

Your son/daughter has been scheduled to undergo a *gastrocnemius recession* to address his/her toe walking/equinus contracture. During surgery, the gastrocnemius muscle will be visualized and lengthened to allow your child to ambulate with his/her heel in contact with the ground. Surgery will last approximately 1/2 hour/side, and your child will receive general anesthesia.

This is an outpatient procedure; your child will go home the same day of surgery unless your child is having concurrent procedures that require a hospitalization. Your child will wake up in a short leg walking cast(s) and knee immobilizer. Your child will be in this cast for 6 weeks and will wear a knee immobilizer while sleeping for a total of 6 weeks post-operatively. Your child has no weight-bearing restrictions and can walk immediately post-operatively. At 2 weeks post-op, your child will be fit for new braces (or we will determine if their current braces will suffice) and be re-casted for an additional 4 weeks. Physical therapy will start 6 weeks after surgery. Therapy will occur 1-2 times a week, focusing on gait training and lower extremity strengthening. You will receive a prescription for physical therapy at your first post-operative visit.

You will be discharged from the hospital with Ibuprofen, Tylenol, Diazepam and Oxycodone. If your son/daughter develops fevers, chills, increase in pain, or redness/swelling/discharge at the incision site, please contact Dr. Thompson immediately. We will see you back in clinic 2 weeks after surgery for clinical evaluation.

- **Surgery Time:** Approximately 15 minutes/side
- **Hospital Stay:** Day Surgery
- **Equipment:** Short Leg Cast
- **Post-operative Medication:** Ibuprofen, Tylenol, Diazepam, Oxycodone
- **Weight-bearing Status Post-Op:** No Restrictions
- **Physical Therapy:** Starts at 6 Weeks