Post Surgery Information
Most of the surgery that we perform requires immobilization afterward, and each type has a different recovery time. Ligaments take an average of 6 weeks to heal, so the leg is immobilized to make sure the repair does not stretch out. Next, we allow progressive weight-bearing and motion in two cast phases followed by physical therapy to rehabilitate our patients back to strength and balance.

Dr. McDonald enjoys seeing his patients early in the postoperative period, and then works closely with his excellent staff of Physician Assistants to guide you through the first three months of recovery. Dr. McDonald has constant contact with this specialized and superbly trained team, to ensure that any unexpected bumps or difficulties can be attended to by him directly.

MINOR ANKLE PROCEDURES + STANDARD PROTOCOL

| Ankle Arthroscopy with Thermal Capsular Shift | Ankle Synoveotomy |
| Hardware Removal | Ankle Hardware Removal |

These ankle surgeries are considered more minor and have the advantage that most patients can walk much sooner. Because we find that our patients are careful during the recovery time, we allow our patients to put full weight on their ankle after their first post-op visit. Obtaining a walking boot from the office prior to surgery can allow for application in the operating room and early walking after surgery.

- Follow up to the office 5 to 7 days after surgery. Keep the postoperative dressing dry. Elevate the leg for comfort. Ice for comfort.
- Removal of postoperative dressing. 3-4 weeks in a boot walker with full weight-bearing. This is taken on and off to shower/bathe and sleep. Motion is encouraged when the boot is taken off. A compression stocking or a specialized brace can be useful if you are having trouble with swelling.
- 4-6 weeks of physical therapy if your doctor feels it is necessary. Careful attention in Physical Therapy will help bring back strength, motion, and flexibility.

ANKLE PROCEDURES + STANDARD PROTOCOL

| Brostrum Repair/Ankle Stabilization | Tarsal Tunnel |
| Ankle Arthroscopy with Repair of Osteochondral Defect | Total Ankle Replacement |
| Peroneal Tendon Repair | Repair Achilles Tendon with or without Partial |
| Tendon Transfers | Excision of Calcaneus |
| Ankle Fractures | |

Our standard protocol for ankle procedures are:

- Follow up to the office 5 to 7 days after surgery. Keep the postoperative dressing dry. Elevate the leg for comfort. Ice for comfort.
- 3 weeks in a fiberglass cast non-weight-bearing. No weight-bearing activities are allowed: no walking, standing, or balancing on the cast. Crutches, a walker, turning leg caddy, or a wheelchair are needed.
- 4-6 weeks in a boot walker. This initiates a gradual increase to full weight-bearing as pain and swelling allow. The boot is taken on and off to shower/bathe and sleep. Motion is encouraged when the boot is taken off. A compression stocking can be useful if you are having trouble with swelling.
- 4-6 weeks of physical therapy if your doctor feels it is necessary. Careful attention in Physical Therapy will help bring back strength, motion, and flexibility.
FOREFOOT PROCEDURES + STANDARD PROTOCOL

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<th>Bunion Surgery</th>
<th>Excision Ganglion Cyst</th>
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<td>Foot Hardware Removal</td>
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Forefoot surgery has the advantage that most patients can walk on their heels. Because we find that our patients are careful during the recovery time, we allow our patients to put full weight on their heels after their first post-op visit.

- Follow up to the office 5 to 7 days after surgery. Keep the postoperative dressing dry. Elevate the leg for comfort. Ice for comfort.
- Removal of postoperative dressing. 3-5 weeks in a sandal walker with heel weight-bearing only. This is taken on and off to shower/bathe and sleep. Motion is encouraged when the sandal is taken off. A compression stocking can be useful if you are having trouble with swelling.
- 4-6 weeks of physical therapy if your doctor feels it is necessary. Careful attention in physical therapy will help bring back strength, motion, and flexibility.

MIDFOOT FUSIONS & OSTEOTOMIES PROCEDURES + STANDARD PROTOCOL

<table>
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<td>Posterior Tibial Tendon Repair with Calcaneal Osteotomy</td>
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<td>Surgery Lisfranc fractures (tarsometatarsal fractures)</td>
<td>Midfoot Fusions</td>
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Our standard protocols are:

- Follow up to the office 5-7 days after surgery. Keep the postoperative dressing dry. Elevate the leg for comfort. Ice for comfort.
- 3 weeks in a fiberglass cast non-weight-bearing. No weight-bearing activities are allowed: no walking, standing, or balancing on the cast. Crutches, a walker, turning leg caddy, or a wheelchair is needed.
- 3 more weeks in a fiberglass cast non-weight-bearing. No weight-bearing activities are allowed: no walking, standing or balancing on the cast. Crutches, a walker, turning leg caddy, or a wheelchair is needed.
- 4-6 weeks in a boot walker. This initiates a gradual increase to full weight-bearing as pain and swelling allow. The boot is taken on and off to shower/bathe and sleep. Motion is encouraged when the boot is taken off. Consider a compression stocking if you are having trouble with swelling.
- 4-6 weeks of Physical Therapy. Careful attention in Physical Therapy will help bring back strength, motion, and flexibility.
COMPLEX BONY PROCEDURES PROCEDURES +
STANDARD PROTOCOL

Ankle Fusions
Triple Arthrodesis
Pantalar Arthrodesis
Talar Fractures
Calcaneal Fractures
Tibiotalarcalcaneal Arthrodesis
Talonavicular Arthrodesis
Medial Double

These bony procedures require the most immobilization. Bones on the average take 7 weeks to heal to about 80% of their normal strength. Once healed, we progressively stress the bone to accelerate remodeling of the bone and to improve its compression and tensile strength.

Our standard protocol for bone procedures are:

- Follow up to the office 5 to 7 days after surgery. Keep the postoperative dressing dry. Elevate the leg for comfort. Ice for comfort.
- 3 weeks in a fiberglass cast non-weight-bearing. No weight-bearing activities are allowed: no walking, standing or balancing on the cast. Crutches, a walker, turning leg caddy, or a wheelchair is needed.
- 3 more weeks in a fiberglass cast non-weight-bearing. No weight-bearing activities are allowed: no walking, standing or balancing on the cast. Crutches, a walker, turning leg caddy, or a wheelchair are needed.
- 3 weeks in a weight-bearing cast. Full weight-bearing with no assistive devices is allowed. It will take time to adjust to walking in a cast. Ice and elevation remain important as you increase your activity level.
- 4-6 weeks in a boot walker. This initiates a gradual increase to full weight-bearing as pain and swelling allow. The boot is taken on and off to shower/bathe and sleep. Motion is encouraged when the boot is taken off. Remind the nurse to consider a compression stocking if you are having trouble with swelling.
- 4-6 weeks of physical therapy if your doctor feels it is necessary. Careful attention in physical therapy will help bring back strength, motion, and flexibility.