

Dr. Christopher Miller – Post-op MIS bunion protocol

MIS bunion/hammertoe correction/DMMO protocol

0-2 weeks: Your toes will be strapped in a particular dressing that was placed during surgery. This dressing is to stay on until your first post-operative visit. Please keep this dressing dry. We recommend using a cast bag for this (you may purchase on Amazon).

You will be allowed to put as much weight on the surgical foot as you feel comfortable as long as the pain is a 1,2, or 3/10 on the pain scale. This is what we call “weightbearing as tolerated.”

You may weight bear after the block wears off and you can feel your foot again. Until then, you should not put weight on it. Crutches are not mandatory; however you may use them (or other assistive devices such as a rolling knee scooter or iWalk) if you feel more comfortable. You will be given an Aircast boot (walking boot) after surgery. Any time you are up moving around you need to have the boot on. You do not need to wear the boot to sleep.

2-4 weeks: The initial post-operative dressing will be removed. If the wounds look good, we will remove sutures. We will re-strap the bunion (and or lesser toes depending on your procedure) with a new dressing that is applied in clinic. Please keep this dressing dry using a cast bag. You will still be able to put as much weight as you feel comfortable on the foot (weightbearing as tolerated) and will still have to use a boot for walking.

4-6 weeks: We will remove the dressing that was placed in clinic. You will now be able to get the foot wet in the shower (no baths or submerging the foot in the tub/pool of water). We may make a custom putty splint for you in the office that is removable (so you can shower, etc). You will use this splint until your next post-operative visit. 4 weeks from date of surgery is the earliest you can try and wean from the boot into a supportive sneaker. We find that oftentimes this is challenging due to swelling, and you may require the walking boot for additional time depending on your swelling. We often begin a course of physical therapy at this time to work on range of motion, swelling, and strengthening.

6-12 weeks: You are working on getting back into a regular supportive sneaker, still using the splint we made for you. You should be working with PT. You may start to resume low impact activities as pain allows. Low impact activities include walking, biking, swimming (no pushing off the pool wall to turn), and modified yoga (no positions such as downward dog where you are forcing the toe upward).

12 weeks and beyond: You should be fully walking in regular shoes. You can discontinue use of the putty splint we made. You may start to incorporate higher impact activities as pain allows (running, jumping, activities requiring pushing off the toes).

Things to consider: Minimally invasive surgery does not mean “no pain.” Post-operative pain is experienced differently by every patient. We find that by taking a minimally invasive approach, patients typically do not experience a significant amount of post-operative pain. Most of our patients do not require narcotic pain medication after surgery. However, if they are needed, most patients only require them for the first day or two after surgery or as the block is wearing off. You will have swelling after surgery. Swelling can persist for quite some time, and it is not uncommon to still experience swelling at 2-3 months post-op. In general, we tell patients to think of the first 3 months as the “acute” recovery phase, where you will have

dressings/CAM boot/physical therapy/etc. Most people feel like they are getting back to “normal” and activities they normally participate in around 3 months and beyond.