

Policy Name:	Bunion (Hallux Valgus) Surgery			GM Policy Ref:	GM052
First issue date:	December 2014	Current version:	2.3	Last reviewed:	January 2016

Policy inclusion criteria

Commissioned when the patient experiences persistent significant pain and functional impairment that is interfering with the activities of daily living.

AND all appropriate conservative measures have been tried over a 6 month period and failed to relieve symptoms, including:

1. up to 12 weeks of evidence based non-surgical treatments, i.e. analgesics/painkillers.
2. bunion pads
3. footwear modifications

AND the patient understands that they will be out of sedentary work for 2-6 weeks and physical work for 2-3 months and they will be unable to drive for 6-8 weeks, (2 weeks if left side and driving automatic car).

OR there is a higher risk of ulceration or other complications, for example, neuropathy, for patients with diabetes. Such patients should be referred for an early assessment.

A patient should **NOT** be referred for surgery for prophylactic or cosmetic reasons for asymptomatic bunions.

Funding mechanism: Monitored approval: Referrals may be made in line with the criteria without seeking funding. **NOTE:** May be the subject of contract challenges and/or audit of cases against commissioned criteria.

If the patient does not meet the criteria: an individual funding request can be made if there is a good case for clinical exceptionality. Requests should be submitted with all relevant supporting evidence, which must be provided with the request.

Policy exclusions

Hallux Rigidus is excluded from this policy. Patients may be referred for assessment as clinically appropriate.

Bunion surgery as part of an externally funded trial or a locally agreed pathway of care is excluded from this policy.