instruction of a professional healthcare practitioner, or to substitute medical care. Contact a qualified healthcare practitioner if you have any questions concerning your care.



This material is also available through the MUHC Patient Education Office website
www.muhcpatienteducation.ca

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PRET SURE

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Table of Contents

Introduction

What is a care pathway?	4
What is an ankle?	5
What is an ankle fracture?	6
What is an ankle fracture repair?	6

Before your surgery

Preparing for your surgery	7
What to bring to the hospital	12
Phone call from the orthopedic staff	13
Diet	13
Washing	14

Day of surgery

At the hospital	15
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After your surgery

Post Anesthesia Care Unit (PACU)	19
Pain control	20
Going home	21

At home

Pain control	22
Dressing/Cast	24
Activity	25
Diet	26
When to get help	27
Follow-up	28

Resources

Websites of interest	29
Parking information	30
Notes	31

Map of Montreal General Hospital

Back

What is a care pathway?

When you go to the hospital for an ankle fracture repair surgery, you will be part of a Care Pathway program. The Care Pathway program helps you get better quickly and safely. Your health care team worked together to create this pathway.

This booklet will:

- Help you understand and prepare for your surgery.
- Explain what you can do to get better, faster.
- Give you information for when you return home.

Research shows that you will recover faster if you do the things explained in this booklet. There are instructions about eating and drinking, physical activity, and controlling your pain. These will help you feel better faster and go home sooner.

Bring this booklet with you on the day of your surgery. Use it as a guide during your hospital stay. Hospital staff will review it with you as you recover and before you go home.

Having surgery can be stressful for patients and their families. The good news is that you are not alone. We will support you each step of the way.

Please ask us if you have questions about your care.

Your MUHC surgery team



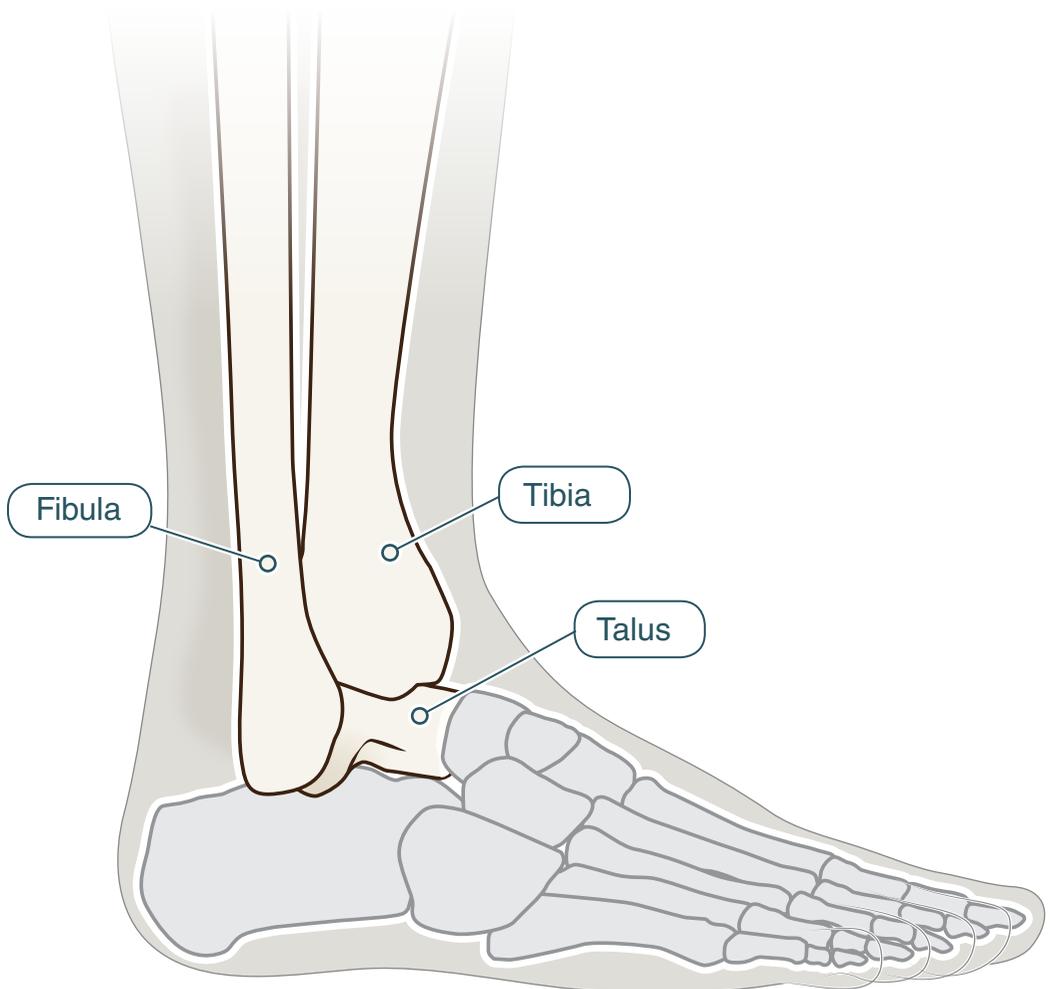
If you are not comfortable with French or English, try to have someone with you during your clinic visits and hospital stay who can help you understand.

What is an ankle?

The ankle is what connects your foot to your leg. Your ankle has many bones.

The 3 main bones are:

- **The tibia**, also called the shinbone;
- **The fibula**, the small bone of the lower leg;
- **The talus**, a small bone between the heel bone, the tibia and the fibula.



What is an ankle fracture?

A fracture means that the bone is broken. One or more of your ankle bones (tibia, fibula, talus), may be broken. We will see this on your x-rays.

What is an ankle fracture repair?

If your ankle is broken, you may need surgery to fix it. Your surgeon will tell you if you need surgery.

You may need surgery if:

- your bones moved and are not lined up straight
- your nerves are injured
- your blood vessels are injured
- your ligaments are injured (ligaments are like ropes that connect bones together)

Your surgeon will also consider your age, level of activity, and your medical condition to decide if surgery is right for you.

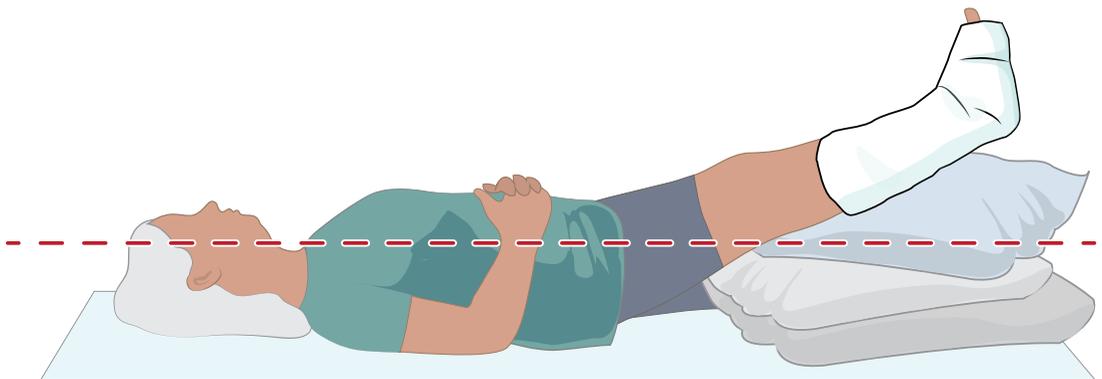
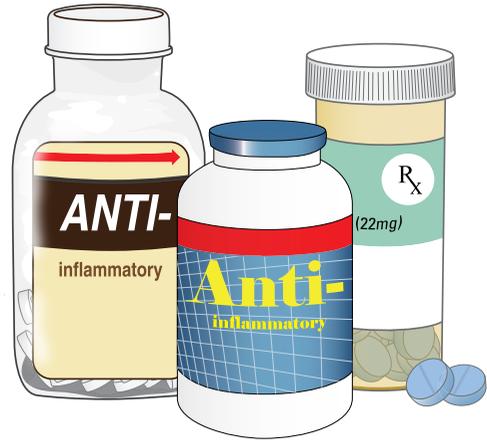
If your ankle is broken and your skin is cut wide open (open fracture), you may need emergency surgery.

Depending on how your ankle is broken, your surgeon might use screws, a plate and screws, or wires to fix your ankle.

Preparing for your surgery

Rest your ankle and use pain medication and ice to help with pain and swelling

- You now have a prescription to help control your pain. You also have anti-nausea medication.
- Take the Tylenol and anti-inflammatory pills. Follow the instructions. Add the stronger pain medication only if the Tylenol and anti-inflammatory do not control your pain. (The stronger pain medication is a narcotic, also called opioid.)
- Keep taking the Tylenol and the anti-inflammatory. Taking these medications regularly might reduce your need to take narcotics.
- Narcotics can make you vomit or feel sick to your stomach (nausea). Take the anti-nausea medication if you feel like vomiting.
- Put your leg up on pillows to help lessen the swelling in your ankle. Your leg should be higher than your heart level.



Preparing for your surgery

Rest your ankle and use pain medication and ice to help with pain and swelling

- Ice (or a bag of frozen peas) can help lessen the pain and the swelling. Here is what you can do:
 - Put the ice in a plastic bag.
 - Wrap the bag with a dry cloth (do not apply directly on the skin).
 - Put the ice on your ankle for 15 minutes at a time.
 - Wait 30 minutes before putting the ice on your ankle again.



Preparing for your surgery

To find out more about how to use pain medication safely read this:

https://www.ismp-canada.org/download/MedRec/MedSafety_5_questions_to_ask_poster.pdf

Did you know that pain medication can cause constipation?

To help your bowels stay regular:



Drink at least
6 to 8 glasses
of liquids
every day. *



Eat more whole grains,
fruits and vegetables.



Take the stool
softeners your doctor
prescribed.

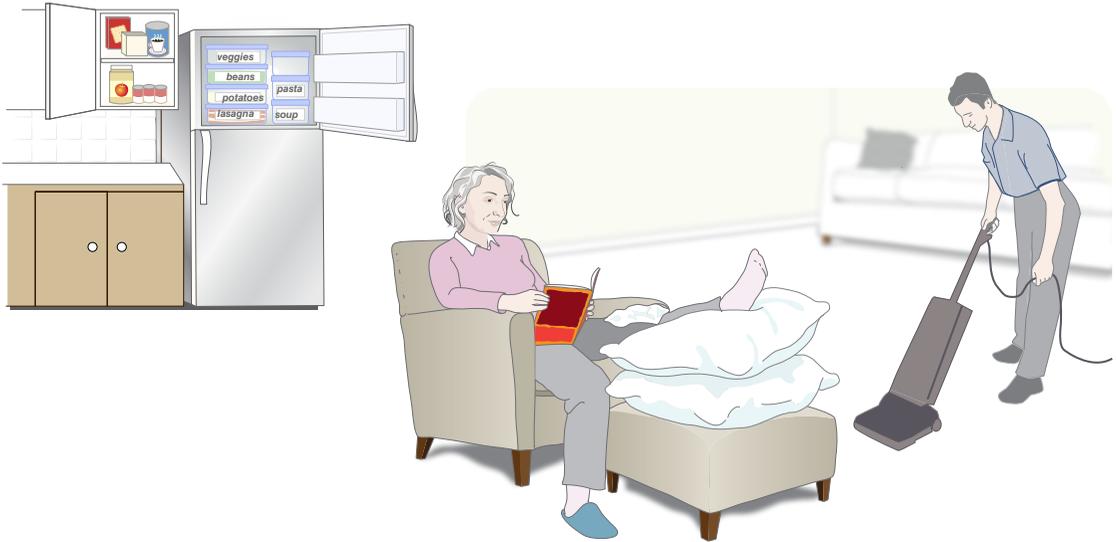
* If you have a heart condition, diabetes, or other health condition, you may need to drink less. Speak with your doctor if you are concerned.

Preparing for your surgery

Plan ahead

You might need some help at home after your surgery. Ask your family and friends for help with meals, bathing, laundry, or cleaning. Make sure you have food in the fridge or freezer that is easy to prepare.

If you don't think that you can manage at home after your surgery, talk with your CLSC. They might offer services such as housekeeping or meals on wheels.



Plan to get to and from the hospital (arrange transportation)

An ankle fracture surgery is usually a Day Surgery. This means you will go home on the same day of your surgery.

Arrange to have an adult with you to take you home from the hospital and stay with you for the first **24 hours after your surgery**. You will not be allowed to leave the hospital alone. **You cannot drive** or take a taxi home by yourself.



Your surgery will be cancelled if you do not have someone to take you home and stay with you for the first 24 hours.

Preparing for your surgery

Stop smoking, vaping, cannabis use and drinking alcohol

The wait time until your surgery can be between 2 days and 2 weeks. Start preparing for your surgery right away by stopping:

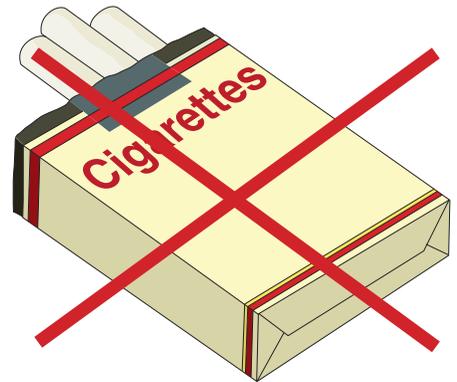
- Smoking
- Vaping
- Drinking alcohol
- Using cannabis* if used for your enjoyment or recreational reasons

This could affect how you recover after surgery, including preventing infection.

Quitting is possible even if you are a long time heavy smoker or vaper and have tried many times before. It is never too late to stop.

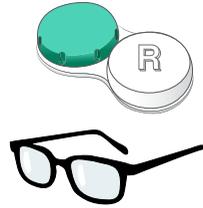
Tell us if you need help to stop any of the things mentioned above.

***Exception:** If you are using cannabis authorized by a doctor for medical purposes, let us know. Bring your prescription. We may ask you to take your usual morning dose if you need one, on the day of surgery. If you need another dose at the hospital, bring your cannabis and your prescription with you.



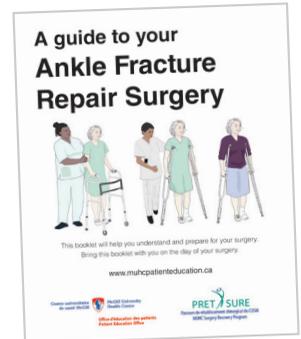
What to bring to the hospital

- This booklet
- Medicare and hospital cards
- The list of all the medication you take.
Ask your pharmacist to give you a list.
- Loose comfortable clothing for your return home
- Crutches labeled with your name



If needed:

- Your CPAP machine if you have sleep apnea
- Your glasses, contact lenses, hearing aids, dentures, and their storage containers labeled with your name



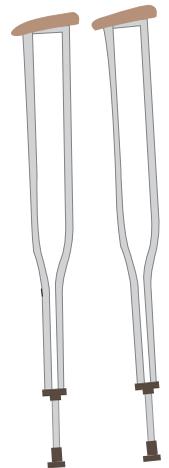
Insurance forms: CNESST, SAAQ and salary insurance

If you have insurance forms to be filled out, bring them to your surgeon's office.

Some forms will need to be sent to the Registrar Office (L6.120) and some your surgeon will complete. Your surgeon's office will let you know. They can only be filled out after the surgery.

If you need a note for work, please let your surgeon know before the surgery so that it is ready when you leave the hospital.

Note: There are fees to have these forms filled out.



**Do not bring anything of value.
Do not bring credit cards or jewelry.**

The hospital is not responsible for lost or stolen items.



Phone call from the orthopedic staff

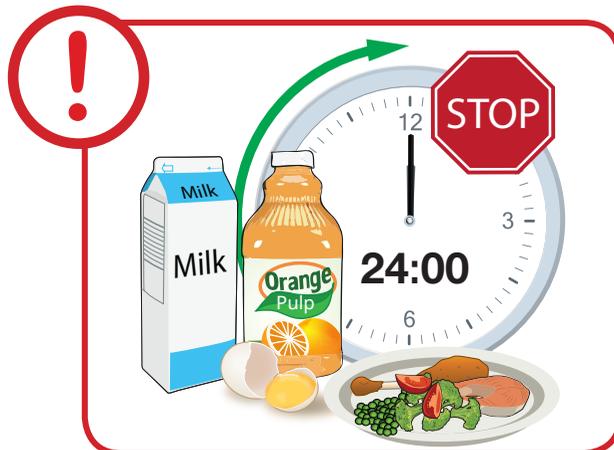
The day before your surgery, you will get a call from orthopedics. They will tell you when to come and where to go in the hospital.

They will ask you to come 2 to 3 hours before your surgery. The time of surgery is not exact. It can happen earlier or later than planned.



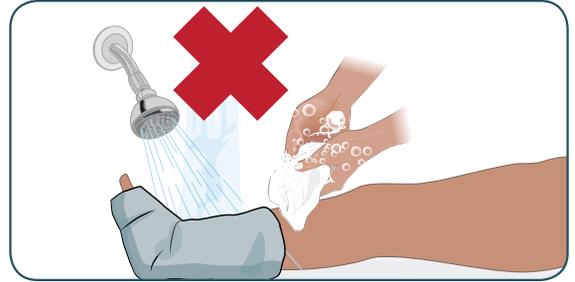
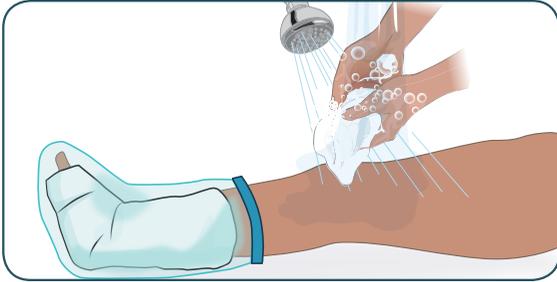
Diet

Stop eating and drinking at midnight the night before your surgery. Once you meet the nurse at the hospital, we will let you know if you can have liquids.



Washing

If possible, take a shower the night before and the morning of your surgery.



- If you have a **temporary** cast or dressing place a plastic bag or a special cast cover over your ankle before showering or bathing. You can buy a cast cover at most pharmacies.
- Do not get your cast or dressing wet. If it gets wet, it will not support your ankle properly.



Do not put on lotion, perfume, makeup, nail polish.
Do not wear jewelry or piercings.



Do not shave the area where the surgery will be done.



If you wear contact lenses, wear your glasses instead.



Put on clean, comfortable and loose clothing for your return home.



For women:
If you are menstruating on the day of the surgery use a pad.
Tampons and menstrual cups are not allowed.

At the hospital

Register for your surgery at the hospital

1. Registration - Get your hospital card.

Go to the admission office in L6.130 (L wing, 6th floor, room 130).

The admissions office is open:

- Monday to Friday from 7:00AM - 10PM
- Saturday and Sunday from 7:30 AM -10PM

if your surgery is on a:

- Saturday or Sunday
- Holiday
- Between 10PM and 7AM

Go to the Emergency Department admission A1.180

(A wing, 1st floor, room 180)

2. Admission – Preparation before your surgery.

- Go to the security counter at D6.108 (D wing, 6th floor, room 108).
- A security guard will take you to the Post anesthesia care unit (also called the recovery room) at D8.136 (D wing, 8th floor, room 136).

The nurse will check what time your surgery is planned.

You will stay in the PACU if:

- Your surgery time is soon
- You do not have an escort (family or friend) with you
- You have problems moving around

At the hospital

We may ask you to go and wait in room D10.117 (D wing, 10th floor, room 117).

There is a phone in this room. The nurse will call you on that phone when the time of your surgery is decided. If it rings, please answer.

When the nurse calls, go back to the security counter D6.108 (D wing, 6th floor, room 108). Someone will take you to the 8th floor to get ready for surgery.

You can also use the phone to:

- Find out what time your surgery will be by dialling directly 43285
- Ask questions.



At the hospital

Your PACU nurse will:

- Ask you to change into a hospital gown.
- Fill out a preoperative checklist with you.
- Make sure your personal items are in a safe place.

A patient attendant (orderly) will take you to the operating room (OR) when it is ready.

In the OR, you will meet your surgical team and the anesthesiologist. The anesthesiologist is the doctor who will give you medication so you will be asleep and pain-free during your surgery.

Your escort can go back to the 10th floor (D10.117) while you are in the OR. They can even leave the hospital. If they are not in D10.117 or if they leave the hospital, they must give us their number so we can reach them after the surgery.

When your surgery is finished, the nurse will call your escort. The nurse will also call your escort when you are ready to leave the hospital. Your escort must go back to the security counter on the 6th floor (D6.108). The security guard will take your escort to meet you in the PACU room (D8.136).

At the hospital

Waiting room

Family or friends can wait for you in the waiting room located in D10-117 (D wing, 10th floor, room 117). The space is small, so please limit the number of people you bring with you.

Internet access

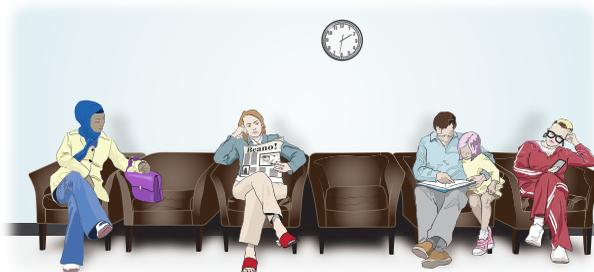
There is free WiFi available at the hospital.

Connect to:

Network: CUSM-MUHC-PUBLIC

Username: public

Password: wifi



Other resources

- **Coffee shops** - 1st floor Pine Ave. entrance and the 6th floor near the main entrance on Cedar Ave.
- **Cafeteria** - 4th floor - D wing
Opening hours : Mondays to Fridays : 7 a.m. to 7 p.m.
Saturdays, Sundays and Holidays : 9 a.m. to 2 p.m. and 4 p.m. to 7 p.m.
- **Small restaurant called “The Hospitality Corner”** – D6-125, D wing, 6th floor, room 125.
- **Bank machines** – 1st floor Pine Ave. entrance and the 6th floor near the main entrance on Cedar Ave.
- **Gift shop** on the 6th floor near the main entrance D6-145, D wing, 6th floor, room 145.

Post-Anesthesia Care Unit (PACU)

After your surgery, you will wake up in the **Post-Anesthesia Care Unit (PACU)**. This is also called the **Recovery Room**.

There are no visitors allowed in the PACU.

After your surgery, a nurse will call the family member or friend you have chosen to tell them how you are doing.

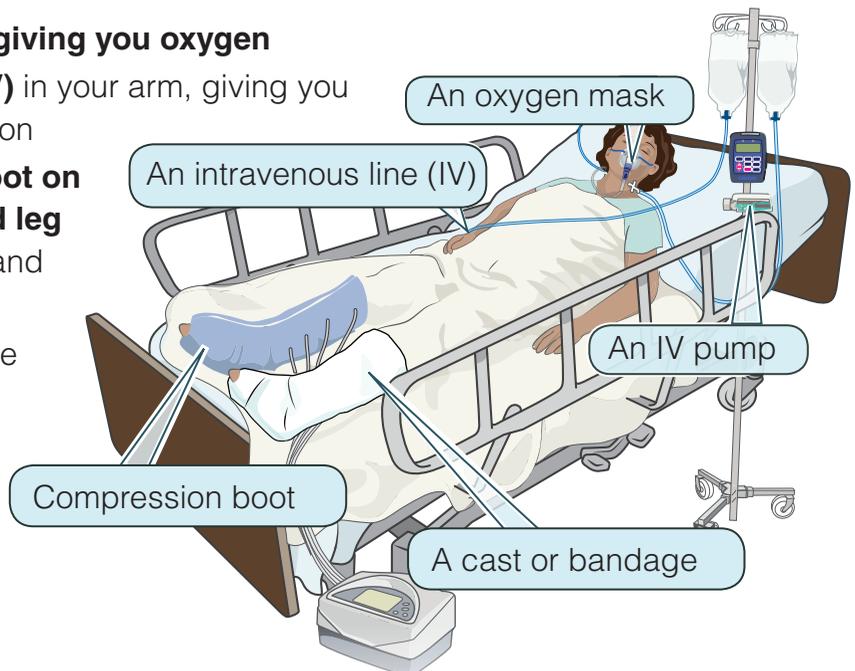
You will stay in the PACU until you go home.

Your nurse will:

- Check your pulse and blood pressure
- Check your bandage(s)
- Ask you if you have pain
- Make sure you are comfortable

You might have:

- An **oxygen mask**, giving you oxygen
- An **intravenous (IV)** in your arm, giving you fluids and medication
- A **compression boot on your non-operated leg** to help circulation and prevent blood clots
- A cast on your ankle



Pain control

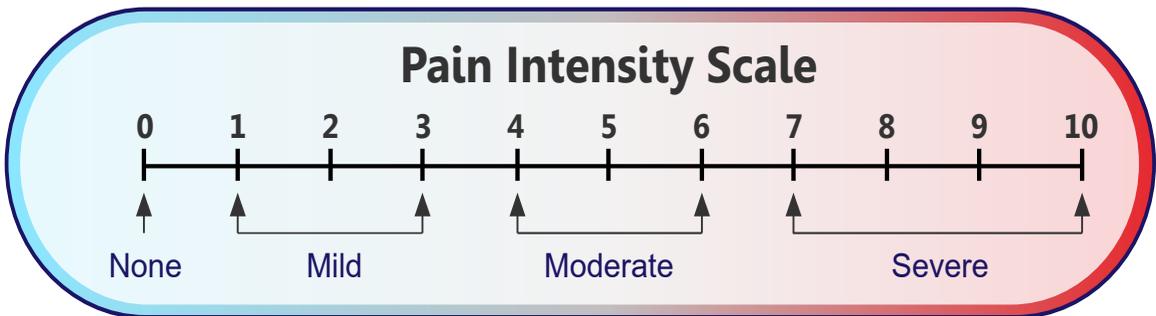
Our goal is to keep your pain low so you can:

- Breathe better
- Eat better
- Recover faster
- Move better
- Sleep better

Your nurse will ask you to rate your pain on a scale from 0 to 10.

Pain intensity scale

0 means no pain and 10 is the worst pain you can imagine. Giving a number to your pain will help your nurse decide how to best manage your pain.



Do not wait to let us know if you have pain. Having pain can make you not want to move around. This can slow down your recovery.

The different ways to control your pain

Your anesthesiologist will talk to you about the best ways to control your pain.

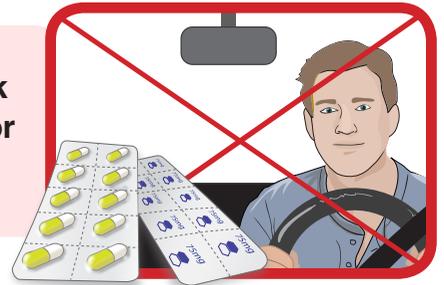
Going home

Your surgeon will let you go home as soon as you are ready. An adult should take you home after your surgery. You cannot drive after the surgery. Someone should stay with you **for the first 24 hours** after your surgery.

Before leaving the hospital, make sure you have information for your follow-up appointment with your surgeon and a prescription for your medication. Tell your nurse if you have any concerns about going home.



Do not drive, operate machinery, or drink alcohol for 24 hours after your surgery or while taking narcotic pain medication.

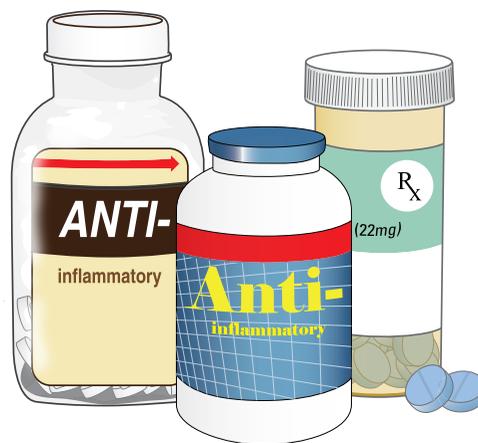


Read the next section of the booklet called “At home.”
Ask any questions before you leave the hospital.

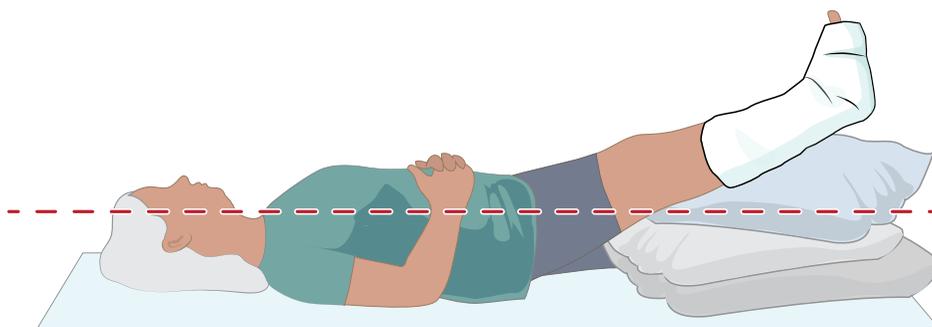


Pain control

- You now have a prescription to help control your pain. You also have anti-nausea medication.
- Take the Tylenol and anti-inflammatory pills. Follow the instructions. Add the stronger pain medication only if the Tylenol and anti-inflammatory do not control your pain. (The stronger pain medication is a narcotic - also called opioid.)



- Keep taking the Tylenol and the anti-inflammatory. Taking these medications regularly might reduce your need to take narcotics.
- Narcotics can make you vomit or feel sick to your stomach (nausea). Take the anti-nausea medication if you feel like vomiting.
- Put your leg up on pillows to help lessen the swelling in your ankle. Your leg should be higher than your heart level.



To find out more about how to use pain medication safely read this:

https://www.ismp-canada.org/download/MedRec/MedSafety_5_questions_to_ask_poster.pdf

Pain control



If you have severe pain that is not helped by the medications you have been prescribed, call your Surgeon's Office or go to the Emergency Department (ED).



**Did you know that pain medication can cause constipation?
To help your bowels stay regular:**



Drink at least 6-8 glasses of liquid every day.*



Eat more whole grains, fruits and vegetables.



Take the stool softener prescribed.

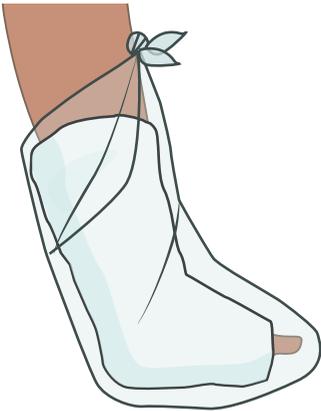
* If you have a heart condition, diabetes, or other health condition, you may need to drink less. Speak with your doctor if you are concerned.

Dressing/Cast

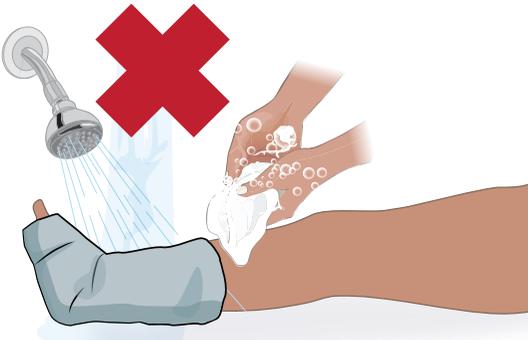
Do not put any anything inside the cast, even if the skin under your cast feels dry or itchy. Putting something inside the cast could cause a serious skin injury.

Keep your cast dry:

- **Place a plastic bag** or a special cast cover over your ankle before showering or bathing. You can buy a cast cover at most pharmacies.



- Do not get your cast or dressing wet. If it gets wet, it will not support your ankle properly. Your ankle may not heal well.

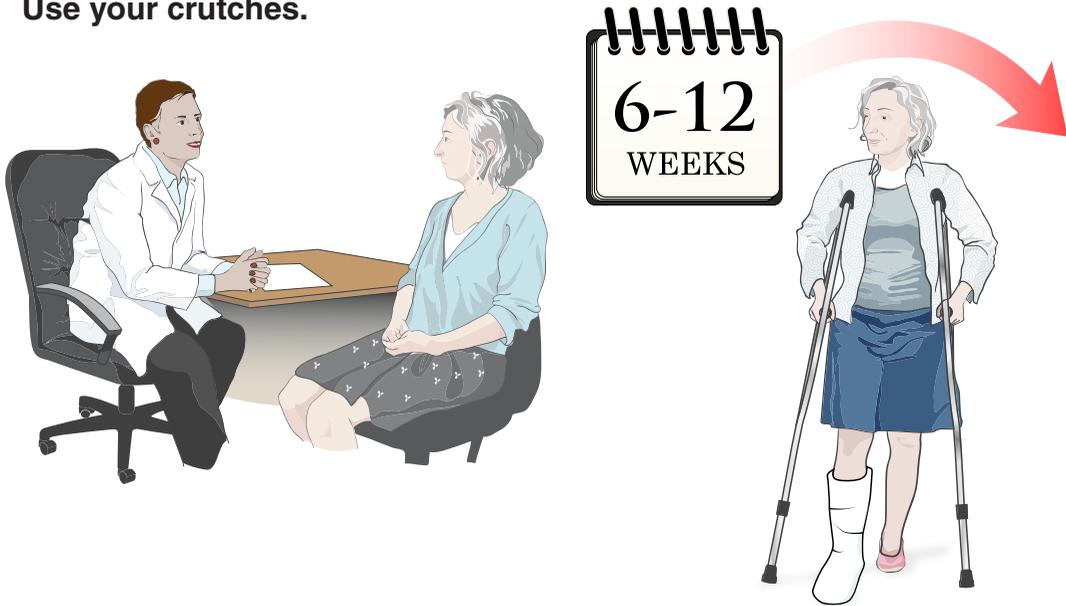


- If you want to clean your toes, use a mild soap and a damp cloth.



Activity

- Do not put any weight on your repaired ankle for 6-12 weeks. Your surgeon will tell you how many weeks at your follow-up appointment.
- **Use your crutches.**



- Do not exercise until your bone or ligaments have healed. Speak with your surgeon to find out what exercises you can do.
- Do not drive for at least 6 weeks after your injury. You will wear a cast or a boot over your ankle. You cannot wear these while driving. When the cast or boot is off, you may be able to drive.
- Do not drive if you are taking narcotics.
- Your surgeon will recommend when you can go back to work. You will usually be off work for at least 2 weeks no matter what type of job you do. This is because of the pain and swelling. After 2 weeks, you may be able to go back to work. This will depend on the type of work you do. You will have to keep your leg raised. For jobs that are more physical, you may need 6 weeks off of work.

Diet

Eat and drink whatever you want. Eat foods with fiber (fruits, vegetables, whole grains). Drink plenty of fluids to help prevent constipation.

Eat foods that have protein to help your body heal. Meat, fish, chicken and dairy products are good sources of protein.

If you get full quickly, try eating smaller amounts at each meal and add nutritious snacks between meals. Try high protein, high calorie shakes or commercial supplements.

Some patients feel nauseous (feeling that you need to vomit) after general anesthesia or when taking pain medication. Try drinking fluids and don't eat big amounts in the first 24 hours after surgery. Gradually return to your regular diet.



If you have nausea that doesn't go away and you can't keep anything down, call your surgeon's office. If you cannot reach your surgeon or nurse, go to the Emergency Department (ED).

When to get help



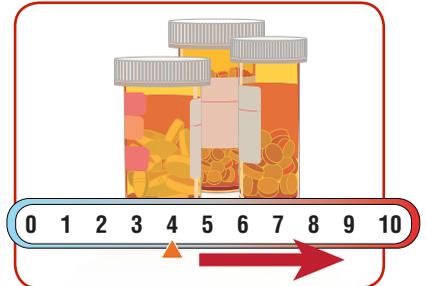
If any of these happen call your surgeon's office. If you cannot reach your surgeon or nurse, go to the Emergency Department (ED).



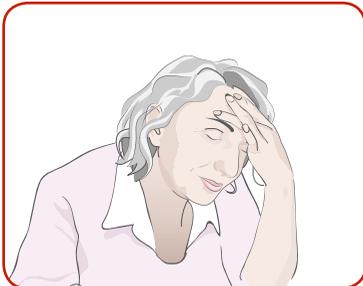
Your foot is numb or weak and there is a lot of swelling.



You cannot drink or keep liquids or solid foods down (nausea or vomiting)



You have more pain and your pain medication does not help



You feel extremely weak



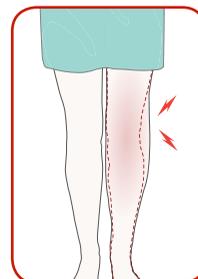
You have trouble breathing



You have a fever higher than 38°C (100.4°F)



There is a new smell, wetness, or anything leaking from your cast. This could be a sign of infection.



You have redness, swelling, warmth or pain in either leg

Follow-up

- The Recovery room nurse will call you the day after your surgery to see how you are doing. Call them if you have any questions:
514-934-1934 extension 43285
- Call the orthopedic clinic for your 7-10 day follow-up appointment after your surgery.

To book your follow-up appointment

Orthopedics MGH B5.120 514 934-8041

If you have any questions, phone us

Name of your surgeon:

Phone number of your surgeon:

Other phone numbers:

MUHC Appointment and Referral Centre:

514-934-8488

(Monday to Friday
from 8 a.m. to 5 p.m.)

Info-Santé: 811

(Contact a nurse for
non-urgent health issue.
24 hours a day,
and 365 days a year)



Websites of interest

Resources to help you stop smoking

- **Quit line** : 1-866-527-7383 (free) or www.iquitnow.qc.ca
- **Quit Smoking Centers, ask your CLSC for information**
- **The Quebec Lung Association:** 1-888-768-6669 (free)
or: www.pq.lung.ca
- **Smoking cessation clinic at the MUHC:**
Send the consultation by fax: 514-934-8488
(requires referral from your doctor).



Looking for more information on your surgery

More questions? Visit ankle surgery repair at:
www.precare.ca

MUHC Libraries – Patient portal:
www.muhclibraries.ca/patients/

For more information about anesthesia:
www.cas.ca/en/about-cas/advocacy/anesthesia-faq

MUHC parking information:
www.muhc.ca/patient-and-visitor-parking



Parking Information

Note that these rates were in effect in September 2020 and could have changed since the printing of this booklet.

Please visit this link for any updated information:

www.muhc.ca/patient-and-visitor-parking



Daily Rate

Less than 2 hours	FREE
2h - 3h59	\$6
4-24 hours	\$10

Parking Pass Rate

7 days	\$45
30 days	\$90*

Parking Rate for Frequent User *

A frequent user is an out-patient who visits the hospital by car for their appointments or treatments at least ten (10) times per month.

* These parking rates do not apply to the staff nor its physicians.

7 days	\$22.50	Unlimited entry and exit at the hospital where the pass was purchased. Certain conditions apply
30 days	\$45	

10 visits (flexible) **\$30** 1 entry and 1 exit per visit, no expiry date

Where to Pay



By debit card or credit card
Visa or MasterCard

**Customer Service
Parking Office**



By credit card
Visa or MasterCard

Barrier gate at exit
(hourly parking only)

Contact Us



Parking Service Desks

	Location	Extension
Montreal General Hospital	L6 – 129	43626
Lachine Hospital	OJ4	77001
Royal Victoria Hospital	D RC.1000	32330
Montreal Chest Institute	D RC.1000	32330
Montreal Children's Hospital	A RC.1000	23427
Montreal Neurological Hospital	E3-61	34625



Montreal General Hospital

1650 Cedar Ave. Montreal, QC H3G 1A4

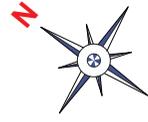
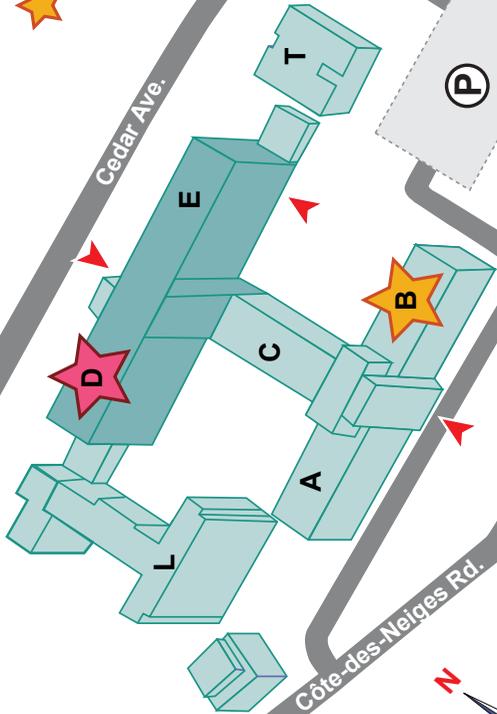
Legend



D8.136
Post-Anesthesia
Care Unit (PACU)

D10.124
The surgical admission services

B5.200
Orthopedic clinic



Côte-des-Neiges Rd.

Guy St.

Pine Ave.

Cedar Ave.

