
POST-PROCEDURE INSTRUCTIONS

After Your Ingrown Toenail Procedure

You have had a partial or complete nail avulsion (and possibly a chemical matrixectomy with phenol) to remove an ingrown toenail. Mild soreness, drainage, and redness are normal for 1–3 weeks. Following these instructions carefully will speed healing and reduce the risk of infection.

First 24 Hours

- Keep the bandage clean, dry, and in place until tomorrow morning
- Rest and elevate the foot whenever possible to reduce throbbing
- Tylenol or ibuprofen as directed on the label is usually enough for discomfort
- Avoid showering, bathing, or swimming for the first 24 hours

Daily Soak & Dressing Change (Starting Day 2)

Perform this routine **twice daily** until the toe is fully healed (typically 2–4 weeks).

- Remove the old bandage gently — soak it off if it sticks
- Soak the toe in warm water with 1 tablespoon of Epsom salt or table salt for 10–15 minutes
- Pat dry with a clean towel
- Apply a thin layer of plain Vaseline or the antibiotic ointment provided
- Cover with a clean Band-Aid or gauze

Activity & Footwear

- Wear open-toed shoes, sandals, or roomy athletic shoes for the first week
- Avoid tight, narrow, or pointed shoes until fully healed
- Light walking is fine; avoid running, sports, and prolonged standing for 5–7 days
- No pools, hot tubs, lakes, or pedicures until completely healed

What to Expect During Healing

- Clear to slightly yellow drainage for 1–2 weeks (normal)
- Redness along the nail edge for 1–2 weeks (normal)
- If phenol was used, the area may look 'wet' longer — this is expected
- If the nail edge was permanently removed, the toe will look narrower as it heals

Call our office immediately if you notice:

- Spreading redness up the foot, red streaks, or warmth
- Thick yellow or green pus with foul odor
- Fever over 100.4°F or chills
- Severe throbbing pain not relieved by elevation or over-the-counter medication
- Excessive bleeding that soaks through the bandage

Follow-up

- A follow-up appointment is usually not required unless instructed
- Call 662-449-3663 with any concerns — we'd rather answer a question than miss an infection