

PLANTAR FASCIOTOMY, ENDOSCOPIC POST-OPERATIVE GUIDELINES

INITIAL SURGICAL DRESSING

The initial surgical dressing consists of a soft dressing covered by a hard cast called a splint. Keep the dressing on your wound until your first post-operative appointment. Keep dressing clean and dry. You may notice bleeding or drainage on your bandage. This is not unusual. Do not remove the bandage. You may apply another bandage over if necessary.

If bleeding is excessive during the first 24 to 48 hours: Phone the surgeon on call

BED REST, ELEVATION, AND WEIGHTBEARING

Bed rest is prescribed for at least two days after operation if one foot is operated up and three days after operation if both feet are operated upon. During the period of bed rest, the feet are elevated above the level of the heart. After the period of bed rest, progress with sitting with the feet elevated at chair level. Progressing with ambulation around the house is encouraged. Confinement to the house for the first week is recommended.

Weightbearing is allowed after the first 24 hours when getting up to go to the bathroom. During the first 24 hours, an effort is made to avoid weightbearing on heel. With the crutches, place weight on the ball of the foot. After the first dressing change, one week after operation, full weightbearing is encouraged.

PAIN MANAGEMENT

Local anesthetic and often a nerve block is used to anesthetize or numb the surgical area. This will numb the pain for approximately 4-24 hours after surgery.

Oral pain medication is prescribed, and given to the patient before surgery. Fill the prescriptions as soon as possible and begin taking them as directed for the first three days, as this tends to be the most painful period. Then the pain medication can be scaled back as pain lessens. Pain medication is constipating. Increased fluid intake and over the counter stool softeners are recommended to be started after surgery.

If pain is intolerable during the first 24 to 48 hours: Phone the surgeon on call

CRUTCHES/WALKER/CANE

Crutches are used for approximately a week and a half. A walker is recommended if one is not feeling secure with the crutches.

BANDAGES AND CASTS

First week (Days 1-6): Leave the initial surgical dressing intact, unless otherwise instructed.

Second week: The dressing will be changed in the office one about week postoperative. A light gauze dressing will be applied with the ace bandage.

FOOTWEAR, ELASTIC STOCKING, AND BRACES

After 2 weeks, a shoe with adequate shock absorption is used, such as a tennis shoe. A cushioned insole may give added comfort.

SHOWERING, SUTURES, AND DRIVING

Showering requires protection to keep the dressing dry until sutures are removed two weeks after surgery. This usually requires cast bag. After ten days, the surgery area can get wet in the shower unless there is drainage. Wait until three weeks after operation before soaking in the bathtub or a hot tub.

Driving is usually feasible using a tennis shoe approximately two weeks after operation.

FOOT REHABILITATIVE EXERCISES

First week: (Days 0 – 6). No exercises.

Second week: Massage. Use the hand to pull the toes into maximum extension for the operative foot. Apply progressively greater pressure with the opposite hand, rubbing the area of the plantar fascia attachment to the heel bone. A set of massage is 5 twenty-second (hand applications). Do 4 or 5 sets per day in the initial two weeks of massage, then reduce the massage sets as motion exercises become emphasized.

Third week: Prescribed physical therapy instructions may be started in the third week.

SKIN CARE

Beginning about two weeks (14th day) after surgery, soften the skin with Vaseline, vitamin E ointment or a thick hand lotion like Curel.