

Dr. D.J. Fellner, DPM

Board Certified

Consultant Podiatric Surgeon (UK, England)

Specialist in Podiatric Surgery

www.bunioncenternyc.com

Office: Starrett Podiatry, 2256 Second Avenue, (116/2nd Avenue) 3rd Floor New York, NY 10029

Tel: (347) 536 3500

Minimally Invasive Hallux Valgus (Bunion) Correction Post Operative Rehabilitation Protocol

Operative Summary

A surgical correction is performed by cutting the bone with a small burr, shifting it, then fixing the bone with a pin. This will be performed under a local anesthetic block, to allow the operation to be completed without any pain. Following the operation, a special foot dressing is then applied, and this must be maintained by the patient.

Day of Operation (week 1)

- Strict elevation
- Rigid post-operative sandal - mobilize full weight bearing (with 2 crutches only if needed)
- Home the same day
- Some bleeding may to be seen through bandage, (this is normal)
- Move toes, ankle, knee and hip
- Regular (3-4 times/day) pain relief (Codeine and Diclofenac) once discomfort begins (after ankle anesthetic block wears off, approximately 6-12 hours after surgery)

Weeks 1 and 2 Post Operatively

- Day 3 - start Rehabilitation Exercises if you feel comfortable to do so (see below)
- Strict elevation of the foot at the level of the chest 23 hours a day for 7 days (for pain relief, swelling and wound healing)
- Regular (3-4 times/day) pain relief (e.g. Codeine and Diclofenac) only if needed
- Full weight bearing in post operative shoe (can be removed at night if desired, but put back on when walking)
- Place 2 pillows under your mattress for elevation when sleeping
- Keep bandage on and keep dry. You may use a 'cast / bandage protector for bathing', available on-line e.g. LimbO device
- Ice for 10 minutes every hour, on top of bandage, even if you feel the foot is not getting cold
- Move toes, ankle, knee and hip.

Week 3 Post Operatively (after 2 weeks completed)

- Clinic review by Dr Fellner – Bandage and steristrips /stich removed, wound inspected
- Continue elevation at the level of the heart when not walking, especially at the end of the day or if swelling
- Continue Rehabilitation Exercises (see below, 5 times / day)

Week 3 - 6 Post Operatively

- You can have a bath or shower without protection once the bandage has been removed, unless advised otherwise by Dr Fellner
- Elevation should be continued whenever possible, at least just above waist level, preferably chest level
- You may go for a 10 minute walk but listen to the foot. If pain or more swelling, then ease off
- Increase your activities according to your pain or swelling.
- If at the end of the day the swelling is minimal, remove the 2 pillows from under the mattress. Continue to ice when possible to reduce the swelling
- Continue in the post operative sandal unless advised differently by Dr. Fellner

Week 6

- Office Visit - pain, swelling and movement assessed
- Post operative shoe is removed and normal shoe (eg lace up trainer) can be worn (will need to be a generous fit).
- Continue rehabilitation exercises
- You will still have some swelling for at least 3 months, this can continue in some cases for up to 1 year.

Month 3-6

- Office visit as required - Pain, swelling and movement assessed.
- Shoe fitted reviewed
- Continue rehabilitation exercises

Returning to Work Sedentary jobs

Return after 2 weeks, if able to maintain foot elevated at level of waist, otherwise 4 weeks off

Standing/walking jobs: Return after 6 weeks, but may be sooner depending on comfort and swelling

Manual/Laboring jobs: Return after 8 weeks, but may be sooner depending on comfort and swelling

Driving

You need to be able to control the vehicle in an emergency. Can you stamp your foot down on the ground? For left sided surgery and no clutch is required, driving is probably safe at 2 weeks post operatively. For right sided surgery, driving is probably safe at 6 weeks post operatively, once in a normal shoe. If you are unsure, please ask Dr. Fellner.