SURGICAL SERVICES
Post-Operative Instructions
Lapidus for Hallux Valgus (Bunion) Correction Surgery

PAIN:

Your surgeon may have also given you a prescription for a stronger pain medication. Some pain is normal after your surgery. Take medications as instructed by the nurse and/or surgeon. You may also take medication for
nausea such as Gravol™ if needed.

OPERATIVE SITE:

Your surgeon will apply a bandage that acts as a splint to splint the big toe in its correct position, either with a toe spacer between the first and second toe or a bunion splint. You will likely have a soft cast (Coban™ dressing) with a post-operative sandal (fabric Velcro boot) for the first 6 weeks. The sandal must stay on, even when you are in bed. Do not get the splint/soft cast dressing wet and leave the dressing on until your follow up appointment. Your incision may ooze blood for up to 48 hours. Do not change the dressing; reinforce the dressing as needed with gauze. The Coban™ outer wrap may be taken off and reapplied loosely if it feels too tight.

ACTIVITY:

This procedure requires 6 weeks of non-weight bearing. After 6 weeks your surgeon will likely allow you to begin weight bearing as tolerated using a walking boot. Usually you can return to a regular shoe by 10-12 weeks after surgery. A full recovery may take up to a year. You may consider seeking a convalescence facility if you have concerns about coping at home in the early weeks of recovery. You may contact the Social Work department for a list of convalescence facilities.

Walking aids such as a walker, knee scooter, knee walker, crutches or cane can be obtained at a medical supply vendor for equipment. Contact our out-patient physiotherapy department if you wish to have a list of equipment vendors. Depending on your vehicle and which leg is being operated on, plan to not be able to drive for up to 10 to 12 weeks.

CONTINUED ON OTHER SIDE 🡪

Information is available in alternate formats upon request

DIET:

Resume your regular diet the day following surgery. Increase the amount of fiber in your diet and drink plenty of fluids to avoid constipation. Good sources of fiber are fruits, vegetables and whole grain bread and cereals (All Bran™, Bran Flakes™, Shreddies™ and Shredded Wheat™). You may also purchase a mild laxative if needed, speak with your community pharmacist.

FOLLOW-UP:

Your surgeon will advise you of your follow-up appointments. A registered nurse from the Day Surgery Unit will call you the day after your surgery to discuss any concerns.

ADDITIONAL INFORMATION:

* Elevate foot above level of heart 2-3 times a day to decrease swelling
* Be careful not to bang or hit foot on an object
* No exercise or sports until directed by your surgeon
* Resume normal preoperative prescription medications as directed by your surgeon

Go to the nearest Emergency Department if you have any of the following:

* Foot becomes cold and blueness/whiteness of toes
* Numbness of toes
* Elevated temperature (above 38oCor 100.4oF) and or chills lasting more than 24 hours
* Excessive bleeding from the incision, large amount of drainage on your dressing, soaking through requiring frequent dressing changes
* Increased redness, warmth and/or swelling around the incision
* Severe pain not controlled by pain medication
* Foul smelling (yellow green) discharge from operative site
* Significant swelling and or redness around the incision
* Sudden or severe shortness of breath, rapid heart rate or chest pain/chest discomfort

The information contained on this sheet is provided to you and your family to help you in your recovery from this procedure. This document is not intended to replace medical advice from your doctor or healthcare team. If you require more specific/additional medical advice, contact your doctor and healthcare team about your particular healthcare needs.

Protect yourself! Clean your hands frequently using soap and water or

hand sanitizer and ask that your healthcare providers and visitors do the same." Clean hands save lives.