

Mark A. Finno, M.D. Kevin P. Sullivan, M.D. Jason C. Saillant, M.D. Michael L. Sganga, D.P.M. Daren Bergman, D.P.M. David M. Ramsden, M.D.

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Foot & Ankle Post-Operative Care: Lapidus Bunionectomy

Dressing/Wound Care

- The purpose of dressings and splints is to immobilize and protect the • surgery area, and to promote healing. Do NOT get the bandage wet.
- Do NOT Remove the bandages and dressings. They will be changed • at your next appointment with Dr. Sganga
- Keep your boot or post-op shoe on at all times including sleeping if this is what you were given. If in a cast or splint keep clean and dry at all times.
- If you shower you must cover your dressing so that it does not get • wet. Wrap the area in a plastic bag with duct tape to seal it at the top or you may use a cast bag that can be purchased at a pharmacy. If your dressing or splint becomes soaked, you should phone our office as soon as possible. This can lead to infection or wound issues.
- Some swelling or bruising around the leg, ankle, foot or toes is to be • expected and can last up to several weeks.
- There may be some bloody spotting on the dressing initially; this is • normal. Excessive bleeding that soaks the dressing must be reported to us.
- Use ice over your dressing for the first 24-36 hours after surgery .You • may place ice over the bandage for as long as you feel comfortable (recommend at least 20 min./hour). Do not place ice or ice pack in direct contact with skin. Be careful, to keep the dressing dry!







<u> Mass General Brigham</u>

Newton-Wellesley Hospita

Natick 313 Speen Street

P (508) 655-0471 F (508) 650-3547

Newton 2000 Washington Street Blue Bldg. Suite 322 P (617) 527-5040 F (617) 641-2366

Hopkinton 77 West Main Street

P (508) 458-6050 F (508) 625-1036



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- ***Ice placed behind the knee rather than over the foot is the best way to avoid getting you dressing wet and provide relief. This is important if you are in a splint or cast.
- Low-grade temperatures up to 101 are common after surgery, please call if temperature rises above 101.4.

Pain/Swelling/Movement

The goal of pain medication is to reduce your pain and make you more comfortable. Pain medication may not completely relieve all discomfort. Control of swelling is an important part of pain control. **To reduce swelling and pain elevate your operative leg.**

- Use 2 or more pillows to **elevate the leg** above the level of your heart. (An example would be ensuring your toes are at least at the level of your nose) ***this is extremely important to reduce swelling, improve pain, and optimize wound healing for a cosmetic appearing scar***
- Immediately after surgery you may be placed in a splint or cast.
- Do not put any weight on the part of the body that had the surgery, unless allowed to weight bear in a boot or surgical shoe.
- If you are in a splint and it is positioned so that one or more of your toes are free, we **encourage gentle movement of the free toes while in the dressing.** If your splint blocks motion it is deliberate and we ask that toe and / or foot/ankle motion is avoided. Also, if the dressing/splint does not include the ankle please straighten and bend the ankle 4-5 times daily to prevent stiffness.
- If you have had toe surgery, please avoid moving your toes.
- Remember rest the area completely for the best incision and surgical healing. Pay attention to the directions of your surgeon, these lead to the best results.







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Medication

- The anesthesiologist may have given you a nerve block (an injection in your leg), to numb your foot, ankle, and leg. We may also have injected locally to numb the surgical area. This is to help control your pain. It is normal to experience some numbness and tingling in your foot and ankle up to approximately 18 hours after surgery. You may also not be able to move your foot and ankle or toes while the block is working which is normal. The block typically lasts 12-24 hours.
- You will have received a prescription for pain medication. Do not operate machinery or drive while taking this medication. Pain medication may cause nausea or vomiting.
- ****DO NOT WAIT FOR THE BLOCK TO WEAR OFF TO START YOUR PAIN MEDICATIONS. IT IS RECOMMENDED THAT YOU START THESE IMMEDIATELY WHEN YOU GET HOME TO AVOID A PERIOD OF DISCOMFORT
- **STAY AHEAD OF THE PAIN:** For the first 3 days the swelling and pain will be the most severe and ice, elevation, staying ahead of the pain with medications, and rest are the best things you can do to remain comfortable and minimize pain.
- Any severe itching, hives or difficulty breathing, please call immediately.

Post-operative Protocol Overview

(Typical outline, every patient is individual and may be slightly different)

- Weeks 1-2 Non-weight bearing (completely off your foot) to improve skin healing and reduce scarring. This also decreases pain, swelling, and will improve your overall recovery.
 - Keep your dressing clean and dry until follow-ups









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- Stay off the foot, rest, elevate, ice, and relax as much as Ο possible. Only touch-down your heel if you absolutely must. Too much weight bearing too soon can impact the outcome.
- After sutures are removed at 2-3 weeks post-op we will have you splint the great toe with tape or strapping for alignment over 4-6 weeks time
- Weeks 3-4: Partial weight-bearing to the heel in your CAM walker boot with crutches.
 - Follow dressing or taping instructions closely
 - Stay off the foot, rest, elevate, ice, and relax as much as Ο possible
 - After sutures are removed at 2-3 weeks post-op we will have you splint the great toe with tape or strapping for alignment over 4-6 weeks time
- Weeks 4-8: If healing allows, you will be able to walk as tolerated in • the CAM walker boot.
 - Encourage toe range of motion to prevent stiffness (Dr. Sganga 0 will show you how to complete this)
- Weeks 8-12: Into a sneaker as tolerated if healing allows
 - Can start Physical Therapy as needed at weeks 6, 8, or 10
- Depending on the fixation used you may require a removal of buried pin at around 12 weeks.
 - We discussed this pre-operatively as a possibility and will perform this around the 12-16 week mark.
 - This is typically done in the office in a small procedure 0



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• This buried wire allows you to walk sooner and heal faster, but at the 12-16 week point is no longer needed for stability

Return Visit

- If you do not already have a scheduled post-operative visit please call for an appointment on the next business day.
 - o 508-655-0471 for the Natick Office
 - o 617-527-5040 for the Newton Office
- If you have any problems, do not wait for an appointment, please call the office.









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