

Procedures/Treatment(s): Tendon Repair and Reconstruction (Achilles repair, Achilles reconstruction, posterior tibial tendon, anterior tibial, re-routing procedures, peroneal relocation, peroneal repair, etc)

TENDON SURGERY INFORMATION SHEET

General indications for the procedure:

The indications for the procedure are to reduce pain, obtain improved alignment of the bones in the foot or ankle, improve current deformity, improve function and prevent progression of arthritic changes or deformity.

Description of Procedure:

The procedure of tendon repair consists of directly identifying the tear or deformity in the tendon and repairing the tendon as well as correcting any associated deformity that may have been caused by the tendon dysfunction through an open incision. This can be accomplished with either a direct primary repair (meaning finding the tear and repairing it with suture) or a secondary reconstruction if needed. The secondary repair can consist of removing any diseased or non functioning tendon and supplementing this tendon with an allograft (cadaver or synthetic material) or tendon within the foot and ankle. The use of local tendon in the foot or ankle can be either a supplementation (tenodesis) or tendon transfer. The deformity correction can consist of re-alignment of the bones, tendons and joints in the foot or ankle if needed through open incisions. This may be accomplished using a combination of procedures that may include cuts in the bone, joint fusions, removal of a portion of a bone, removal of bone in its entirety, lengthening of tendons or ligaments, and detachment and re-attachment of tendons or ligaments. Use of intra-operative imaging devices may be utilized to assist in the re-alignment. The deformity correction may involve the use of internal metallic implants such as pins, screws, staples, plates, rods, wires, buttons, and washers. The tendon repair or transfer may involve the use of cadaveric or synthetic material, suture, screws, staples, plates, wires, buttons and washers. A tourniquet may be used to limit surgical bleeding during the procedure. Depending on the specific circumstances of the patient's case, this procedure can be performed with local anesthesia with sedation or twilight anesthesia, regional anesthesia or general anesthesia.

Risks of Procedure:

Risks include, but are not limited to: postoperative infection, nerve injury, tendon injury, vascular injury, postoperative bleeding, swelling, complex regional pain syndrome, development of arthritis, need for hardware removal, failure of bone healing, failure of tendon healing, failure of ligament healing, healing of the foot or ankle in a mal-aligned position, recurrence of deformity, deep vein thrombosis, pulmonary embolus, excessive scar tissue formation, continued pain, discoloration of the skin and the risks of anesthesia.

Alternative to Procedure:

The alternatives to surgery include non-operative treatment using medications, shoe inserts, braces and larger shoes. Risks of alternative care include, but are not limited

to, continued pain, progression of current mal-alignment, development of mal-alignment at the surrounding joints, the development of sores or open wounds due to mal-alignment, and the development or progression of arthritis in the future.

Probable Consequences of Refusing Procedure:

The probable consequences of refusing surgical treatment are continued pain, progression of current mal-alignment, development of mal-alignment at the surrounding joints, the development of sores or open wounds due to mal-alignment, and the development or progression of arthritis in the future.

Person(s) Performing the Procedure:

The key portions of this procedure will be performed by the attending physician with the assistance of the Orthopaedic Resident Staff. All surgical tasks are performed in accordance with the hospital's policies and, in the case of the Residents, based on their skills set and under the supervision of the responsible Orthopedic Surgeon.