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Percutaneous Needle Tenotomy of the Plantar Fascia FAQs

How do I know if I am a good candidate for Percutaneous Needle Tenotomy (PNT) of the plantar fascia?

Initially, you will be seen in consultation by Dr. Stiene in order to determine if you are a good candidate for the procedure. This involves reviewing your medical, athletic, and occupational history as it relates to your injury. The injured area will also be examined and imaged with diagnostic ultrasound as that is the imaging modality that will be used when treated with PNT. Any other previous imaging that you have had will also be reviewed. If a stress fracture of the heel bone is suspected, an MRI may be ordered. Once the consultation is complete, we will discuss the specifics of the procedure, as well as how long you might expect to miss work and how long it will take you to recover. We will also review the medications that you are taking and determine if any needed to temporarily stopped.

Will I receive any other treatment than the PNT?

In addition to the tenotomy, you may either receive an anti-inflammatory or PRP (platelet rich plasma) injected under ultrasound guidance after the PNT. This is individualized based upon your own situation, work, athletic activities and other previous treatments.

How painful is the procedure?

The area of injury is anesthetized by an ultrasound guided nerve block that is done to posterior tibial nerve either behind the knee or above the inside aspect of the ankle as injecting the plantar fascia directly with local anesthetic is very painful.

After the procedure most patients will experience mild-moderate pain for a few days that can be managed with ice, anti-inflammatory medicine, and non-narcotic pain medicine.

How long will I be in the office and will someone need to drive me?

Patients are usually in the office for about an hour. It takes about 15-20 minutes for the nerve block to take effect and it takes the physician about 10-30 to complete the procedure. If you receive PRP in addition to your tenotomy, you will be at the office a little longer in order to draw and prepare the platelets. If you have a procedure that involves your right plantar fascia you will not be able to drive yourself because of the nerve block. If the procedure is on your left foot and you don't drive a vehicle with a manual transmission you will be able to drive yourself.

How soon can I return to normal, work, and athletic activities?

It depends on what type of work you do. If you stand all day, you may be kept in a boot for a few days up to a few weeks, but can return to work in a day or so. Most patients use crutches for 1-3 days and then a good supportive shoe is all that is needed. If you are a runner or an athlete that is involved in stop and go activities like tennis or soccer, you will likely receive PRP as multiple treatments and will likely be down from running from a number of weeks to sometimes a few months. Normal daily activities such as walking and working around the house can be resumed within a week to ten days.

Will I need to go to physical therapy?

If you are being treated for a chronic plantar fasciitis, you will generally be able to do a home exercise program since it is very likely you have already worked with a physical therapist. If you have an acute injury or have not worked with a therapist in the past, you will likely spend a few visits with a physical therapist who will also give you a home exercise program.

How many PNT treatments will I need?

Most patients need 2-3 treatments if being treated with PRP. If treated with PNT and anti-inflammatory medicine one treatment is usually all that is needed and if that treatment would fail, a second treatment with PRP would be utilized.

Why not use PRP with all percutaneous needle tenotomies of the plantar fascia?

For folks that have a minimally thickened plantar fascia with only a small amount of scar tissue or small osteophyte noted on ultrasound, releasing that scar tissue and osteophyte may be all that is needed to relieve the pain and allow the patient to embark on a successful stretching program to prevent recurrence. For patients whose fascia is fairly thickened indicating quite a bit of degenerative tissue, or have had previous corticosteroid injections, PRP is very useful to regenerate new tissue to allow an eventual pain free result.

Is PNT cover by insurance?

Most insurance carriers, including Medicare cover this procedure as well as the utilization of MSK (musculoskeletal) or orthopaedic ultrasound. PRP is generally not covered by insurance carriers and that includes Medicare. Full time patient advocates/financial counselors are available through Beacon at no cost to the patient to help navigate you through insurance issues.