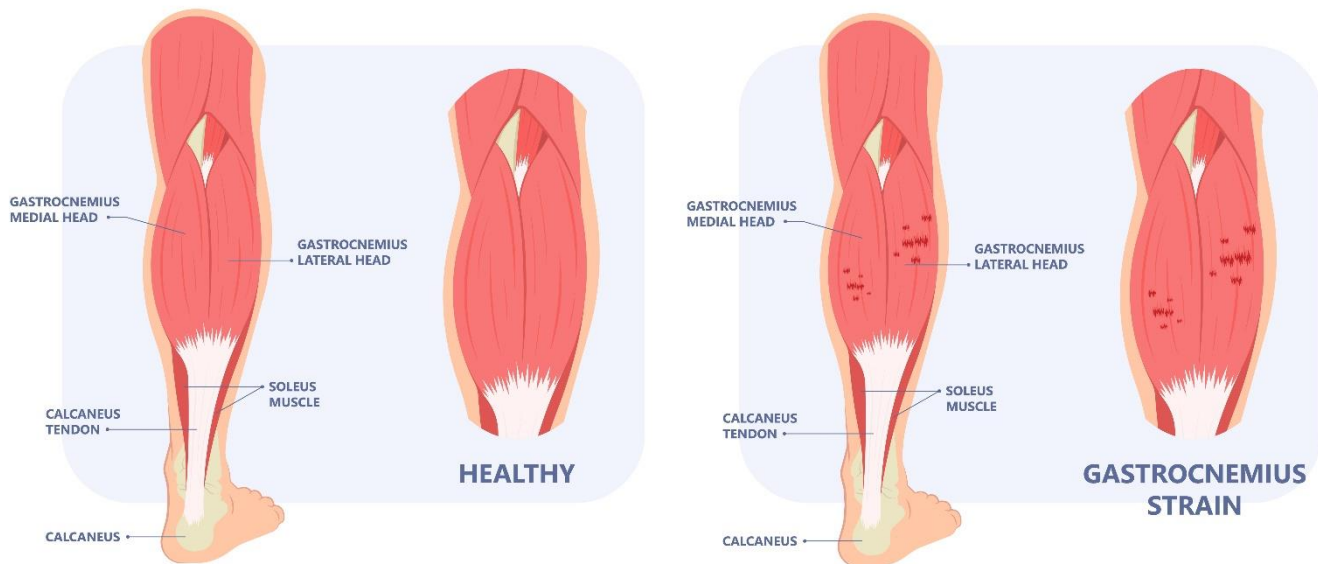


PATIENT INFORMATION**Calf Muscle Tear
(Gastrocnemius Tear)**

Following your recent visit to our Emergency Department/Minor Injury Unit it has been confirmed that you have sustained an injury to one of the large muscles that make up your calf muscle called the gastrocnemius. This will lead to pain and bruising to your calf and possibly into your ankle which can vary in severity.

GASTROCNEMIUS STRAIN



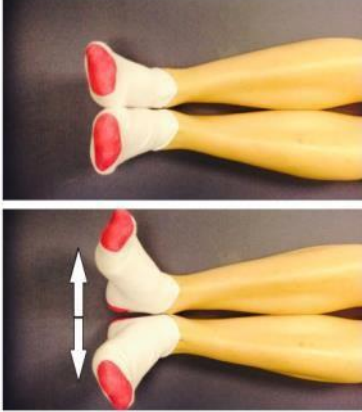
What to expect:

Weeks since injury	Rehabilitation plan
0-2	- Initially you should elevate your leg regularly to reduce swelling - You can fully weight bear on that leg although you may find it more comfortable to put your weight through the front of the foot at first so try use a shoe with a raised heel - You may have been supplied with a boot with or without heel raises, if so, wear it for comfort when walking but remove it at night and when resting - Start the early exercises given below to reduce the risk of developing a clot (DVT)
2-3	- If you have been using it, try and stop using the boot. Start around the house first - The swelling and bruising should naturally subside
3-11	- Your symptoms should be settling however you can still have mild symptoms for 3-6 months - You can resume normal day-to-day activities, but be guided by your pain - Heavy tasks and long walks may still cause some discomfort and swelling
12	If you are still experiencing significant pain and swelling, please contact the Virtual Fracture Clinic for advice

Early Exercises – Start these exercises straight away

Early movement of the ankle and foot is important to promote circulation and reduce the risk of developing a Deep Vein Thrombosis (blood clot).

Do these exercises 3-4 times a day. Start straight away, you do not need to push into pain.

		
Point your foot up and down. Repeat this 10 times.	With your heels together, move your toes apart to turn the foot outwards. Repeat this 10 times. Do this movement gently within comfort.	Make gentle circles with your foot in one direction and then the other direction. Repeat this 10 times.

Swelling & Pain

Part of the body's normal response to injury is pain and swelling. Follow the simple steps below to manage your symptoms.

- **Ice:** Ice is a great natural anaesthetic that helps relieve pain and controls swelling. Apply ice packs or a bag of frozen peas wrapped in a thin towel to the site of the injury. You may find it helps to apply ice before and after completing your exercises. Do not apply ice directly to the skin. Do not leave the ice pack on for more than 20 minutes at a time in one hour. Repeat as much as required.
- **Elevation:** It is normal to experience swelling post injury. Elevation reduces swelling, which in turn relieves pain and speeds up your healing. Keep your injured limb elevated as much as possible during the first 72 hours. For lower limb injuries aim to get your foot above the level of your hips.

- **Medication:** A&E may have prescribed you with some pain relief. Take these as instructed to help keep on top of the pain. If you do not feel that this medication is helping, consider talking to a pharmacist or your GP to see if there is an alternative option.

Deep Vein Thrombosis (DVT)

When you are less mobile you are at higher risk of developing a blood clot, known as a deep vein thrombosis (DVT). Some patients require medication to reduce this risk. The clinician who saw you will have considered this and prescribed if required.

If you develop signs of a DVT you need to seek urgent medical attention. The signs are:

- Swelling and tenderness in your calf and lower leg, rather than your knee.
- A change in colour of your toes compared with your other leg (typically purple)
- Pain in the calf, groin or chest area.
- Redness and heat in the affected area

Driving:

If you have an injury to your lower limb, you can return to driving when you no longer require the orthopaedic boot/shoe or crutches and are confident that you are able to do an emergency stop.

Work and Sport

Decisions to return to work are made on a unique basis and should be discussed with the GP and your employer. You may require a period of time off work and when you return you may need light or amended duties. The advice given will depend on your profession and your injury.

Smoking with an injury

Medical evidence suggests that smoking prolongs fracture healing time. In extreme cases it can stop healing altogether. It is important that you consider this information with relation to your recent injury. Stopping smoking during the healing phase of a fracture will help ensure optimal recovery from this injury.

Physiotherapy:

If you have been referred to the Physiotherapy Department you can expect to hear from them in about 2-3 weeks, if you are worried that you have not heard from them please contact your local hospital and ask for the Physiotherapy Department.

Should you have any worries or concerns following your discharge from hospital please contact:

Virtual Fracture Clinic

07:00 – 14:30 Monday-Friday

Worcestershire Royal Hospital 01905 760 259

<https://www.worcsacute.nhs.uk/virtual-fracture-clinic/>



If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.