

PLANTAR FASCIA ULTRASOUND GUIDED PERCUTANEOUS FASCIOTOMY CLINICAL PRACTICE GUIDELINE

The ultrasound guided percutaneous tenotomy allows what was once major surgery to be performed quickly through a small incision. Although post-procedure care will be tailored to fit your individual needs, the following guidelines are designed to help you and your physical therapist after the procedure.

Progression is time and criterion-based, dependent on soft tissue healing, patient demographics and clinician evaluation. Contact Ohio State Sports Medicine at 614-293-2385 if questions arise.

Things to Avoid Before and After Your Procedure

- Over-the-counter pain medicine like ibuprofen (Advil™, Motrin™), naproxen (Aleve™, Naprosyn™) and acetaminophen (Tylenol™): Make every effort to avoid these medications before and after your procedure. They may impair your ability to heal and may increase risk of bleeding.
- Alcohol: Avoid 48 hours before your procedure. Do not consume alcohol while you are taking prescription pain medication.
- Tobacco & nicotine: Consider talking to your physician about stopping. These products impair your ability to heal and might reduce the beneficial effects of the procedure.
- Diet: There is no need to fast before the procedure. You may eat normal meals before your procedure and resume your regular diet when you feel able.

Make sure your medical team provides you with the following before or at your procedure:

- Crutches
- Walking boot
- Therapy appointment times
- Follow-up times

Post-procedure Care

- Plan to have a family member or friend drive you home after your procedure.
- Bring your crutches / scooter / boot to your procedure appointment.

	Weight Bearing	Activity and Rehab
Day 1 (day of your procedure)	<ul style="list-style-type: none">• No weight bearing on treated foot; use crutches/scooter and boot to get around.	<ul style="list-style-type: none">• Protect your foot by resting and keeping it elevated to reduce swelling.
Days 2-3	<ul style="list-style-type: none">• Begin light partial weight bearing, placing your foot on the ground for balance; use crutches/scooter and boot to get around.	<ul style="list-style-type: none">• Elevate at least 3 times a day to control swelling. Begin gentle ankle range of motion exercises 3 times per day.



Days 4-7	<ul style="list-style-type: none"> Discontinue crutches. Begin walking using the boot only. If you use a scooter, begin partial weight bearing by <u>placing untreated leg on scooter and bearing some weight on the treated foot in your boot.</u> 	<ul style="list-style-type: none"> Continue ankle range of motion. Perform isometric ankle strengthening and toe crunches 1-2 times per day.
Week 2	<ul style="list-style-type: none"> Discontinue the use of the boot / scooter. Begin walking normally in your home and then in the community as you are able. 	<ul style="list-style-type: none"> Continue ankle range of motion 3 times per day. Perform isotonic ankle strengthening, toe crunches and foot intrinsic strengthening 1-2 times per day. Begin non-impact aerobic exercise with a stationary bike without the boot. You can start gentle swimming and pool exercise when the wound is healed.
Week 3-4		<ul style="list-style-type: none"> Advance strengthening by adding more resistance. Continue ankle range of motion. Begin balance exercises like single-leg stance.
Week 5		<ul style="list-style-type: none"> Begin using an elliptical machine (begin with no incline and low resistance) and increase walking pace for exercise. Advance lower body strengthening as tolerated at the discretion of your care team.
Week 6		<ul style="list-style-type: none"> Increase the intensity of biking, swimming, elliptical, fast walking and resistance exercises. Once you are working hard at these without pain, progress to higher impact activities (like jogging, running, sprinting and jumping) as directed by your care team. For running, consider using an anti-gravity treadmill to start.

Orthotics/Braces

You do not need to sleep in boot. Do not drive while you are wearing the boot. If you have an orthosis, wear this in your boot/shoe as you normally would.

Discomfort

Some pain after your procedure is expected for the first few weeks. Use an ice pack on the painful area for 15 minutes as needed; in the first 2-3 days consider icing 3 times daily. If you are concerned about your pain, please contact your care team.

Bandage

- If a bandage/dressing was applied, remove dressing after 24-48 hours. Replace with simple bandage.
- Sterile strip bandages can be removed when they begin peeling off or after 7 days. Keep procedure area clean and dry for 1 week after the procedure until your doctor has seen you for your wound check.

Bathing

Do not soak/submerge the foot in water for 1 week. Showering is OK, but keep incision site covered for the first week.

When to call your provider

If you notice increasing redness, warmth, pain, fever, drainage from the wound or other problems that concern you, call Ohio State Sports Medicine (614-293-3600) during normal clinic hours. Otherwise seek care at your local emergency room.

For Therapists Only

All strength work should be performed every other day, 2-3 sets of each exercise to fatigue without reactive pain. Manual work may begin 2 weeks after the procedure date.

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