Let's Talk ABOUT...

The Achilles tendon is located in the back of the heel and ankle. It is a strong band of tissue that connects the muscle with the bone. It allows the foot to point and flex.

Your child may have an Achilles tendon that is too short or tight. This may be the result of an injury or the way the tendon developed at birth. A tight tendon can cause walking problems. The surgeon will operate on the Achilles tendon to improve your child's walking.

After the surgery, the surgeon will place a cast on your child's leg. This will prevent your child from moving the leg and protect the surgery site until it heals. The innermost layer of a cast has cotton padding that protects the skin. The cast itself may be made of plaster or fiberglass.

Diet

When can my child eat?

After your child wakes up from the procedure, he can take clear liquids that are easily digested. Clear liquids include Pedialyte®, water, apple juice, Gatorade®, Popsicle®, and plain Jell-O®. Most babies can take a bottle or resume breast-feeding. Your child may resume a normal diet after leaving the hospital. You should start with soft, easily digested foods. Try to stay away from high fat or greasy foods like hamburgers and pizza for 24 hours following the procedure.

What should I do about nausea and vomiting?

The medicine your child received in surgery may cause your child to feel nauseated. He may vomit up to 24 hours after surgery. Sometimes car movement or pain medicine causes nausea. You can help control nausea by encouraging your child to lie still and decrease movement. If your child has trouble with nausea and vomiting, give him clear liquids.

Achilles tendon lengthening

Then, slowly give him more normal foods until he eats his normal diet. If your child vomits, give his stomach 30 to 60 minutes to settle down and then begin feeding him clear liquids. It is very important for your child to drink liquids after surgery to avoid dehydration (not enough liquid in the body), but it is fine if he does not eat solid foods for a day or two. If vomiting is persistent or continues for several hours, call your doctor for instructions.

How will I know if my child is drinking enough?

After surgery, your child will have low body fluids. Some signs of not having enough fluids include dark yellow urine, a dry mouth (no spit), chapped lips, and the soft spot on your baby's head sinking inwards. If you notice any of these things, give your child more to drink. He should urinate (pee) normally within 24 hours after surgery. A baby should have six to eight wet diapers in a 24-hour period, and an older child should urinate every six to eight hours.

Pain

How can I tell if my child is in pain?

No surgery is pain free, but it is important for your child to be comfortable so he can heal. If he is older, you can talk to him about his pain and find out what he needs. If your child is younger or developmentally delayed, he may moan, whimper, make a face of pain, cry, be irritable, be inactive, not eat, or not sleep. In all cases, you should comfort your child and listen to his concerns.

How can I help with my child's pain?

Put the leg that had surgery up on pillows for at least the first 24 hours. This will limit the amount of swelling in the leg. Have your child wiggle his toes; this will also prevent some swelling. You may want to put ice at the site of your child's surgery for 24 to

48 hours after surgery to help decrease pain and swelling. Place the ice bags to the sides of the cast, not on top.

Medicine

When should I give pain medicine to my child?

Give your child pain medicine as your doctor ordered it. NEVER give your child pain medicine on an empty stomach. Food or drink will decrease the chance of nausea. Your child's need for pain medicine will decrease after a few days. Your doctor may suggest giving Tylenol® or ibuprofen in the right amount for pain. The doctor may also have your child take a narcotic pill or liquid for pain. An example is Lortab®. Lortab has Tylenol in it, so be sure not to give your child Tylenol if he is getting this stronger medicine.

Cast Care

How do I care for my child's cast?

Keep your child's cast clean and dry. Do not get the cast wet. Wet plaster can become soft and crumble. Also, wet padding under a fiberglass cast can cause skin rashes. Always cover the cast with a plastic wrapping to protect it when you are going to be around water, even when it is just raining. If the cast becomes wet, dry it with a hair dryer. Do not stick anything down into the cast, such as a coat hanger or other device, to scratch an itch. It might injure the skin and cause an infection. The nurse will teach you how to put moleskin around the top of the cast to help avoid skin irritation. It will also help if you keep the cast clean.

How much drainage is normal?

With a cast on, you should not see any drainage. If you do see any blood or drainage coming from the cast, call your surgeon's office.

When can the cast come off?

Your child will have a follow-up appointment with the doctor to determine when the bones have healed enough for the cast to be removed.

Bathing/Showering

What's the best way for my child to bathe?

Bathing your child with a cast can be difficult. Do not get the cast wet. If you put the cast in a plastic bag for a bath or shower, the cast will still get wet. Bathe your child with a washcloth and washbasin instead. Your child should not shower or bathe in a tub while he has the cast.

How do I obtain a cast cover?

You may ask your doctor about purchasing a cast cover, if needed.

Activity

How active can my child be?

Limit your child's activity for 24–48 hours after surgery. Your child may bear weight on the leg that had surgery, as he is able. If your child needs crutches, a physical therapist will meet with you and your child to teach him how to use crutches. Your child should limit sports or gym activities as instructed by his surgeon.

Behavior

What is normal behavior after surgery?

It is very normal to see behavior changes after surgery. If they last longer than three to four weeks, call your doctor. Some examples of behavior changes include bedwetting, acting out, thumb sucking, changes in sleep and eating patterns or nightmares. Make sure you comfort your child and help him feel safe. Understand that your child's routine has been upset by surgery. Being patient with your child will help reduce these changes.

Calling the Doctor

When Should I Call the Doctor?

You should call your doctor if your child has any of the following symptoms:

- Temperature over 101 °F.
- Any drainage from the wound

- Increased swelling
- Bleeding
- Uncontrolled pain
- Numbness of fingers and toes
- Signs of dehydration (dry mouth, less than six to eight wet diapers per day, lack of tears.)
- Excessive diarrhea or constipation
- If you are concerned
- Chest pain or shortness of breath or any other emergency: Go to the Emergency
 Department or call 911!

How do I call the doctor?

- Primary Children's Orthopedic Office: 801.662.5600.
- After hours, call the Primary Children's operator: 801.662.1000 ask for the on-call orthopedic resident.
- Primary Children's Same-day Surgery: 801.662,2855

Follow-up Appointment

Call the Primary Children's Orthopedic Clinic 801.662.5600 to make a follow-up appointment as soon as you get home from the hospital.

For further questions, access our Internet site at *www.primarychildrens.com*, then click on the Kids Health icon. (A Primary Children's Medical Center partnered online health resource for families.)

