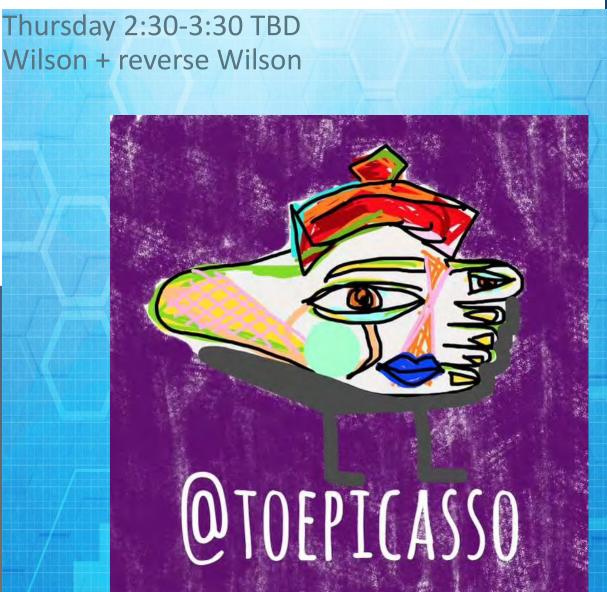


MIS Foot Surgery

Academy of Minimally Invasive Foot & Ankle Surgery

Brant McCartan DPM, MBA, MS







- Hospital
- Surgery Center
- Office*
- Anywhere?
- Patients come from near and far

Expecatations



In-office surgeries

Why would doctors/patients want to perform in-office

surgeries?

Doctors

- -saves time
- -make more money
- -less headaches
- -safer

Patients

- -saves time
- -save money
- -less headaches
- -safer

They said bring a dessert and a game to the party...



Nailed it!

What do you need?

- -Education not difficult to get started, at the conferences and labs the vendors are there to get you what you need. Many books now available
- -Fluoroscopy mini C-arm is ideal
- -Instrumentation
 - -Hand piece, many options now, before, only Osada
 - -important low speed, high torque
 - -Micro instrument tools
 - -beaver blade, small elevator
 - -Bandaging is your fixation
 - -Your Left hand (non-working hand) is your eyes
 - Grip: pencil, golf/racket
 - -motion: sweeping (peeling a fruit), pistoning

Common questions & misconceptions

- -The bone needs hardware to heal
- -We don't treat the x-rays...but do we?
- -Letting patient ambulate day one?
- -soft bone callus means motion, and.....
- -where do we learn from? Industry? Vendors?

Conference?

- -why doesn't every doctor do MIS?
- -why would anyone chose traditional surgery?

How is it done MIS?

I've got salad for dinner.

Actually a fruit salad.

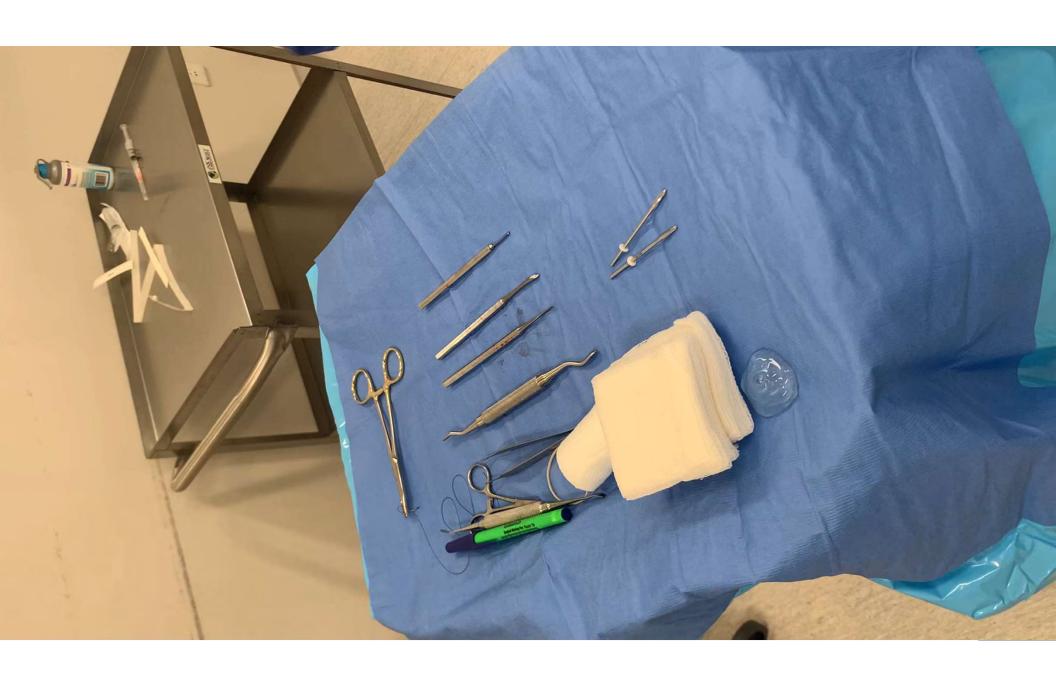
Well, mostly grapes.

OK all grapes.

Fermented grapes.

Wine.

I've got wine for dinner.





Wilson Bunionectomy



Pre-op





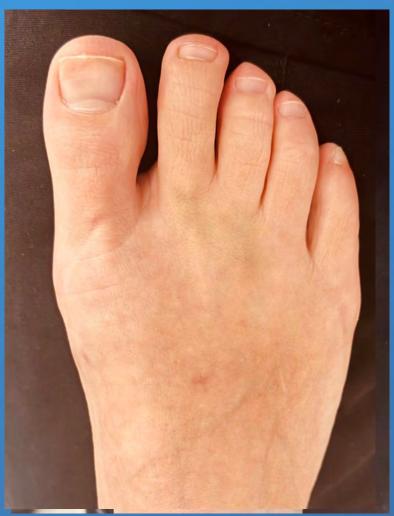
Post-op





Post-op



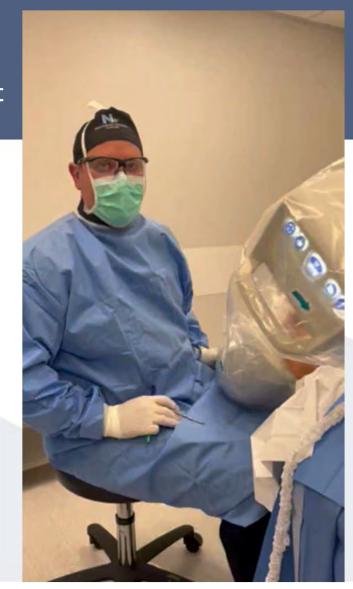


The Lats (for Sheldon et al)



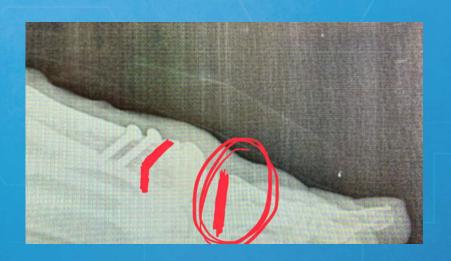
Marking a Plan

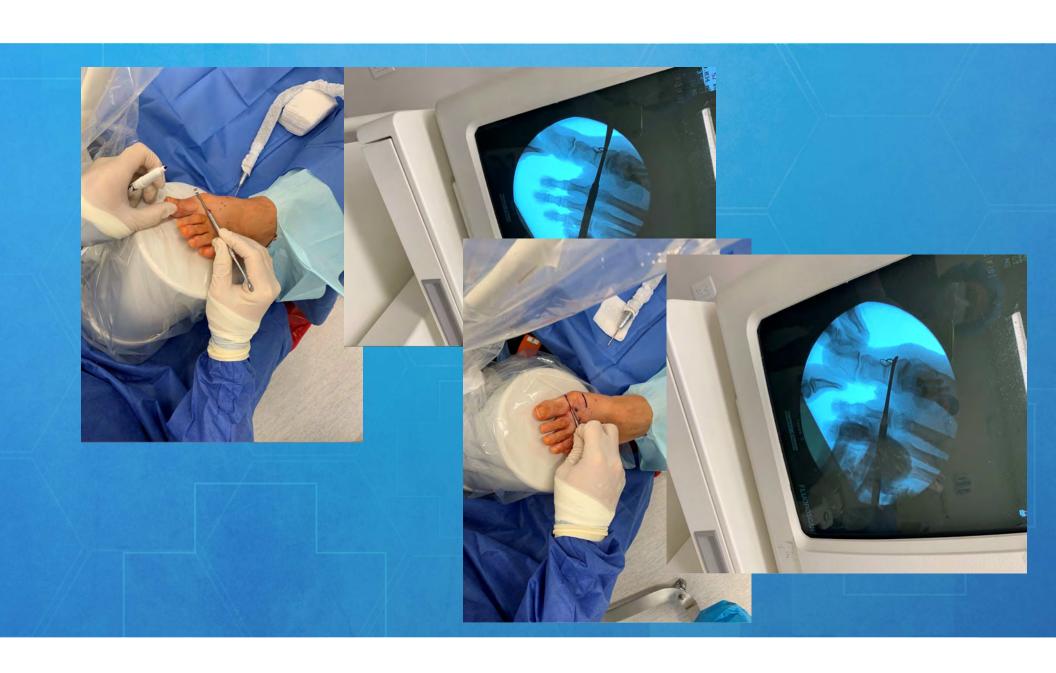
Use Fluoroscopy before you start



Complicated Hardware





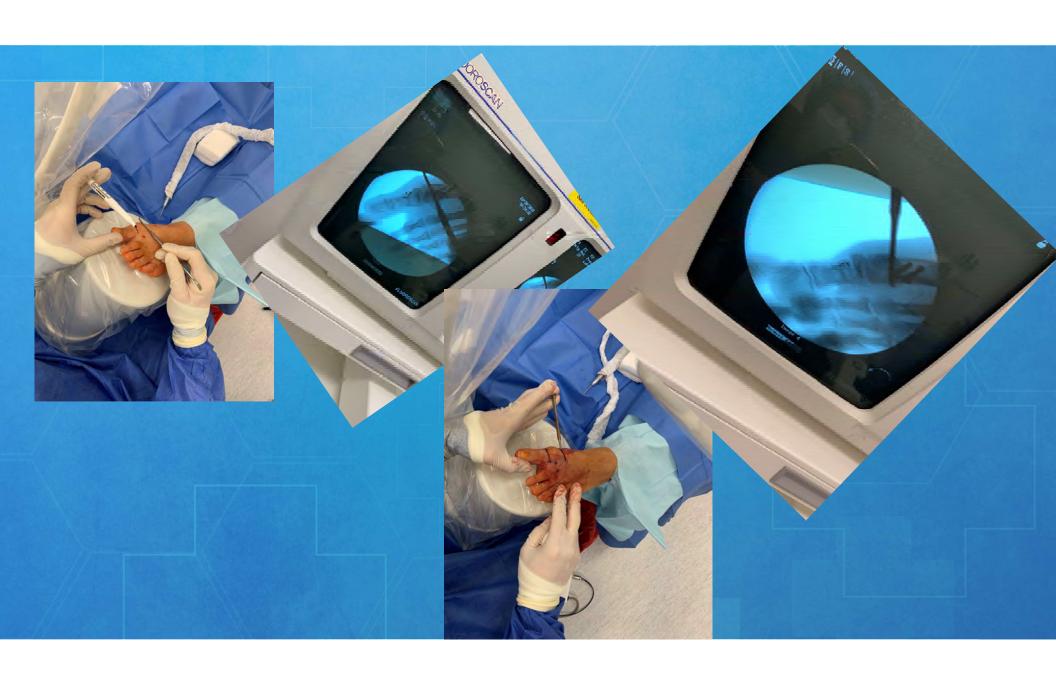


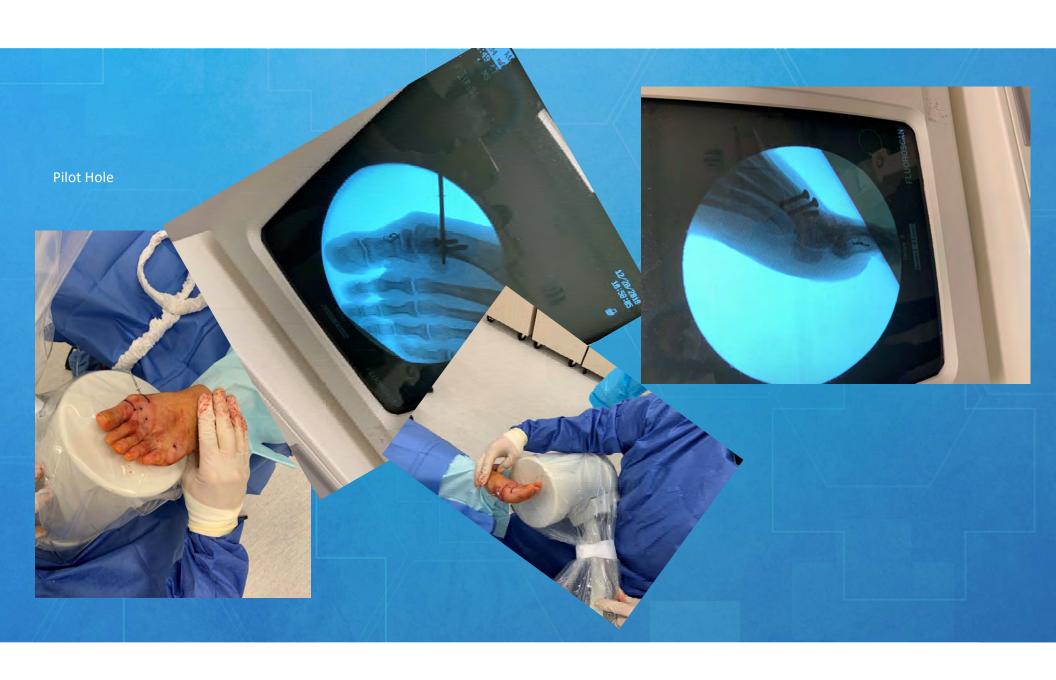
Osteotomy Open/Closed

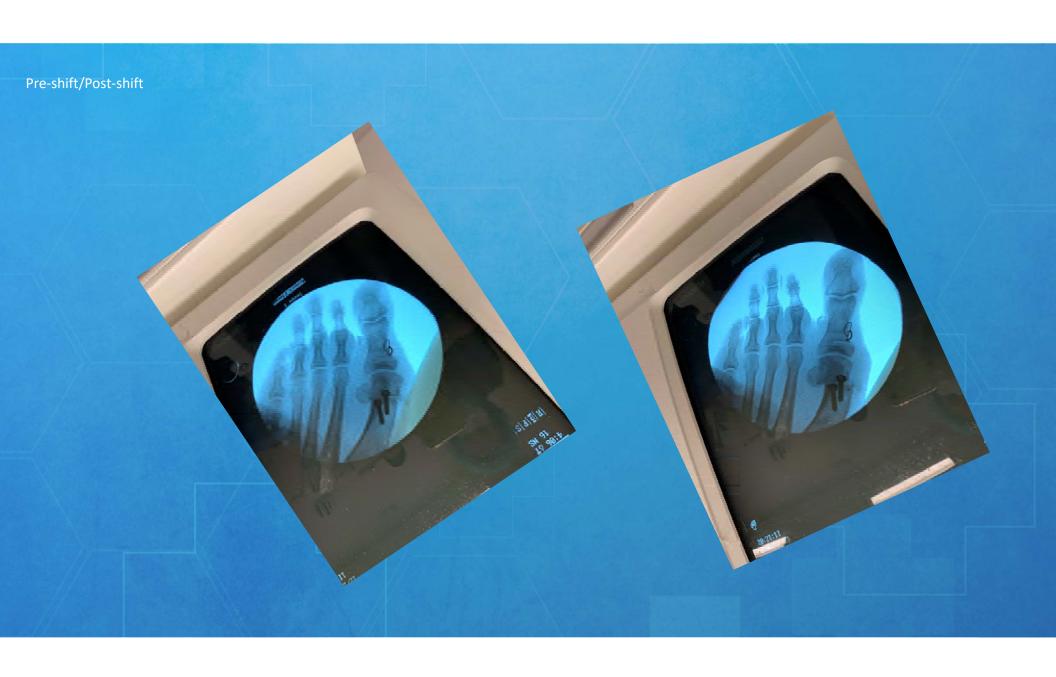


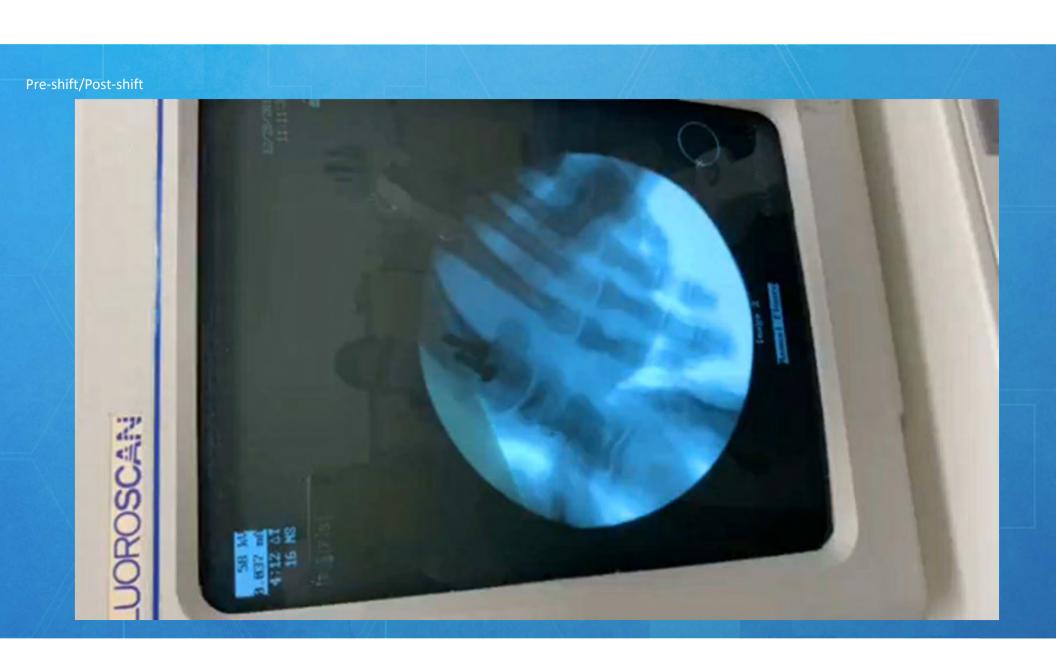














Bandaging





Hallux Varus -Reverse Wilson

- -aka overcorrection
- -aka opposite of a bunion
- -negative HAV



Case study 76 yoF previously had traditional/open bunion surgery with temporary k-wire fixation many years prior. Pre-op plan to sequential give this patient a bunion

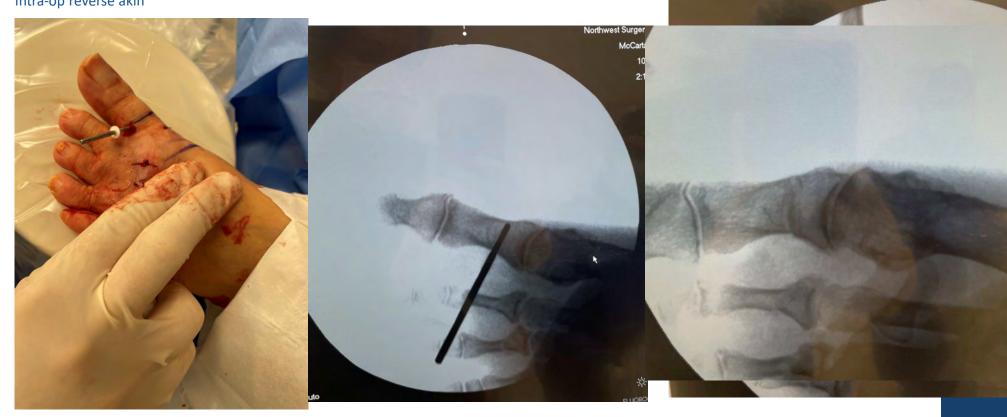
- 1. Medial release
- 2. Reverse akin
- 3. Reverse Wlison
- 4. Bandaging







Intra-op reverse akin



Intra-op reverse wilson





Intra-op reverse wilson





1 month post-op

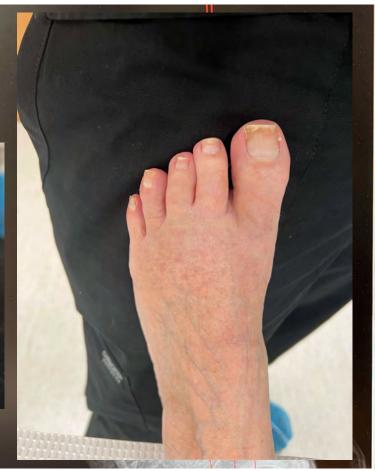






3 months post-op









THANK YOU

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