Bunion Repair FAQs

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Q: Can I take my post-op shoe off at night?

A: Yes. The post-op shoe is for weight bearing activity only.

Q; I have bleeding, doesn't that increase my risk of infection?

A: No. Blood is sterile. If your blood is not sterile you're in serious trouble...Your dressings are applied in a sterile environment. There is actually a greater risk of infection by changing your dressing before your incision is healed.

Q: This post-op shoe is really uncomfortable, what can I do?

A: You can take the insert out of your athletic shoe and use it in your post-op shoe. If you normally wear orthotics, you may use this in your post-op shoe.

Q; My dressings are causing pain, can I have them changed?

A: Yes. We like to change dressing in our clinic by our staff or in a clean hospital/clinic location if possible. Call the on call provider and if pain not controlled or follow up in emergency department or urgent care for evaluation if needed. We don't want your dressings to create another wound on your foot or cause you to take more pain medicine.

Q: I have blood on my dressings, how long should I wait to call?

A: 48 hours. Some bleeding is normal after surgery. There shouldn't be any new bleeding 24 hours after your procedure.

Q: Can I take Ibuprofen?

A: No. We prescribe Ibuprofen to help get you through the initial few days after surgery because it's very helpful for inflammatory pain. After the first week post-op Ibuprofen (and all NSAIDS) is actually detrimental to your bone healing.

Q: How long is it normal to take pain medicine?

A: No clear cut answer for this one. Expect some discomfort after surgery. If you have sharp pain, use medication to help. The goal of pain medication is not to enable to you do normal activities after surgery. Your pain should gradually resolve in the 1St few weeks after surgery.

Q: I had a block and I can't feel my foot, is this normal?

A: Yes. Sometimes blocks can last 24-36 hours. Numbness is normal after surgery. It is normal to have some numbness in your foot for a week or so. If you cannot feel your foot at all after 36 hours, call the surgery center and ask to speak to one of the anesthesiologists.

Q: I tripped and hurt my surgical foot, did I do any damage?

A: Unlikely. If your pain is worsening after an hour of elevation give us a call and we'll potentially take an x-ray. Usually if anything major has happened, the pain will be severe enough to go the Emergency Department.

Q: Am I able to bathe?

A: Take a sponge bath instead of a shower if possible during the first two weeks. If you choose to shower, cover the dressing with a waterproof covering. These may be purchased at: *Walgreens* Reusable Waterproof Cast & Wound Protector

CVS Reusable Cast & Wound Protector

WalMart Seal-Tight Freedom Cast and Wound Protector Adult Leg

Target Nova Leg Cast Protector

Online (Amazon) Xerosox Waterproof Cast Cover

Q: Can I drive?

A: Yes, if you are no longer taking narcotic pain medication you by law are able to drive once you are out of the post op shoe on the right foot. If surgery was done on the left you can drive if off narcotic pain medication. However if you do not feel confident with the pressure needed to push the pedals then we recommend waiting until you feel comfortable.

Q: Can I get a pedicure?

A: We recommend waiting until after our 6 week post op visit to get a pedicure in a salon. You however will get the okay to take a shower/bath after your sutures have been removed at the 2 week post op.

Q: When will the orange surgical prep solution wash off my skin?

A: Be patient, this may take a few showers before the discoloration completely washes off the skin. Baby oil has been known to speed this process along.

Q: Will I need physical therapy?

A: An x-ray will be done at six weeks; if everything looks fine you will be given order to start therapy. Physical therapy can be done close to home or work. It is good to arrange this ahead of time to ensure a start date soon after the 6 week mark. It is usually once or twice a week for 4-6 weeks. The idea is to regain confidence, range of motion and reduction of swelling. Avoid going up on your toes for another 6 weeks.