Femoral-Popliteal Bypass Surgery
~ Fem-Pop Bypass ~

What is fem-pop bypass surgery?

When blood vessels, called arteries, become blocked or damaged, your blood does not circulate properly. This can cause pain in your legs, especially during exercise. Poor circulation can also make cuts or injuries in your legs heal slowly. Your legs and feet may feel very cold.

Femoral (Fem) and Popliteal (Pop) are the names of arteries in the legs. Fem-Pop bypass surgery can improve the circulation in one or both of your legs depending on your problem. This surgery takes blood from the artery in your groin and sends it to the artery near your knee.

What do I need to do before surgery?

You will come to the Pre-Admission Assessment Unit 1 to 2 weeks before surgery. In this unit, the nurses will give you information about what to expect before and after surgery. You will also talk to the anesthetist about the type of anesthesia you will be having during surgery.

If you need blood tests, x-rays or other tests, they are also done here. You will have a heart test called an ECG while you are in the Pre-Admission Assessment Unit as well.

During the evening before surgery take a bath or shower.

What happens on the day of surgery?

Come to the Day Surgery Area at your assigned time to register. You will be called into the Day Surgery Unit. Nurses will help you get ready here.

You will have an intravenous tube called an IV put into a vein in your arm. The IV is used to give fluids and medications before, during and after surgery. The surgeon will come and mark your surgical area(s) with a special pen. You will also talk to the anesthetist or his or her assistant.
What happens during this surgery?

You will have a general or an epidural/spinal anaesthetic:
- a general anaesthetic will make you sleep during surgery
- with an epidural/spinal anaesthetic, you are awake during surgery, but you will not feel anything from the waist down.

When you go into the Operating Room, you will meet the team and be positioned on the table. The team stops and reviews some information together. This is called the Surgical Pause. The anesthetist then starts your anesthesia. You are told what is happening.

During surgery, the surgeon attaches a vein from your leg or an artificial tube to the damaged blood vessels. This allows the blood to bypass the blockage and circulate better to your legs and feet. Most people have 2 incisions; one in the groin and another behind the knee. However, an incision going down the whole inner side of your leg may be needed.

What happens after surgery?

After surgery, you will stay in the recovery room area until you are fully awake.

You will be given fluids and medications through the IV. The IV will be taken out later when you can drink fluids and take medications by mouth.

You may also have a tube called a catheter, to drain urine from your bladder overnight.

Your incisions will be closed and covered with a dressing. Your nurse will check your incisions and change your dressings if needed. It is normal to have some swelling and drainage around your incisions after surgery.

The nurse will also check the circulation in your legs and feet using a machine called a “doppler”. The doppler magnifies the sound of the blood flowing in your arteries.

How will I feel after surgery?

You will feel some pain from the incisions. The amount of pain is different for each person. You may also feel sick to your stomach or nausea caused by the anesthetic. If you have these pain or nausea, tell your nurse and you can have medication to help.
What can I do after surgery?

Activity

You will be out of bed the day of surgery or the day after. You will have help to get out of bed and sit in a chair. When you feel stronger you can start walking. Ask your nurse for help the first time you get up for a walk.

Moving and walking as soon as you can after surgery will:

• keep your muscles strong
• prevent breathing problems
• help your blood move around your body
• prevent constipation

Deep breathing and coughing exercises

Deep breathing and coughing exercises prevent breathing problems. You will be shown how to do these exercises. Do your deep breathing and coughing exercises every hour while you are awake.

Hygiene

You may sponge bath after surgery. Try to keep your dressings dry. You can shower after your clips are taken out. It is important to dry your incisions well. Your nurse will put a dry dressing over your incisions when needed.

What will I eat after surgery?

Your doctor or nurse will tell you when you can eat and drink after surgery. You will only be given fluids to drink at first. If you do not feel nausea, you can eat your regular diet.

At Home

How can I relieve pain?

If you have pain, take the medication advised by your surgeon. If your pain does not get better, call your surgeon. Other ways to relieve pain are:

• walking
• any method of relaxation, such as listening to music or deep breathing

What can I eat?

Eat your regular diet. If you are taking pain medication, you may need to follow a diet that prevents constipation. You can prevent constipation by eating foods high in fibre and drinking extra fluids. Fruit, vegetable and whole grain products are high in fibre.
What activity can I do?

Keep your bypass working well

Swelling can prevent your bypass from working well. Reduce swelling by:
- keeping your foot (feet) and leg(s) above the level of your heart when resting
- sitting and lying without crossing your legs
- Do not smoke because smoking reduces the blood flow by narrowing blood vessels.

Exercise

✓ Gradually go back to your normal activities. Moving and walking help you recover.
- Do not do heavy lifting or strenuous exercise until you check with your surgeon. Heavy lifting is lifting more than 10 pounds or 4 kilograms. This weight is like a full grocery bag, small suitcase or baby.

Incision care

Look at the incisions each day. The incisions should be clean, dry and closed. You can shower after your stitches are taken out or your doctor approves. Pat your incisions dry after a shower. You can have a tub bath after your incisions are completely healed.

Going back to work or school

This depends on the type of job you do. Talk to your surgeon at your follow-up visit about when you can return to work.

Follow-up with the surgeon

You will have an appointment to see your surgeon in 2 to 3 weeks after surgery. If you do not have an appointment, contact your surgeon’s office to arrange one.

Contact your doctor if you notice:
- any swelling, redness, bleeding, discharge or foul smell from any incision
- any part of an incision is open
- you have a fever
- you have pain that does not get better