



## Jeremy L. Walters, D.P.M.

### Foot and Ankle Specialist

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## Bunionectomy

**For the Clinician:** The intent of this protocol is to provide the clinician with a guideline of the post-operative rehabilitation for the patients who undergo therapy for a Hallux Valgus correction. It is not intended to be a substitute for clinical decision making regarding the progression of a patient's post-operative course based on their examination/findings, individual progress, and/or the presence of post-operative complications. If a clinician requires assistance in the progression of a post-operative patient, they should consult with the referring surgeon.

**For the Patient:** The timeframes for expected outcomes contained within this guideline may vary from patient to patient based on individual differences, surgical techniques, surgeon's preference, additional procedures performed, and/or complications. Compliance with all the recommendations provided by your physician and physical therapist as well as your active participation in all parts of the rehabilitation process, are essential to optimizing the success of your procedure.

### 0-2 Weeks:

- Edema management
- Gait training and safety (emphasize precautions with weight bearing)
- Education/modifications for ADLs
- AROM of hip and knee
- Rest and elevation of the involved lower extremity above the heart as much as possible throughout the day

### 2-6 weeks

- Incision/scar inspection: Patient should use Mederma Scar cream or Vitamin E to incision sites daily



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- Exercises and hands-on techniques (by the PT) for ankle active and passive range of motion (AROM, PROM) with attention to hand placement to avoid pressure on surgical sites
- Exercises for increasing AROM/PROM at the 1st metatarsal phalangeal joint (MTP) motion (avoid pressure on surgical sites)
- Strengthening for core, hips, knees (maintain precautions)
- Gait training to ensure safety and to proper technique with heel weight bearing
- Scar mobilization once incisions are fully healed
- Patient should perform 1<sup>st</sup> MTPJ ROM exercises at home, 3 sets of 10 second holds, twice daily

### 6-12 weeks

- Transition from CAM into running shoe
- Stationary Bike
- Proprioception training
- Continue gait training, full weight bearing
- Continue Exercises for increasing AROM/PROM at the 1st metatarsal phalangeal joint (MTP) motion and ankle joint
- Strengthening for core, hips, knees
- At 12 week visit, patient and clinician will discuss return to running, high impact activities.