

Bunion Surgery

Post Operative Planned Schedule:

Day of Surgery:

- Rest after arriving home, keep your leg elevated as much as possible
- 25% weight bearing which means you must use crutches or a walker to assist you until you are full weight bearing status.

1 Week Visit:

- Possibly get sutures out if directed by Dr. Mangone.
- Continue 25% weight bearing in the post op shoe
- You will receive a spacer to place between your 1st and 2nd toes or bunion splint-wear 24hrs/day

3 Week Visit:

- Sutures out if not removed at 1 week visit
- Advance to 50% weight bearing in the shoe, still using crutches or a walker
- Continue to wear the toe spacer/splint 24hrs/day

6 Week Visit:

- Wean out of the post-operative shoe into comfortable shoes (may take few weeks)
- Advance to FULL weight bearing as tolerated, if indicated by Dr. Mangone
 - This means to wean off of the crutches or walker over a 1-2wk period
- Continue to wear the toe spacer/splint 24hrs/day, NO high impact activities

12 Week Visit:

- Advance to wearing the toe spacer/splint 12 hours per day for another month

6 Month Visit- Final:

- Return to see Dr. Mangone for the final visit if needed. Discuss any problems, concerns, or questions at that time. Will be discharged from BRBJ care at this visit if no problems or concerns arise.

Extra Instructions:

- It is normal to have some drainage/bleeding on or through the bandage; pain is also to be expected. If you get a fever or red streaks up your leg call immediately.
- Showering: After the first visit if indicated by Dr. Mangone.
- Soak in a tub: 1-2 weeks after suture removal if approved by Dr. Mangone
- Drive a car: (if R foot or manual transmission) Only when back to a normal shoe
- Understand that your foot/great toe may not look exactly the same as the other.
- There is a 5-10% risk of recurrence of the bunion over your lifetime and you may have some residual stiffness in your great toe. Noncompliance increases the risk.
- You may not be able to wear a normal shoe on a regular basis for up to three months due to residual swelling of the great toe and foot.
- You must follow these instructions to ensure proper healing and to reduce your risk of non-union or other problems.

I understand the post-operative plan and the risks of surgery. I will be compliant with these restrictions and work with Dr. Mangone's advice throughout my medical care.

Signed:_____.

Date:_____.