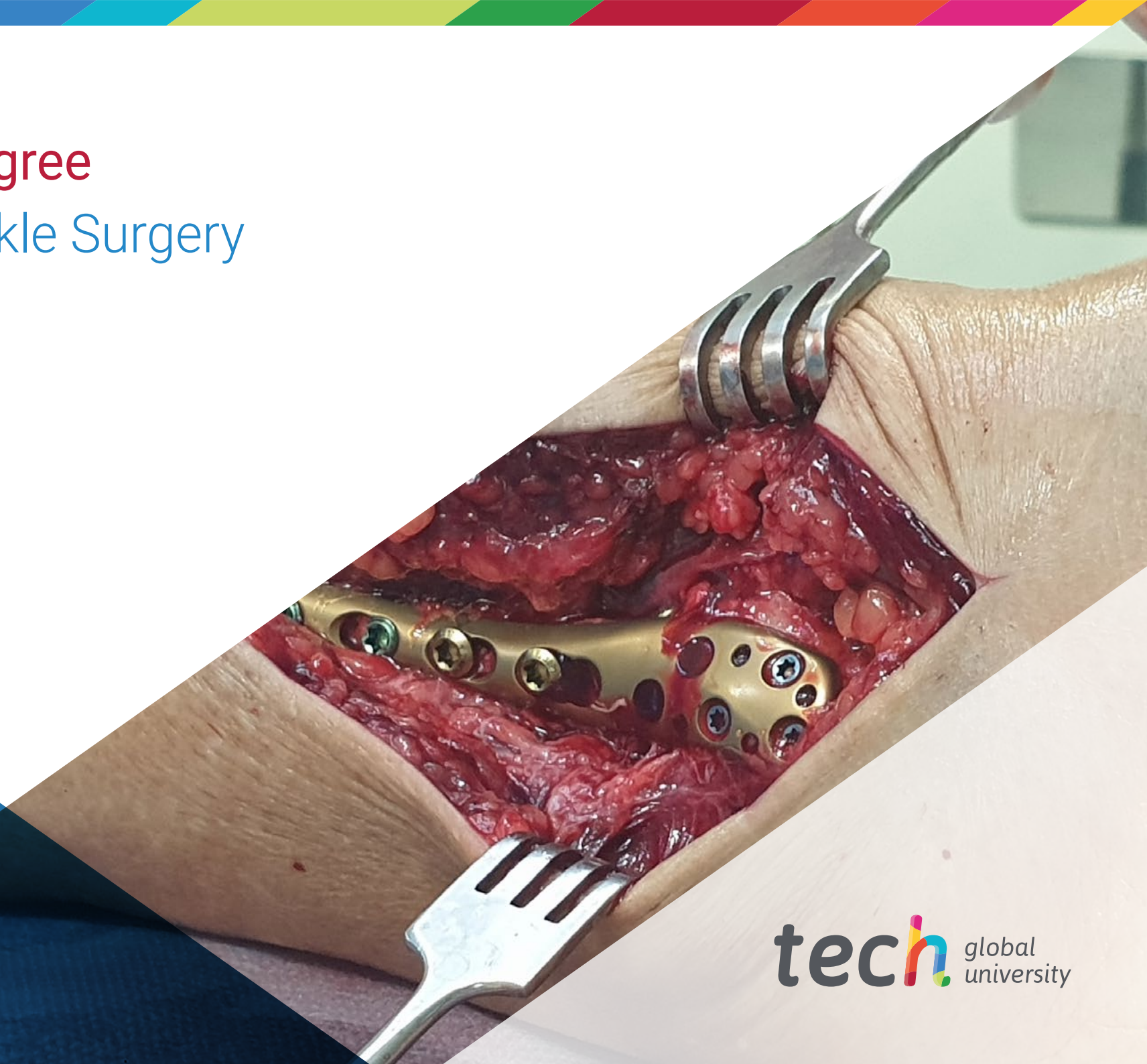


# Master's Degree

## Foot and Ankle Surgery





## Master's Degree Foot and Ankle Surgery

- » Modality: online
- » Duration: 12 months
- » Certificate: TECH Global University
- » Credits: 60 ECTS
- » Schedule: at your own pace
- » Exams: online

Website: [www.techtitute.com/us/medicine/master-degree/master-foot-ankle-surgery](http://www.techtitute.com/us/medicine/master-degree/master-foot-ankle-surgery)

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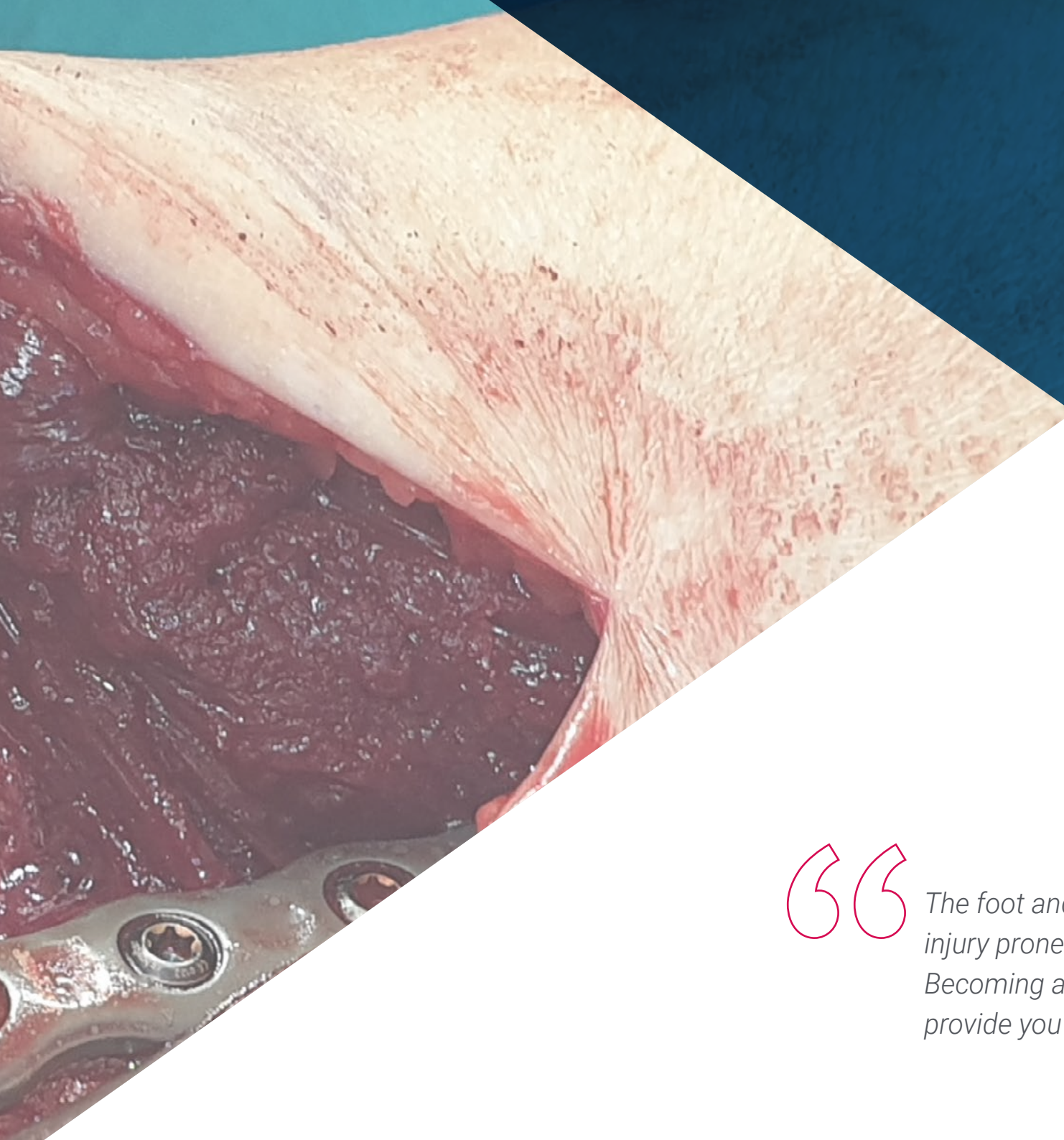
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# 01

# Introduction

Cristiano Ronaldo and LeBron James share something besides being elite athletes: both have suffered foot and ankle injuries. And this is not surprising, since it is one of the areas that is subjected to the greatest physical stress. But it is not necessary to be a sports star to suffer these injuries, as millions of people around the world need surgery on this part of the body. As such, specialization in foot and ankle surgery is one of the most exciting and sought-after areas in the medical field. Therefore, this degree will open multiple career opportunities for physicians who wish to specialize and explore this field, which is full of job opportunities.





“

*The foot and ankle are some of the most injury prone areas and often require surgery. Becoming a subject matter expert will provide you with many career opportunities”*

The foot and ankle are two of the most injury-prone areas of the human body due to their role in tasks such as walking, running and jumping. These are parts of the human morphology subject to great stress and for that reason, they tend to fracture and suffer various pathologies that require careful attention by doctors.

However, in order to carry out this surveillance and apply the correct treatments and surgical interventions, specific and in depth knowledge is required. This Master's Degree in Foot and Ankle Surgery offers physicians and professionals in traumatology and orthopedics the necessary skills to perform all types of surgeries applied to these areas of the body.

In this way, students will be able to learn to perform all types of foot and ankle surgeries. Surgeons and physicians taking this program will therefore be able to delve into different surgical techniques applied to injuries of the forefoot, such as *hallux valgus* or metatarsalgia, the midfoot and rearfoot, such as Müller-Weiss disease, or the ankle, such as osteoarthritis and other pathologies. Additionally, they will be able to learn techniques for observation, detection and intervention of injuries such as arthroscopy.

As a result, graduates will have obtained all the competencies to become true experts in these surgeries and will be able to lead specialized services in this area.

This **Master's Degree in Foot and Ankle Surgery** contains the most complete and up to date scientific program on the market. Its most notable features are:

- ◆ The development of practical cases presented by experts in traumatology, orthopedics and surgery
- ◆ The graphic, schematic and eminently practical contents with which it is conceived, gather evidence-based scientific information on Foot and Ankle Surgery
- ◆ Practical exercises where self assessment can be used to improve learning
- ◆ Special emphasis on innovative methodologies for foot and ankle surgeries
- ◆ Theoretical lessons, questions to the expert, debate forums on controversial topics, and individual reflection assignments
- ◆ Content that is accessible from any fixed or portable device with an internet connection



*This is one of the most in-demand areas of surgical specialization and you could be a highly sought-after expert for the best hospitals in your country"*

“

*To perform foot and ankle surgery successfully, a great deal of knowledge must be mastered. This Master's Degree is what you need to be a great surgeon in this specialty”*

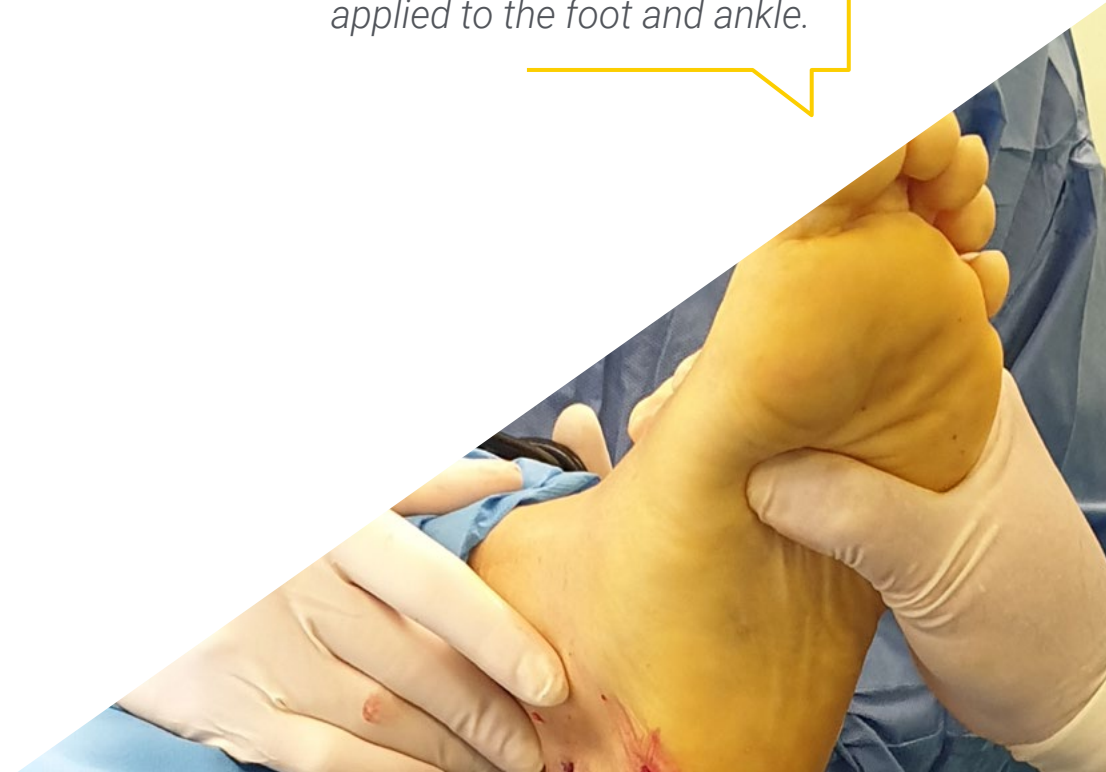
The program's teaching staff includes professionals from the sector who contribute their work experience to this training program, as well as renowned specialists from leading societies and prestigious universities.

The multimedia content, developed with the latest educational technology, will provide the professional with situated and contextual learning, i.e., a simulated environment that will provide immersive training programmed to train in real situations.

This program is designed around Problem-Based Learning, whereby the professional must try to solve the different professional practice situations that arise throughout the program. For this purpose, the student will be assisted by an innovative interactive video system created by renowned and experienced experts.

*The best path to a successful career is specialization.*

*Upon completion of this program, you will be able to perform all types of surgical procedures applied to the foot and ankle.*



# 02 Objectives

The main objective of this Master's Degree in Foot and Ankle Surgery of TECH is to offer its students the best knowledge and tools to be able to successfully perform different surgical interventions in these areas of the body. Consequently, professionals who complete this degree will have become great experts in the field and will be sought after by the best specialized services in traumatology in their country.





“

*Your goal is to be the best specialist in Foot and Ankle Surgery and with this Master's Degree you will achieve it"*



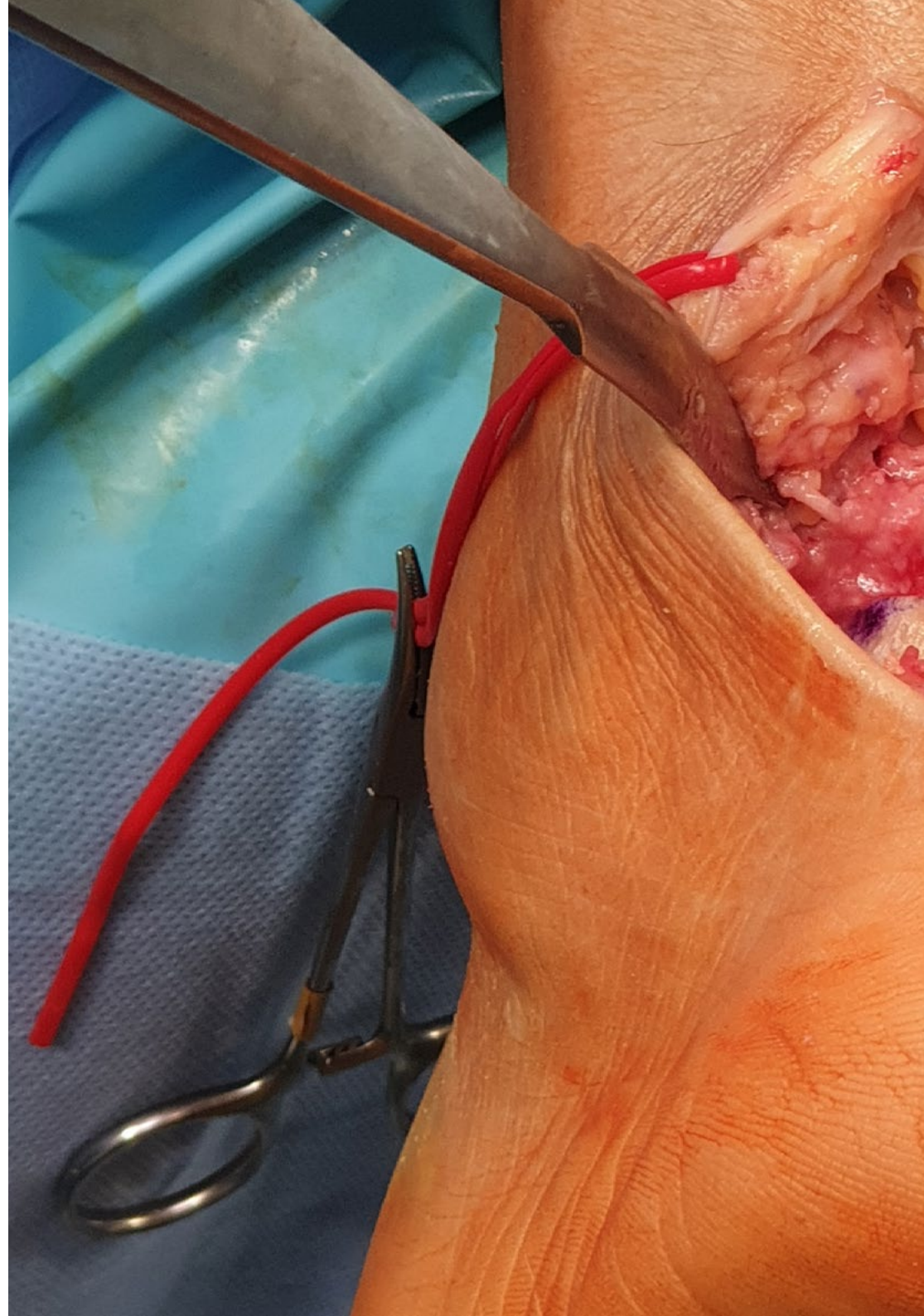
## General Objectives

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- ◆ Delve into the different pathologies that affect the musculoskeletal level in the anatomical location of the foot and ankle susceptible to improvement through surgical treatment
- ◆ Delve into the different surgical techniques used to solve the most common and important problems of the foot and ankle with the help of the best specialists in the field
- ◆ Acquire the surgical skills necessary for specialization in Foot and Ankle Surgery
- ◆ Review the current literature with scientific evidence on the different surgical treatments used to correct the different pathologies presented in this degree



*Your goals will be much closer thanks to this Master's Degree"*





## Specific Objectives

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### Module 1. Forefoot Surgery. *Hallux valgus*

- ◆ Update in depth knowledge of primary musculoskeletal forefoot pathology
- ◆ Broaden knowledge of current medical literature on the surgical treatment of primary forefoot conditions to enable decision making for each pathology
- ◆ Delve into the indications for surgery for different forefoot injuries such as *hallux valgus* or metatarsalgia, *hallux rigidus*, claw, hammer or mallet toes, sesamoiditis, Sastre's bunion, rheumatic foot, Morton's neuroma, *hallux varus* or brachymetatarsia
- ◆ Detail in depth the different surgical techniques recommended for each primary pathology of the forefoot by the different experts in the field

### Module 2. Forefoot Surgery. Small Radius and H. Rigidus

- ◆ Delve into the pathology of forefoot reconstruction by the orthopedic surgeon
- ◆ Delve into the knowledge of the current medical literature regarding the surgical treatment of forefoot conditions requiring reconstruction and to enable decision-making
- ◆ Detail the indications for surgery and its different surgical techniques to treat forefoot injuries such as *hallux rigidus*, claw, hammer or mallet toes or sesamoiditis

### **Module 3. Other Forefoot Disorders**

- ◆ Update knowledge on different forefoot pathologies not included in the previous modules, incorporating them in this one, considered miscellaneous
- ◆ Unify concepts and describe different surgical techniques supported in the literature on the pathologies described, with the recommendations of experts
- ◆ In-depth detail on the indications for surgery for different forefoot injuries such as tailor's bunion, rheumatic foot, Morton's neuroma, *hallux varus* or brachymetatarsia.

### **Module 4. Midfoot Surgery**

- ◆ Update the subject of midfoot pathology for the orthopedic surgeon or podiatrist
- ◆ Describe the basis of the current medical literature regarding the surgical treatment of midfoot conditions to enable decision making for each pathology
- ◆ Delve into the indications for surgery for different midfoot injuries such as flat feet, Charcot midfoot, Müller-Weiss disease, midfoot osteoarthritis or tarsal coalition
- ◆ Go into detail on the different surgical techniques recommended for each midfoot pathology by the different experts in the field

### **Module 5. Hindfoot Surgery**

- ◆ Delve into the musculoskeletal pathology of the hindfoot to enable the student to develop this area
- ◆ Conduct a study of the current medical literature on the surgical treatment of hindfoot conditions to enable decision making for each pathology
- ◆ Delve into the indications for surgery for various hindfoot injuries such as adult flatfoot, osteoarthritis, varus cavus foot, plantar fasciitis or tarsal tunnel syndrome
- ◆ Meticulously detail the different surgical techniques recommended for each hindfoot pathology by the different experts in the field

### **Module 6. Ankle**

- ◆ Update knowledge in ankle pathology
- ◆ Broaden knowledge of the current medical literature on the surgical treatment of ankle conditions to enable decision making for each pathology
- ◆ Delve into the indications for surgery for different ankle injuries such as osteoarthritis, infections or severe trauma
- ◆ Detail the different surgical techniques recommended for each ankle pathology by the different experts in the field

### **Module 7. Fractures**

- ◆ Delve into the skills and techniques related to the treatment of foot and ankle fractures
- ◆ Gather knowledge on the current medical literature regarding the surgical treatment of fractures at the foot and ankle level, which will allow decision-making for each pathology
- ◆ Delve into the indications for surgery for different injuries such as posterior malleolar fractures, complex malleolar fractures, acute and chronic syndesmosis injuries, tibial pylon fractures, talus fractures, calcaneal fractures, cuboid and scaphoid fractures, Lisfranc injury or fractures of the fifth metatarsal
- ◆ Detail the different surgical techniques recommended in each pathology related to fractures by the different experts in the field

### **Module 8. Arthroscopy**

- ◆ In depth study of arthroscopic techniques at the level of the foot and ankle
- ◆ Have a thorough understanding of the current medical literature on the surgical treatment of foot and ankle conditions by arthroscopy, which will allow decision-making for each pathology
- ◆ Delve into the surgical indications for various injuries including posterior ankle approach, anterior ankle impingement, osteochondral lesions of the talus, osteoarthritis, calcaneoplasty, tendoscopy, ankle instability, arthroscopically assisted fractures or arthroscopy of the first metatarsophalangeal joint
- ◆ Detail the different surgical techniques recommended in each pathology related to arthroscopy by the different experts in the field

### **Module 9. Sports Injuries**

- ◆ Delve into the knowledge of sports injuries of the foot and ankle
- ◆ Retrieve studies from the current medical literature regarding the surgical treatment of sports-related conditions of the foot and ankle by means of different
- ◆ Delve into the indications for surgery for various injuries including Achilles tendon ruptures, insertional and non-insertional Achilles tendinopathy, peroneal tendon injury, osteochondral talus injuries, lateral ankle ligament injury or deltoid ligament rupture/instability
- ◆ Detail the different surgical techniques recommended in each pathology related to sports practice by the different experts in the field

### **Module 10. Anesthetic and Soft Tissue Techniques**

- ◆ Delve into the knowledge of other foot and ankle injuries
- ◆ Analyze the most important studies in the current medical literature in relation to the surgical treatment of other conditions not previously mentioned at the level of the foot and ankle by means of different techniques, allowing decision-making for each pathology
- ◆ In depth surgical indications for various injuries including clubfoot, compartment syndrome of the foot, tendon graft harvesting techniques, tendon transfers in valgus flatfoot, anesthetic techniques in the foot and ankle, biological grafts used in foot and ankle surgery, Charcot hindfoot and ankle, diabetic foot, foot infections or coverage defects in the foot and ankle
- ◆ Detail the different surgical techniques recommended in these pathologies by the different experts in the field

03

# Course Management

To ensure the highest quality in all the contents of this program, TECH Technological University has selected a teaching team with extensive experience and expertise in Foot and Ankle Surgery. Their outstanding positions have allowed them to address all kinds of cases, making them the perfect teachers to create innovative, cutting-edge and key content in the professional update of all specialists in the area.





“

*You will have the guarantee of access to content created by experienced surgeons and specialists in this area, giving you the opportunity to delve into the most modern foot and ankle surgeries”*

## International Guest Director

Awarded by the American Orthopedic Foot and Ankle Society for his innovative clinical treatments, Dr. John Kwon is a renowned surgeon highly specialized in the approach to traumatic injuries of the lower limbs. In this line, he has carried out his work in health institutions of international reference, including the Massachusetts General Hospital or the Mercy Medical Center in Baltimore.

In this way, he has contributed to the optimal recovery of numerous patients suffering from pathologies such as complex fractures in the tibioperoneoastotalar joint, cartilage disorders and even ligament ruptures due to sports accidents. It should be noted that he is an expert in the application of external fixation techniques, which has allowed him to offer users comprehensive and personalized treatments to optimize their quality of life significantly.

On the other hand, he has balanced this work with his facet as a researcher. In this regard, he has published scientific articles in specialized medical journals on subjects such as the most sophisticated surgical procedures for the correction of deformities such as bunions, therapeutic methods for the management of bone infections or application of ultrasound processes to guide a wide range of interventions ranging from plantar fasciitis to retrocalcaneal bursitis.

In his unwavering commitment to medical excellence, he participates as a speaker at multiple conferences on a global scale. As such, he shares with the global medical community both his findings and his extensive work experience. This has led to significant advances in the healthcare field, greatly increasing practitioners' knowledge of cutting-edge therapies to effectively treat foot and ankle problems. Thanks to this, professionals have improved their care for users, while at the same time optimizing their results considerably.





## Dr. Kwon, John

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- ♦ Head of the Foot and Ankle Service at Massachusetts General Hospital, United States
- ♦ Orthopedic Foot and Ankle Surgeon at Mercy Medical Center of Baltimore
- ♦ Chief Clinical Officer at Israel Deaconess Medical Center of Boston
- ♦ Combined Orthopedic Residency at Massachusetts General Hospital, Brigham Hospital and Boston Children's Hospital
- ♦ Internship in Internal Medicine at McGaw Medical Center of Northwestern University
- ♦ B.S. in Medical Sciences from New York Medical College
- ♦ B.S. in Biology from Wesleyan University

“

*Thanks to TECH, you will be able to learn with the best professionals in the world”*

## Management



### **Dr. Pacheco Gutiérrez, Victor Alexander**

- ◆ Specialist in Orthopedics and Sports Medicine, Dr. Sulaiman Al Habib Hospital
- ◆ Specialist, Department of Shoulder and Elbow Orthopedics and Sports Medicine, La Isabelica Clinical Center
- ◆ Medical Advisor, Venezuelan Cycling Federatio
- ◆ Medical advisor to several baseball clubs and to the Carabobo Boxing Association
- ◆ Degree in Medicine, University of Carabobo
- ◆ Specialty in Orthopedics and Traumatology, Dr. Enrique Tejera Hospital City

## Professors

### Dr. Ballester Alomar, Manel

- ◆ Head of Orthopedic Surgery and Traumatology at Hospital Mataró, Barcelona
- ◆ Coordinator of the Traumatology Group of Creu Blanca Clinic
- ◆ Head of the foot/ankle pathology, surgery and sports traumatology unit at Creu Blanca Clinic
- ◆ Responsible and Coordinator of the Emergency Department of Creu Blanca Clinic
- ◆ Medical Coordinator of the surgical area of Creu Blanca Clinic
- ◆ Degree in Medicine and Surgery from the Autonomous University of Barcelona
- ◆ Specialist in Orthopedic Surgery and Traumatology at the Mataró Hospital
- ◆ Fellowship in the Department of Foot and Ankle Surgery at the University Hospital Balgrist Klinik in Zurich, Switzerland

### Dr. López Guevara, Daniel

- ◆ Medical Sonographer and specialist in Traumatology and Orthopedics in SAMAM Clinic
- ◆ Medical specialist in Traumatology and Orthopedic Surgery in various clinical centers in the city of Valencia
- ◆ Medical specialist in Traumatology and Orthopedics in the Upper Limb and Reconstructive Microsurgery Unit of the Hospital City Dr. Enrique Tejera
- ◆ Graduated in Medicine and Surgery at the University of Carabobo, Venezuela
- ◆ Specialist in Traumatology and Orthopedics at the Dr. Enrique Tejera Hospital City

### Dr. Morrillo, Francisco

- ◆ Specialist Physician at the Traumatology and Orthopedics Service of the Angel Larralde University Hospital
- ◆ General Physician at the Coca-Cola FEMSA Medical Service
- ◆ Medical Specialist in Traumatology and Orthopedics at Hospital Molina Sierra IVSS
- ◆ Graduated in Medicine and Surgery at the University of Carabobo
- ◆ Specialist in Traumatology and Orthopedics at the University Hospital Dr. Angel Larralde.
- ◆ Master's Degree in Hand Surgery at the University of Barcelona

### Dr. Díaz Figueroa, Omar

- ◆ Specialist in Reconstruction of Complex Extremity Injuries at the Central Hospital of Valencia
- ◆ Specialist in Hand Surgery and Reconstructive Microsurgery at Guerra Mendez Medical Center
- ◆ Graduated in Medicine and Surgery at the University of Carabobo
- ◆ Specialist in Traumatology and Orthopedics at the University Hospital Dr. Angel Larralde
- ◆ Sub-specialist in Hand Surgery and Reconstructive Microsurgery at The Campbell Clinic - Hand Surgery and Reconstructive, in Memphis, USA

# 04 Skills

Students who complete this Master's Degree in Foot and Ankle Surgery will be able to carry out a series of surgical interventions, applied to the aforementioned parts of the human body, which will make them true experts in the discipline. As a result, students will be able to solve a wide range of pathologies and ailments in the foot and ankle, using the most appropriate surgical solutions in each case.





“

*Your new skills will make you the most respected surgeon in your environment”*



## General Skills

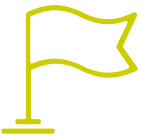
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- ◆ Perform foot and ankle surgeries with solvency
- ◆ Master the best surgical techniques to solve the most common pathologies in this area of the body
- ◆ Know the most current scientific information on all types of surgical interventions applied to the foot and ankle
- ◆ Obtain the necessary surgical training to become a specialist in surgery applied to this part of the body

“

*Acquire all the skills necessary to become a high level foot and ankle surgeon”*





## Specific Skills

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- ◆ Master the most current techniques with proven results to correct *hallux valgus*
- ◆ Apply the necessary procedures to treat metatarsalgia
- ◆ Perform reconstructive surgeries of the forefoot and lesser toes, especially for conditions such as *hallux rigidus*, claw, hammer or mallet toes, and sesamoiditis
- ◆ Treat pathologies such as Taylor's bunion, rheumatic foot, Morton's neuroma, plantar plate injury, forefoot amputations, *hallux varus* and brachymetatarsia
- ◆ Know the surgical techniques applicable to the main pathologies of the midfoot
- ◆ Solve, through different types of interventions, hindfoot pathologies such as adult flatfoot, osteoarthritis, varus cavus foot, plantar fasciitis and tarsal tunnel syndrome
- ◆ Intervene in ankle pathologies such as osteoarthritis
- ◆ Perform surgical procedures related to serious infections or trauma
- ◆ Treat posterior and complex malleolar fractures
- ◆ Make the necessary interventions in acute and chronic lesions of the syndesmosis
- ◆ Apply surgical repair techniques in cases of fractures of the tibial pilon, talus, calcaneus, cuboid, scaphoid and fifth metatarsal
- ◆ Resolving Lisfranc lesions by surgery
- ◆ Accurately perform posterior ankle arthroscopy
- ◆ Use arthroscopy as a method of assistance and solution for different pathologies.
- ◆ Treat sports injuries such as Achilles tendon ruptures or conditions of the lateral ankle ligaments
- ◆ Apply treatments and interventions in other pathologies such as clubfoot, compartment foot syndrome, valgus flatfoot or diabetic foot
- ◆ Know different anesthetic techniques applied to the foot and ankle
- ◆ Treat foot infections

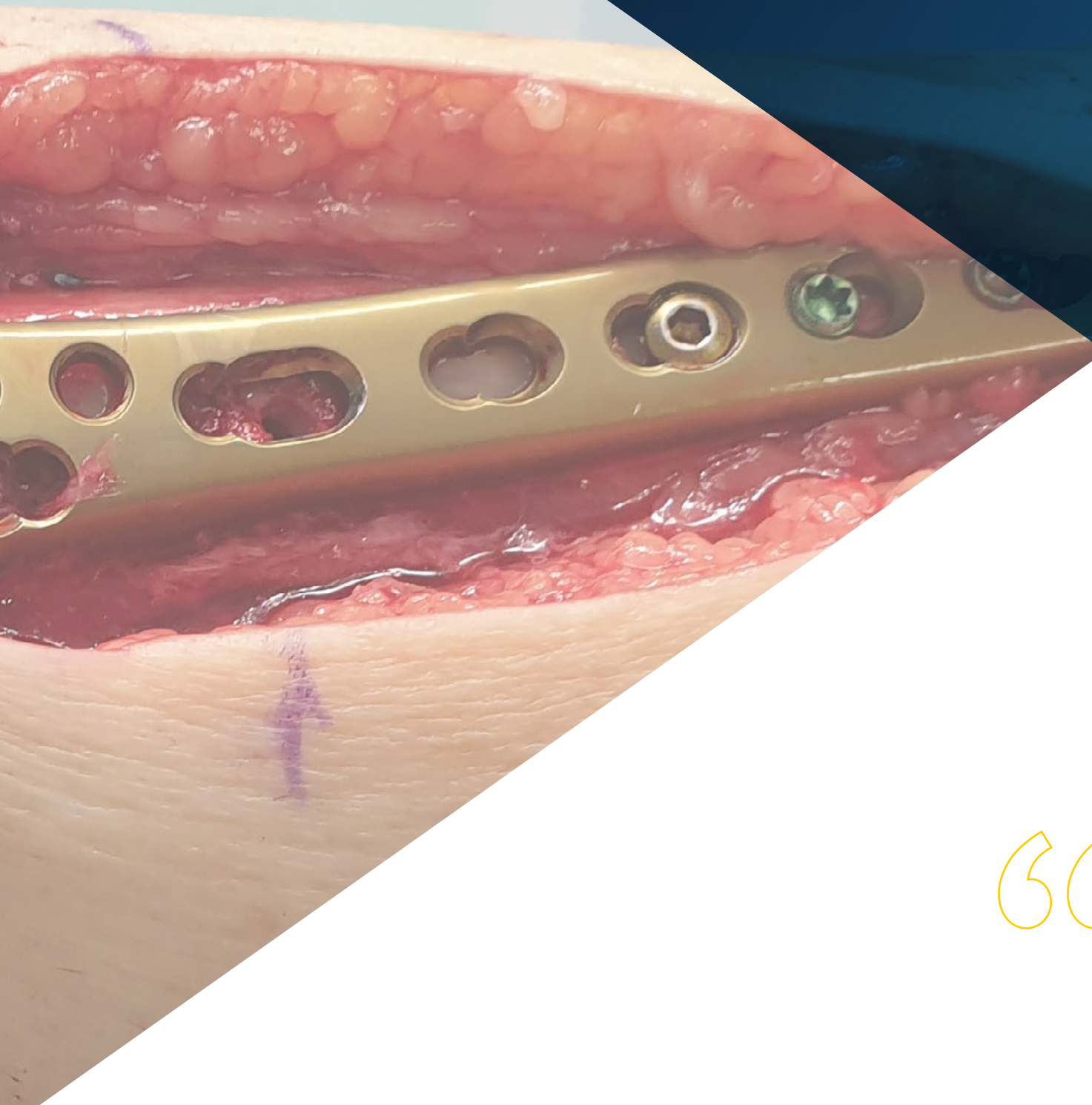
# 05

## Structure and Content

This Master's Degree is structured into 10 modules, each of them composed of 10 topics, through which doctors and medical professionals who take it will be able to learn everything about foot and ankle surgery. As such, this program is designed to provide students with a innovative, comprehensive and in depth education that will help them progress in their careers, so that they can become leaders in the discipline in the short term.







“

*The most complete and up to date content on Foot and Ankle Surgery is in this title"*

## Module 1. Forefoot Surgery. *Hallux Valgus*

- 1.1. Chevron Distal Osteotomy
  - 1.1.1. Anatomy
  - 1.1.2. Literature Review
  - 1.1.3. Indications
  - 1.1.4. Contraindications
  - 1.1.5. Pre-Operative Planning
  - 1.1.6. Approach
  - 1.1.7. Surgical Technique
  - 1.1.8. Complications
  - 1.1.9. Post-Operative Treatment
- 1.2. Osteotomy of the Proximal Hallux Phalanx
  - 1.2.1. Anatomy
  - 1.2.2. Literature Review
  - 1.2.3. Indications
  - 1.2.4. Contraindications
  - 1.2.5. Preoperative Planning
  - 1.2.6. Approach
  - 1.2.7. Surgical Technique
  - 1.2.8. Complications
  - 1.2.9. Post-Operative Treatment
- 1.3. *Hallux Valgus* Minimally Invasive Surgery
  - 1.3.1. Anatomy
  - 1.3.2. Literature Review.
  - 1.3.3. Indications
  - 1.3.4. Contraindications
  - 1.3.5. Preoperative Planning
  - 1.3.6. Approach
  - 1.3.7. Surgical Technique
  - 1.3.8. Complications
  - 1.3.9. Post-Operative Treatment
- 1.4. Weil's Osteotomy of the First Radius
  - 1.4.1. Anatomy
  - 1.4.2. Literature Review
  - 1.4.3. Indications
  - 1.4.4. Contraindications
  - 1.4.5. Preoperative Planning
  - 1.4.6. Approach
  - 1.4.7. Surgical Technique
  - 1.4.8. Complications
  - 1.4.9. Post-Operative Treatment
- 1.5. Scarf Diaphyseal Osteotomy
  - 1.5.1. Anatomy
  - 1.5.2. Literature Review
  - 1.5.3. Indications
  - 1.5.4. Contraindications
  - 1.5.5. Preoperative Planning
  - 1.5.6. Approach
  - 1.5.7. Surgical Technique
  - 1.5.8. Complications
  - 1.5.9. Post-Operative Treatment
- 1.6. Proximal First Metatarsal Osteotomy
  - 1.6.1. Anatomy
  - 1.6.2. Literature Review
  - 1.6.3. Indications
  - 1.6.4. Contraindications
  - 1.6.5. Preoperative Planning
  - 1.6.6. Approach
  - 1.6.7. Surgical Technique
  - 1.6.8. Complications
  - 1.6.9. Post-Operative Treatment

- 1.7. Tarsometatarsal Arthrodesis (Modified *Lapidus* Technique)
  - 1.7.1. Anatomy
  - 1.7.2. Literature Review.
  - 1.7.3. Indications
  - 1.7.4. Contraindications
  - 1.7.5. Preoperative Planning
  - 1.7.6. Approach
  - 1.7.7. Surgical Technique
  - 1.7.8. Complications
  - 1.7.9. Post-Operative Treatment
- 1.8. Minimally Invasive Distal First Metatarsal Osteotomy with Intramedullary System
  - 1.8.1. Anatomy
  - 1.8.2. Literature Review.
  - 1.8.3. Indications
  - 1.8.4. Contraindications
  - 1.8.5. Preoperative Planning
  - 1.8.6. Approach
  - 1.8.7. Surgical Technique
  - 1.8.8. Complications
  - 1.8.9. Post-Operative Treatment
- 1.9. Modified Keller Technique
  - 1.9.1. Anatomy
  - 1.9.2. Literature Review.
  - 1.9.3. Indications
  - 1.9.4. Contraindications
  - 1.9.5. Preoperative Planning
  - 1.9.6. Approach
  - 1.9.7. Surgical Technique
  - 1.9.8. Complications
  - 1.9.9. Post-Operative Treatment

## Module 2. Forefoot Surgery. Small Radius

- 2.1. Cheilectomy and Osteotomies for *Hallux Rigidus*
  - 2.1.1. Anatomy
  - 2.1.2. Literature Review.
  - 2.1.3. Indications
  - 2.1.4. Contraindications
  - 2.1.5. Preoperative Planning
  - 2.1.6. Approach
  - 2.1.7. Surgical Technique
  - 2.1.8. Complications
  - 2.1.9. Post-Operative Treatment
- 2.2. Prosthetic Surgery for *Hallux Rigidus*
  - 2.2.1. Anatomy
  - 2.2.2. Literature Review.
  - 2.2.3. Indications
  - 2.2.4. Contraindications
  - 2.2.5. Preoperative Planning
  - 2.2.6. Approach
  - 2.2.7. Surgical Technique
  - 2.2.8. Complications
  - 2.2.9. Post-Operative Treatment
- 2.3. Metatarsophalangeal Arthrodesis
  - 2.3.1. Anatomy
  - 2.3.2. Literature Review.
  - 2.3.3. Indications
  - 2.3.4. Contraindications
  - 2.3.5. Preoperative Planning
  - 2.3.6. Approach
  - 2.3.7. Surgical Technique
  - 2.3.8. Complications
  - 2.3.9. Post-Operative Treatment

2.4. Metatarsophalangeal Interposition with Bone Block

- 2.4.1. Anatomy
- 2.4.2. Literature Review.
- 2.4.3. Indications
- 2.4.4. Contraindications
- 2.4.5. Preoperative Planning
- 2.4.6. Approach
- 2.4.7. Surgical Technique
- 2.4.8. Complications
- 2.4.9. Post-Operative Treatment

2.5. Interphalangeal Arthrodesis and Jones Technique

- 2.5.1. Anatomy
- 2.5.2. Literature Review.
- 2.5.3. Indications
- 2.5.4. Contraindications
- 2.5.5. Preoperative Planning
- 2.5.6. Approach
- 2.5.7. Surgical Technique
- 2.5.8. Complications
- 2.5.9. Post-Operative Treatment

2.6. Sesamoidectomy

- 2.6.1. Anatomy
- 2.6.2. Literature Review.
- 2.6.3. Indications
- 2.6.4. Contraindications
- 2.6.5. Preoperative Planning
- 2.6.6. Approach
- 2.6.7. Surgical Technique
- 2.6.8. Complications
- 2.6.9. Post-Operative Treatment

2.7. Flexor to Extensor Transfer for Flexible Hammer Toe

- 2.7.1. Anatomy
- 2.7.2. Literature Review.
- 2.7.3. Indications
- 2.7.4. Contraindications
- 2.7.5. Preoperative Planning
- 2.7.6. Approach
- 2.7.7. Surgical Technique
- 2.7.8. Complications
- 2.7.9. Post-Operative Treatment

2.8. Correction of Stiff Claw and Hammer Toes

- 2.8.1. Anatomy
- 2.8.2. Literature Review.
- 2.8.3. Indications
- 2.8.4. Contraindications
- 2.8.5. Preoperative Planning
- 2.8.6. Approach
- 2.8.7. Surgical Technique
- 2.8.8. Complications
- 2.8.9. Post-Operative Treatment

2.9. Varus/Valgus Cruciate Toe Reconstruction

- 2.9.1. Anatomy
- 2.9.2. Literature Review.
- 2.9.3. Indications
- 2.9.4. Contraindications
- 2.9.5. Preoperative Planning
- 2.9.6. Approach
- 2.9.7. Surgical Technique
- 2.9.8. Complications
- 2.9.9. Post-Operative Treatment

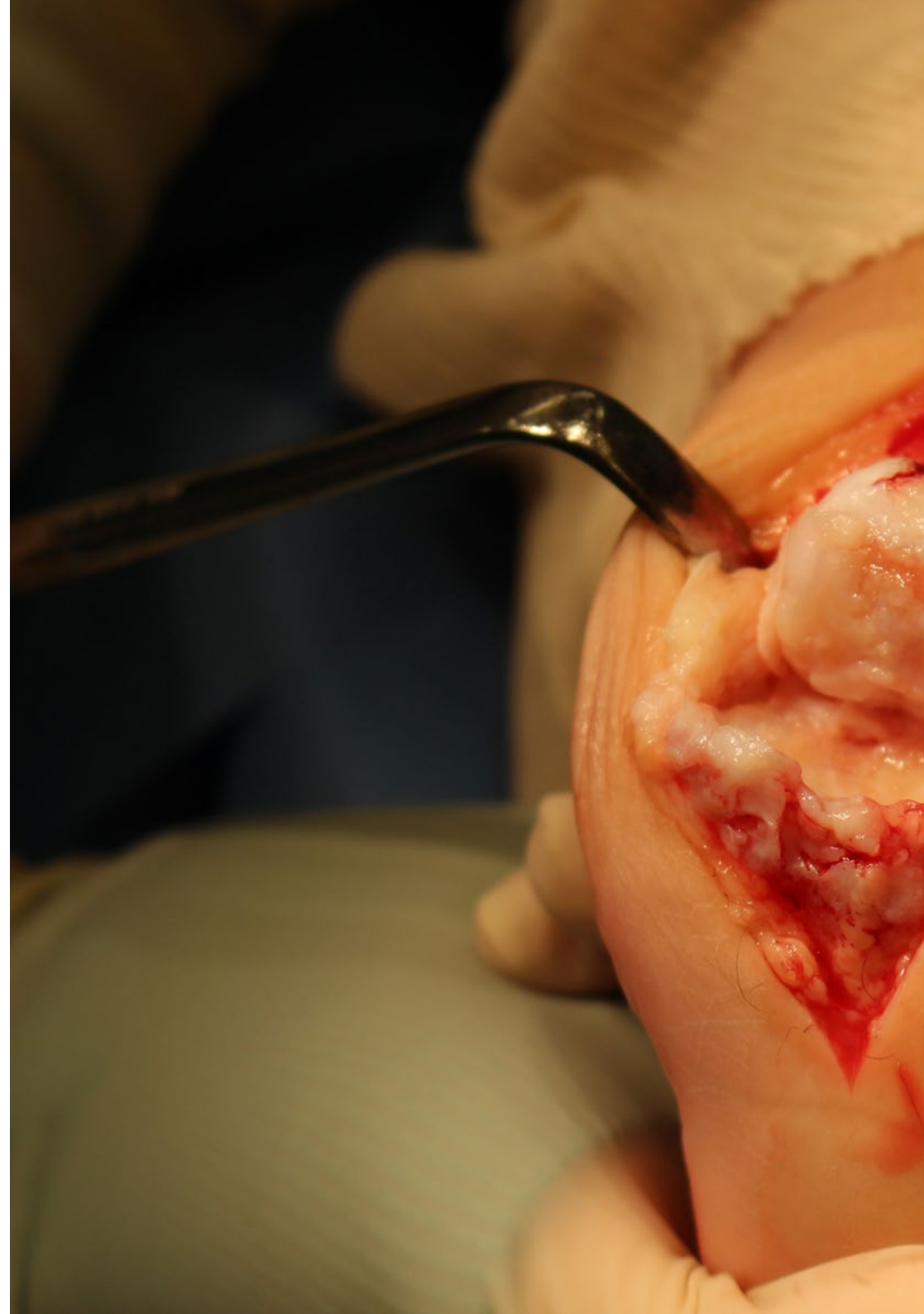
- 2.10. Open Weil Tosteotomies of the Lateral Metatarsals
  - 2.10.1. Anatomy
  - 2.10.2. Literature Review.
  - 2.10.3. Indications
  - 2.10.4. Contraindications
  - 2.10.5. Preoperative Planning
  - 2.10.6. Approach
  - 2.10.7. Surgical Technique
  - 2.10.8. Complications
  - 2.10.9. Post-Operative Treatment
- 2.11. Minimally Invasive Weil Osteotomies of the Lateral Radiuses
  - 2.11.1. Anatomy
  - 2.11.2. Literature Review.
  - 2.11.3. Indications
  - 2.11.4. Contraindications
  - 2.11.5. Preoperative Planning
  - 2.11.6. Approach
  - 2.11.7. Surgical Technique
  - 2.11.8. Complications
  - 2.11.9. Post-Operative Treatment

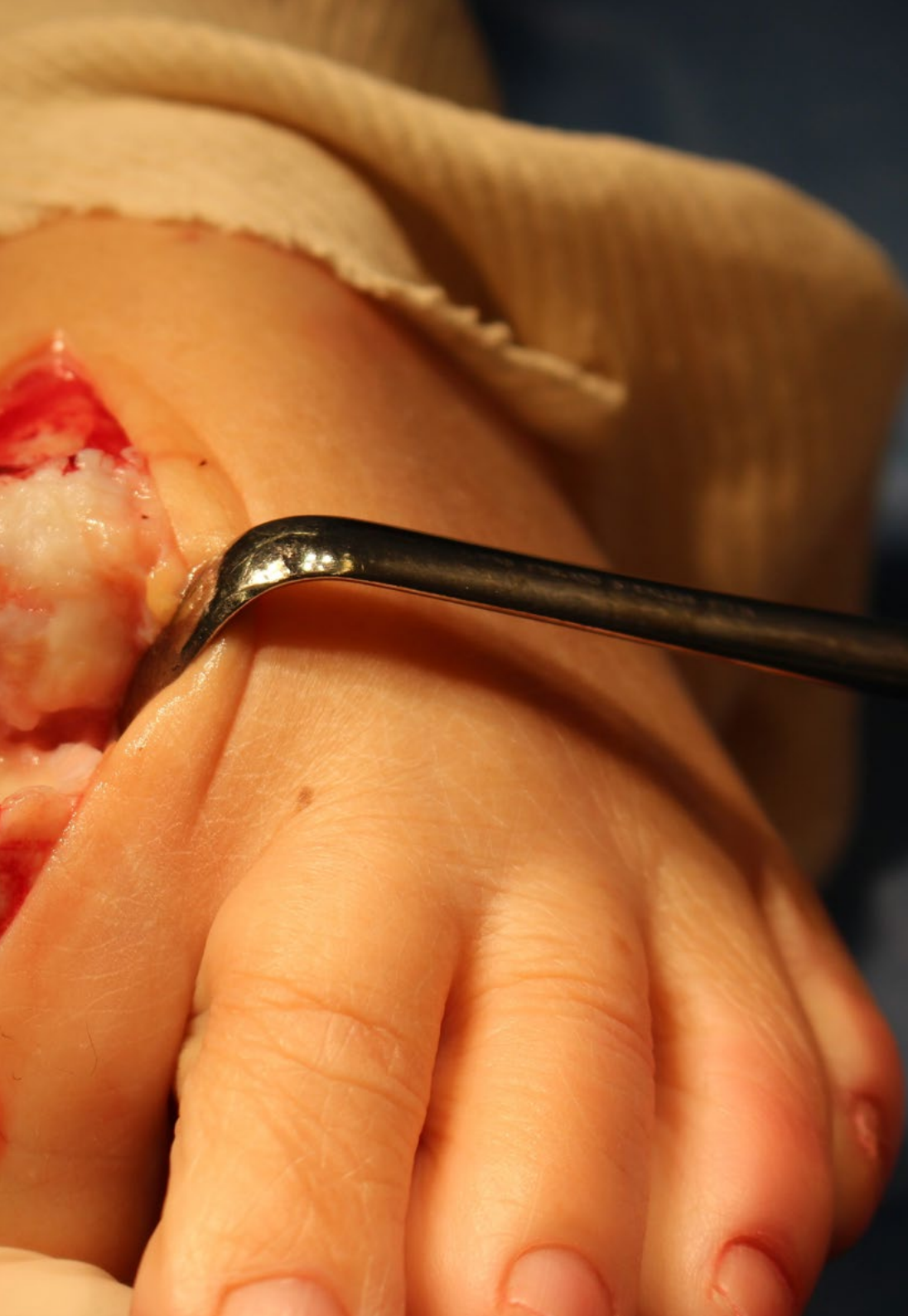
### Module 3. Other Forefoot Disorders

- 3.1. Tailor's Bunion
  - 3.1.1. Anatomy
  - 3.1.2. Literature Review.
  - 3.1.3. Indications
  - 3.1.4. Contraindications
  - 3.1.5. Preoperative Planning
  - 3.1.6. Approach
  - 3.1.7. Surgical Technique
  - 3.1.8. Complications
  - 3.1.9. Post-Operative Treatment

- 3.2. Reconstruction of the Rheumatoid Foot
  - 3.2.1. Anatomy
  - 3.2.2. Literature Review.
  - 3.2.3. Indications
  - 3.2.4. Contraindications
  - 3.2.5. Preoperative Planning
  - 3.2.6. Approach
  - 3.2.7. Surgical Technique
  - 3.2.8. Complications
  - 3.2.9. Post-Operative Treatment
- 3.3. Morton's Neuroma
  - 3.3.1. Anatomy
  - 3.3.2. Literature Review.
  - 3.3.3. Indications
  - 3.3.4. Contraindications
  - 3.3.5. Preoperative Planning
  - 3.3.6. Approach
  - 3.3.7. Surgical Technique
  - 3.3.8. Complications
  - 3.3.9. Post-Operative Treatment
- 3.4. Plantar Plate Instability
  - 3.4.1. Anatomy
  - 3.4.2. Literature Review.
  - 3.4.3. Indications
  - 3.4.4. Contraindications
  - 3.4.5. Preoperative Planning
  - 3.4.6. Approach
  - 3.4.7. Surgical Technique
  - 3.4.8. Complications
  - 3.4.9. Post-Operative Treatment

- 3.5. Digital Amputation
  - 3.5.1. Anatomy
  - 3.5.2. Literature Review.
  - 3.5.3. Indications
  - 3.5.4. Contraindications
  - 3.5.5. Preoperative Planning
  - 3.5.6. Approach
  - 3.5.7. Surgical Technique
  - 3.5.8. Complications
  - 3.5.9. Post-Operative Treatment
- 3.6. Transmetatarsal Amputation
  - 3.6.1. Anatomy
  - 3.6.2. Literature Review.
  - 3.6.3. Indications
  - 3.6.4. Contraindications
  - 3.6.5. Preoperative Planning
  - 3.6.6. Approach
  - 3.6.7. Surgical Technique
  - 3.6.8. Complications
  - 3.6.9. Post-Operative Treatment
- 3.7. *Hallux Valgus* Revision Surgery
  - 3.7.1. Anatomy
  - 3.7.2. Literature Review.
  - 3.7.3. Indications
  - 3.7.4. Contraindications
  - 3.7.5. Preoperative Planning
  - 3.7.6. Approach
  - 3.7.7. Surgical Technique
  - 3.7.8. Complications
  - 3.7.9. Post-Operative Treatment





- 3.8. Correction of Acquired *Hallux Varus*
  - 3.8.1. Anatomy
  - 3.8.2. Literature Review.
  - 3.8.3. Indications
  - 3.8.4. Contraindications
  - 3.8.5. Preoperative Planning
  - 3.8.6. Approach
  - 3.8.7. Surgical Technique
  - 3.8.8. Complications
  - 3.8.9. Post-Operative Treatment
- 3.9. Metatarsal Lengthening
  - 3.9.1. Anatomy
  - 3.9.2. Literature Review.
  - 3.9.3. Indications
  - 3.9.4. Contraindications
  - 3.9.5. Preoperative Planning
  - 3.9.6. Approach
  - 3.9.7. Surgical Technique
  - 3.9.8. Complications
  - 3.9.9. Post-Operative Treatment
- 3.10. Arthroscopy of the First Metatarsophalangeal Joint
  - 3.10.1. Anatomy
  - 3.10.2. Literature Review.
  - 3.10.3. Indications
  - 3.10.4. Contraindications
  - 3.10.5. Preoperative Planning
  - 3.10.6. Approach
  - 3.10.7. Surgical Technique
  - 3.10.8. Complications
  - 3.10.9. Post-Operative Treatment

## Module 4. Midfoot Surgery

- 4.1. Cotton's Osteotomy
  - 4.1.1. Anatomy
  - 4.1.2. Literature Review.
  - 4.1.3. Indications
  - 4.1.4. Contraindications
  - 4.1.5. Preoperative Planning
  - 4.1.6. Approach
  - 4.1.7. Surgical Technique
  - 4.1.8. Complications
  - 4.1.9. Post-Operative Treatment
- 4.2. Charcot's Midfoot
  - 4.2.1. Anatomy
  - 4.2.2. Literature Review.
  - 4.2.3. Indications
  - 4.2.4. Contraindications
  - 4.2.5. Preoperative Planning
  - 4.2.6. Approach
  - 4.2.7. Surgical Technique
  - 4.2.8. Complications
  - 4.2.9. Post-Operative Treatment
- 4.3. Müller-Weiss Disease
  - 4.3.1. Anatomy
  - 4.3.2. Literature Review.
  - 4.3.3. Indications
  - 4.3.4. Contraindications
  - 4.3.5. Preoperative Planning
  - 4.3.6. Approach
  - 4.3.7. Surgical Technique
  - 4.3.8. Complications
  - 4.3.9. Post-Operative Treatment
- 4.4. Scaphocuneal Arthrodesis
  - 4.4.1. Anatomy
  - 4.4.2. Literature Review.
  - 4.4.3. Indications
  - 4.4.4. Contraindications
  - 4.4.5. Preoperative Planning
  - 4.4.6. Approach
  - 4.4.7. Surgical Technique
  - 4.4.8. Complications
  - 4.4.9. Post-Operative Treatment
- 4.5. Posterior Tibial Tendon Repair. Kidner Technique
  - 4.5.1. Anatomy
  - 4.5.2. Literature Review.
  - 4.5.3. Indications
  - 4.5.4. Contraindications
  - 4.5.5. Preoperative Planning
  - 4.5.6. Approach
  - 4.5.7. Surgical Technique
  - 4.5.8. Complications
  - 4.5.9. Post-Operative Treatment
- 4.6. Posterior Tibial Tendon Repair. Flexor Digitorum Longus Transfer
  - 4.6.1. Anatomy
  - 4.6.2. Literature Review.
  - 4.6.3. Indications
  - 4.6.4. Contraindications
  - 4.6.5. Preoperative Planning
  - 4.6.6. Approach
  - 4.6.7. Surgical Technique
  - 4.6.8. Complications
  - 4.6.9. Post-Operative Treatment



- 4.7. Spring Ligament Repair
  - 4.7.1. Anatomy
  - 4.7.2. Literature Review.
  - 4.7.3. Indications
  - 4.7.4. Contraindications
  - 4.7.5. Preoperative Planning
  - 4.7.6. Approach
  - 4.7.7. Surgical Technique
  - 4.7.8. Complications
  - 4.7.9. Post-Operative Treatment
- 4.8. Resection of the Calcaneo-Scaphoid Coalition
  - 4.8.1. Anatomy
  - 4.8.2. Literature Review.
  - 4.8.3. Indications
  - 4.8.4. Contraindications
  - 4.8.5. Preoperative Planning
  - 4.8.6. Approach
  - 4.8.7. Surgical Technique
  - 4.8.8. Complications
  - 4.8.9. Post-Operative Treatment
- 4.9. Isolated Arthrodesis of the Astragal-Scaphoid Joint
  - 4.9.1. Anatomy
  - 4.9.2. Literature Review.
  - 4.9.3. Indications
  - 4.9.4. Contraindications
  - 4.9.5. Preoperative Planning
  - 4.9.6. Approach
  - 4.9.7. Surgical Technique
  - 4.9.8. Complications
  - 4.9.9. Post-Operative Treatment

- 4.10. Subtalar Arthrodesis
  - 4.10.1. Anatomy
  - 4.10.2. Literature Review.
  - 4.10.3. Indications
  - 4.10.4. Contraindications
  - 4.10.5. Preoperative Planning
  - 4.10.6. Approach
  - 4.10.7. Surgical Technique
  - 4.10.8. Complications
  - 4.10.9. Post-Operative Treatment

## Module 5. Hindfoot Surgery

- 5.1. Medial Displacement Calcaneal Osteotomy
  - 5.1.1. Anatomy
  - 5.1.2. Literature Review.
  - 5.1.3. Indications
  - 5.1.4. Contraindications
  - 5.1.5. Preoperative Planning
  - 5.1.6. Approach
  - 5.1.7. Surgical Technique
  - 5.1.8. Complications
  - 5.1.9. Post-Operative Treatment
- 5.2. Lateral Column Lengthening
  - 5.2.1. Anatomy
  - 5.2.2. Literature Review.
  - 5.2.3. Indications
  - 5.2.4. Contraindications
  - 5.2.5. Preoperative Planning
  - 5.2.6. Approach
  - 5.2.7. Surgical Technique
  - 5.2.8. Complications
  - 5.2.9. Post-Operative Treatment

- 5.3. Dwyer's Osteotomy
  - 5.3.1. Anatomy
  - 5.3.2. Literature Review.
  - 5.3.3. Indications
  - 5.3.4. Contraindications
  - 5.3.5. Preoperative Planning
  - 5.3.6. Approach
  - 5.3.7. Surgical Technique
  - 5.3.8. Complications
  - 5.3.9. Post-Operative Treatment
- 5.4. Double Medial Arthrodesis
  - 5.4.1. Anatomy
  - 5.4.2. Literature Review.
  - 5.4.3. Indications
  - 5.4.4. Contraindications
  - 5.4.5. Preoperative Planning
  - 5.4.6. Approach
  - 5.4.7. Surgical Technique
  - 5.4.8. Complications
  - 5.4.9. Post-Operative Treatment
- 5.5. Subtalar Arthrodesis
  - 5.5.1. Anatomy
  - 5.5.2. Literature Review.
  - 5.5.3. Indications
  - 5.5.4. Contraindications
  - 5.5.5. Preoperative Planning
  - 5.5.6. Approach
  - 5.5.7. Surgical Technique
  - 5.5.8. Complications
  - 5.5.9. Post-Operative Treatment
- 5.6. Subtalar Distraction Fusion
  - 5.6.1. Anatomy
  - 5.6.2. Literature Review.
  - 5.6.3. Indications
  - 5.6.4. Contraindications
  - 5.6.5. Preoperative Planning
  - 5.6.6. Approach
  - 5.6.7. Surgical Technique
  - 5.6.8. Complications
  - 5.6.9. Post-Operative Treatment
- 5.7. Triple Arthrodesis with Double Approach
  - 5.7.1. Anatomy
  - 5.7.2. Literature Review.
  - 5.7.3. Indications
  - 5.7.4. Contraindications
  - 5.7.5. Preoperative Planning
  - 5.7.6. Approach
  - 5.7.7. Surgical Technique
  - 5.7.8. Complications
  - 5.7.9. Post-Operative Treatment
- 5.8. Release of the Plantar Fascia
  - 5.8.1. Anatomy
  - 5.8.2. Literature Review.
  - 5.8.3. Indications
  - 5.8.4. Contraindications
  - 5.8.5. Preoperative Planning
  - 5.8.6. Approach
  - 5.8.7. Surgical Technique
  - 5.8.8. Complications
  - 5.8.9. Post-Operative Treatment

- 5.9. Tarsal Tunnel Release
  - 5.9.1. Anatomy
  - 5.9.2. Literature Review.
  - 5.9.3. Indications
  - 5.9.4. Contraindications
  - 5.9.5. Preoperative Planning
  - 5.9.6. Approach
  - 5.9.7. Surgical Technique
  - 5.9.8. Complications
  - 5.9.9. Post-Surgery Treatment
- 5.10. Correction of Varus Cavus Foot
  - 5.10.1. Anatomy
  - 5.10.2. Literature Review.
  - 5.10.3. Indications
  - 5.10.4. Contraindications
  - 5.10.5. Preoperative Planning
  - 5.10.6. Approach
  - 5.10.7. Surgical Technique
  - 5.10.8. Complications
  - 5.10.9. Post-Operative Treatment

## Module 6. Ankle

- 6.1. Arthrodiastasis for Ankle Osteoarthritis
  - 6.1.1. Anatomy
  - 6.1.2. Literature Review.
  - 6.1.3. Indications
  - 6.1.4. Contraindications
  - 6.1.5. Preoperative Planning
  - 6.1.6. Approach
  - 6.1.7. Surgical Technique
  - 6.1.8. Complications
  - 6.1.9. Post-Operative Treatment

- 6.2. Supramalleolar Osteotomy with Internal Fixation
  - 6.2.1. Anatomy
  - 6.2.2. Literature Review.
  - 6.2.3. Indications
  - 6.2.4. Contraindications
  - 6.2.5. Preoperative Planning
  - 6.2.6. Approach
  - 6.2.7. Surgical Technique
  - 6.2.8. Complications
  - 6.2.9. Post-Operative Treatment
- 6.3. Vantage Ankle Prosthesis
  - 6.3.1. Anatomy
  - 6.3.2. Literature Review.
  - 6.3.3. Indications
  - 6.3.4. Contraindications
  - 6.3.5. Preoperative Planning
  - 6.3.6. Approach
  - 6.3.7. Surgical Technique
  - 6.3.8. Complications
  - 6.3.9. Post-Operative Treatment
- 6.4. Cadence Ankle Prosthesis
  - 6.4.1. Anatomy
  - 6.4.2. Literature Review.
  - 6.4.3. Indications
  - 6.4.4. Contraindications
  - 6.4.5. Preoperative Planning
  - 6.4.6. Approach
  - 6.4.7. Surgical Technique
  - 6.4.8. Complications
  - 6.4.9. Post-Operative Treatment

- 6.5. Zimmer Trabecular Metal Ankle Prosthesis
  - 6.5.1. Anatomy
  - 6.5.2. Literature Review.
  - 6.5.3. Indications
  - 6.5.4. Contraindications
  - 6.5.5. Preoperative Planning
  - 6.5.6. Approach
  - 6.5.7. Surgical Technique
  - 6.5.8. Complications
  - 6.5.9. Post-Operative Treatment
- 6.6. Open Ankle Arthrodesis
  - 6.6.1. Anatomy
  - 6.6.2. Literature Review.
  - 6.6.3. Indications
  - 6.6.4. Contraindications
  - 6.6.5. Preoperative Planning
  - 6.6.6. Approach
  - 6.6.7. Surgical Technique
  - 6.6.8. Complications
  - 6.6.9. Post-Operative Treatment
- 6.7. Tibiotalocalcaneal Arthrodesis with an Intramedullary Nail
  - 6.7.1. Anatomy
  - 6.7.2. Literature Review.
  - 6.7.3. Indications
  - 6.7.4. Contraindications
  - 6.7.5. Preoperative Planning
  - 6.7.6. Approach
  - 6.7.7. Surgical Technique
  - 6.7.8. Complications
  - 6.7.9. Post-Operative Treatment





- 6.8. Tibiotalocalcaneal Arthrodesis with Osteosynthesis Plate
  - 6.8.1. Anatomy
  - 6.8.2. Literature Review
  - 6.8.3. Indications
  - 6.8.4. Contraindications
  - 6.8.5. Preoperative Planning
  - 6.8.6. Approach
  - 6.8.7. Surgical Technique
  - 6.8.8. Complications
  - 6.8.9. Post-Operative Treatment
- 6.9. Syme's Amputation
  - 6.9.1. Anatomy
  - 6.9.2. Literature Review
  - 6.9.3. Indications
  - 6.9.4. Contraindications
  - 6.9.5. Preoperative Planning
  - 6.9.6. Approach
  - 6.9.7. Surgical Technique
  - 6.9.8. Complications
  - 6.9.9. Post-Operative Treatment
- 6.10. Open Techniques for Osteochondral Lesions of the Talus
  - 6.10.1. Anatomy
  - 6.10.2. Literature Review
  - 6.10.3. Indications
  - 6.10.4. Contraindications
  - 6.10.5. Preoperative Planning
  - 6.10.6. Approach
  - 6.10.7. Surgical Technique
  - 6.10.8. Complications
  - 6.10.9. Post-Operative Treatment

## Module 7. Fractures

- 7.1. Posterior Malleolar Fractures
  - 7.1.1. Anatomy
  - 7.1.2. Literature Review.
  - 7.1.3. Indications
  - 7.1.4. Contraindications
  - 7.1.5. Preoperative Planning
  - 7.1.6. Approach
  - 7.1.7. Surgical Technique
  - 7.1.8. Complications
  - 7.1.9. Post-Operative Treatment
- 7.2. Complex Malleolar Fractures
  - 7.2.1. Anatomy
  - 7.2.2. Literature Review.
  - 7.2.3. Indications
  - 7.2.4. Contraindications
  - 7.2.5. Preoperative Planning
  - 7.2.6. Approach
  - 7.2.7. Surgical Technique
  - 7.2.8. Complications
  - 7.2.9. Post-Operative Treatment
- 7.3. Acute and Chronic Syndesmosis Injuries
  - 7.3.1. Anatomy
  - 7.3.2. Literature Review.
  - 7.3.3. Indications
  - 7.3.4. Contraindications
  - 7.3.5. Preoperative Planning
  - 7.3.6. Approach
  - 7.3.7. Surgical Technique
  - 7.3.8. Complications
  - 7.3.9. Post-Operative Treatment

- 7.4. Tibial Pylon Fracture
  - 7.4.1. Anatomy
  - 7.4.2. Literature Review.
  - 7.4.3. Indications
  - 7.4.4. Contraindications
  - 7.4.5. Preoperative Planning
  - 7.4.6. Approach
  - 7.4.7. Surgical Technique
  - 7.4.8. Complications
  - 7.4.9. Post-Operative Treatment
- 7.5. Fractures of the Neck and Body of the Talus
  - 7.5.1. Anatomy
  - 7.5.2. Literature Review.
  - 7.5.3. Indications
  - 7.5.4. Contraindications
  - 7.5.5. Preoperative Planning
  - 7.5.6. Approach
  - 7.5.7. Surgical Technique
  - 7.5.8. Complications
  - 7.5.9. Post-Operative Treatment
- 7.6. Peripheral Talus Fractures
  - 7.6.1. Anatomy
  - 7.6.2. Literature Review.
  - 7.6.3. Indications
  - 7.6.4. Contraindications
  - 7.6.5. Preoperative Planning
  - 7.6.6. Approach
  - 7.6.7. Surgical Technique
  - 7.6.8. Complications
  - 7.6.9. Post-Operative Treatment

- 7.7. Calcaneal Fractures
  - 7.7.1. Anatomy
  - 7.7.2. Literature Review.
  - 7.7.3. Indications
  - 7.7.4. Contraindications
  - 7.7.5. Preoperative Planning
  - 7.7.6. Approach
  - 7.7.7. Surgical Technique
  - 7.7.8. Complications
  - 7.7.9. Post-Operative Treatment
- 7.8. Cuboid and Scaphoid Fractures
  - 7.8.1. Anatomy
  - 7.8.2. Literature Review.
  - 7.8.3. Indications
  - 7.8.4. Contraindications
  - 7.8.5. Preoperative Planning
  - 7.8.6. Approach
  - 7.8.7. Surgical Technique
  - 7.8.8. Complications
  - 7.8.9. Post-Operative Treatment
- 7.9. Lisfranc Fractures
  - 7.9.1. Anatomy
  - 7.9.2. Literature Review.
  - 7.9.3. Indications
  - 7.9.4. Contraindications
  - 7.9.5. Preoperative Planning
  - 7.9.6. Approach
  - 7.9.7. Surgical Technique
  - 7.9.8. Complications
  - 7.9.9. Post-Operative Treatment

- 7.10. Fractures of the Fifth Metatarsal
  - 7.10.1. Anatomy
  - 7.10.2. Literature Review.
  - 7.10.3. Indications
  - 7.10.4. Contraindications
  - 7.10.5. Preoperative Planning
  - 7.10.6. Approach
  - 7.10.7. Surgical Technique
  - 7.10.8. Complications
  - 7.10.9. Post-Operative Treatment

## Module 8. Arthroscopy

- 8.1. Arthroscopic Posterior Approach to the Ankle
  - 8.1.1. Anatomy
  - 8.1.2. Literature Review.
  - 8.1.3. Indications
  - 8.1.4. Contraindications
  - 8.1.5. Preoperative Planning
  - 8.1.6. Approach
  - 8.1.7. Surgical Technique
  - 8.1.8. Complications
  - 8.1.9. Post-Operative Treatment
- 8.2. Anterior Ankle Impingement. Arthroscopic Treatment
  - 8.2.1. Anatomy
  - 8.2.2. Literature Review.
  - 8.2.3. Indications
  - 8.2.4. Contraindications
  - 8.2.5. Preoperative Planning
  - 8.2.6. Approach
  - 8.2.7. Surgical Technique
  - 8.2.8. Complications
  - 8.2.9. Post-Operative Treatment

8.3. Osteochondral Lesion of the Talus. Arthroscopic Treatment

- 8.3.1. Anatomy
- 8.3.2. Literature Review.
- 8.3.3. Indications
- 8.3.4. Contraindications
- 8.3.5. Preoperative Planning
- 8.3.6. Approach
- 8.3.7. Surgical Technique
- 8.3.8. Complications
- 8.3.9. Post-Operative Treatment

8.4. Arthroscopic Subtalar Arthrodesis

- 8.4.1. Anatomy
- 8.4.2. Literature Review.
- 8.4.3. Indications
- 8.4.4. Contraindications
- 8.4.5. Preoperative Planning
- 8.4.6. Approach
- 8.4.7. Surgical Technique
- 8.4.8. Complications
- 8.4.9. Post-Operative Treatment

8.5. Arthroscopic Ankle Arthrodesis

- 8.5.1. Anatomy
- 8.5.2. Literature Review.
- 8.5.3. Indications
- 8.5.4. Contraindications
- 8.5.5. Preoperative Planning
- 8.5.6. Approach
- 8.5.7. Surgical Technique
- 8.5.8. Complications
- 8.5.9. Post-Operative Treatment

8.6. Calcaneoplasty

- 8.6.1. Anatomy
- 8.6.2. Literature Review.
- 8.6.3. Indications
- 8.6.4. Contraindications
- 8.6.5. Preoperative Planning
- 8.6.6. Approach
- 8.6.7. Surgical Technique
- 8.6.8. Complications
- 8.6.9. Post-Operative Treatment

8.7. Tendoscopy

- 8.7.1. Anatomy
- 8.7.2. Literature Review.
- 8.7.3. Indications
- 8.7.4. Contraindications
- 8.7.5. Preoperative Planning
- 8.7.6. Approach
- 8.7.7. Surgical Technique
- 8.7.8. Complications
- 8.7.9. Post-Operative Treatment

8.8. Arthroscopic Reconstruction of Lateral Ankle Ligaments

- 8.8.1. Anatomy
- 8.8.2. Literature Review.
- 8.8.3. Indications
- 8.8.4. Contraindications
- 8.8.5. Preoperative Planning
- 8.8.6. Approach
- 8.8.7. Surgical Technique
- 8.8.8. Complications
- 8.8.9. Post-Operative Treatment



- 8.9. Diagnostic Subtalar Arthroscopy
  - 8.9.1. Anatomy
  - 8.9.2. Literature Review.
  - 8.9.3. Indications
  - 8.9.4. Contraindications
  - 8.9.5. Preoperative Planning
  - 8.9.6. Approach
  - 8.9.7. Surgical Technique
  - 8.9.8. Complications
  - 8.9.9. Post-Operative Treatment
- 8.10. Arthroscopically Assisted Fractures
  - 8.10.1. Anatomy
  - 8.10.2. Literature Review.
  - 8.10.3. Indications
  - 8.10.4. Contraindications
  - 8.10.5. Preoperative Planning
  - 8.10.6. Approach
  - 8.10.7. Surgical Technique
  - 8.10.8. Complications
  - 8.10.9. Post-Operative Treatment

## Module 9. Sports Injuries

- 9.1. Achilles Tendon Rupture
  - 9.1.1. Anatomy
  - 9.1.2. Literature Review.
  - 9.1.3. Indications
  - 9.1.4. Contraindications
  - 9.1.5. Preoperative Planning
  - 9.1.6. Approach
  - 9.1.7. Surgical Technique
  - 9.1.8. Complications
  - 9.1.9. Post-Operative Treatment

- 9.2. Non-Insertional Tendinopathy of the Achilles Tendon
  - 9.2.1. Anatomy
  - 9.2.2. Literature Review.
  - 9.2.3. Indications
  - 9.2.4. Contraindications
  - 9.2.5. Preoperative Planning
  - 9.2.6. Approach
  - 9.2.7. Surgical Technique
  - 9.2.8. Complications
  - 9.2.9. Post-Operative Treatment
- 9.3. Insertional Tendinopathy of the Achilles Tendon and Haglund's Deformity
  - 9.3.1. Anatomy
  - 9.3.2. Literature Review.
  - 9.3.3. Indications
  - 9.3.4. Contraindications
  - 9.3.5. Preoperative Planning
  - 9.3.6. Approach
  - 9.3.7. Surgical Technique
  - 9.3.8. Complications
  - 9.3.9. Post-Operative Treatment
- 9.4. Peroneal Tendon Rupture
  - 9.4.1. Anatomy
  - 9.4.2. Literature Review.
  - 9.4.3. Indications
  - 9.4.4. Contraindications
  - 9.4.5. Preoperative Planning
  - 9.4.6. Approach
  - 9.4.7. Surgical Technique
  - 9.4.8. Complications
  - 9.4.9. Post-Operative Treatment

9.5. Peroneal Tendon Dislocation

- 9.5.1. Anatomy
- 9.5.2. Literature Review
- 9.5.3. Indications
- 9.5.4. Contraindications
- 9.5.5. Preoperative Planning
- 9.5.6. Approach
- 9.5.7. Surgical Technique
- 9.5.8. Complications
- 9.5.9. Post-Operative Treatment

9.6. Bröstrom Technique for Ankle Instability

- 9.6.1. Anatomy
- 9.6.2. Literature Review
- 9.6.3. Indications
- 9.6.4. Contraindications
- 9.6.5. Preoperative Planning
- 9.6.6. Approach
- 9.6.7. Surgical Technique
- 9.6.8. Complications
- 9.6.9. Post-Operative Treatment

9.7. Lateral Ankle Ligament Reconstruction Plasty

- 9.7.1. Anatomy
- 9.7.2. Literature Review
- 9.7.3. Indications
- 9.7.4. Contraindications
- 9.7.5. Preoperative Planning
- 9.7.6. Approach
- 9.7.7. Surgical Technique
- 9.7.8. Complications
- 9.7.9. Post-Operative Treatment

9.8. Calf Lengthening

- 9.8.1. Anatomy
- 9.8.2. Literature Review
- 9.8.3. Indications
- 9.8.4. Contraindications
- 9.8.5. Preoperative Planning
- 9.8.6. Approach
- 9.8.7. Surgical Technique
- 9.8.8. Complications
- 9.8.9. Post-Operative Treatment

9.9. Achilles Tendon Lengthening

- 9.9.1. Anatomy
- 9.9.2. Literature Review
- 9.9.3. Indications
- 9.9.4. Contraindications
- 9.9.5. Preoperative Planning
- 9.9.6. Approach
- 9.9.7. Surgical Technique
- 9.9.8. Complications
- 9.9.9. Post-Operative Treatment

9.10. Deltoid Ligament Reconstruction

- 9.10.1. Anatomy
- 9.10.2. Literature Review
- 9.10.3. Indications
- 9.10.4. Contraindications
- 9.10.5. Preoperative Planning
- 9.10.6. Approach
- 9.10.7. Surgical Technique
- 9.10.8. Complications
- 9.10.9. Post-Operative Treatment

## Module 10. Anesthetic and Soft Tissue Techniques

- 10.1. Equine Foot
  - 10.1.1. Anatomy
  - 10.1.2. Literature Review.
  - 10.1.3. Indications
  - 10.1.4. Contraindications
  - 10.1.5. Preoperative Planning
  - 10.1.6. Approach
  - 10.1.7. Surgical Technique
  - 10.1.8. Complications
  - 10.1.9. Post-Operative Treatment
- 10.2. Compartment Syndrome of the Foot. Fasciotomies
  - 10.2.1. Anatomy
  - 10.2.2. Literature Review.
  - 10.2.3. Indications
  - 10.2.4. Contraindications
  - 10.2.5. Preoperative Planning
  - 10.2.6. Approach
  - 10.2.7. Surgical Technique
  - 10.2.8. Complications
  - 10.2.9. Post-Operative Treatment
- 10.3. Extraction of Semitendinosus and Rectus Medialis for Free Tendon Grafting
  - 10.3.1. Anatomy
  - 10.3.2. Literature Review.
  - 10.3.3. Indications
  - 10.3.4. Contraindications
  - 10.3.5. Preoperative Planning
  - 10.3.6. Approach
  - 10.3.7. Surgical Technique
  - 10.3.8. Complications
  - 10.3.9. Post-Operative Treatment
- 10.4. Tendon Transfers for Valgus Flatfoot
  - 10.4.1. Anatomy
  - 10.4.2. Literature Review.
  - 10.4.3. Indications
  - 10.4.4. Contraindications
  - 10.4.5. Preoperative Planning
  - 10.4.6. Approach
  - 10.4.7. Surgical Technique
  - 10.4.8. Complications
  - 10.4.9. Post-Operative Treatment
- 10.5. Popliteal Anesthesia and Ankle Block
  - 10.5.1. Anatomy
  - 10.5.2. Literature Review.
  - 10.5.3. Indications
  - 10.5.4. Contraindications
  - 10.5.5. Preoperative Planning
  - 10.5.6. Approach
  - 10.5.7. Surgical Technique
  - 10.5.8. Complications
  - 10.5.9. Post-Operative Treatment
- 10.6. Grafts and Biologicals
  - 10.6.1. Anatomy
  - 10.6.2. Literature Review.
  - 10.6.3. Indications
  - 10.6.4. Contraindications
  - 10.6.5. Preoperative Planning
  - 10.6.6. Approach
  - 10.6.7. Surgical Technique
  - 10.6.8. Complications
  - 10.6.9. Post-Operative Treatment

- 10.7. Charcot Hindfoot and Ankle
  - 10.7.1. Anatomy
  - 10.7.2. Literature Review.
  - 10.7.3. Indications
  - 10.7.4. Contraindications
  - 10.7.5. Preoperative Planning
  - 10.7.6. Approach
  - 10.7.7. Surgical Technique
  - 10.7.8. Complications
  - 10.7.9. Post-Operative Treatment
- 10.8. Diabetic Foot
  - 10.8.1. Anatomy
  - 10.8.2. Literature Review
  - 10.8.3. Indications
  - 10.8.4. Contraindications
  - 10.8.5. Preoperative Planning
  - 10.8.6. Approach
  - 10.8.7. Surgical Technique
  - 10.8.8. Complications
  - 10.8.9. Post-Operative Treatment
- 10.9. Foot Infections
  - 10.9.1. Anatomy
  - 10.9.2. Literature Review
  - 10.9.3. Indications
  - 10.9.4. Contraindications
  - 10.9.5. Preoperative Planning
  - 10.9.6. Approach
  - 10.9.7. Surgical Technique
  - 10.9.8. Complications
  - 10.9.9. Post-Operative Treatment



10.10. Soft Tissue Coverage

10.10.1. Anatomy

10.10.2. Literature Review.

10.10.3. Indications

10.10.4. Contraindications

10.10.5. Preoperative Planning

10.10.6. Approach

10.10.7. Surgical Technique

10.10.8. Complications

10.10.9. Post-Operative Treatment

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*There is no better program to specialize in this type of surgery”*



06

# Methodology

This academic program offers students a different way of learning. Our methodology uses a cyclical learning approach: **Relearning**.

This teaching system is used, for example, in the most prestigious medical schools in the world, and major publications such as the **New England Journal of Medicine** have considered it to be one of the most effective.



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*Discover Relearning, a system that abandons conventional linear learning, to take you through cyclical teaching systems: a way of learning that has proven to be extremely effective, especially in subjects that require memorization"*

## At TECH we use the Case Method

What should a professional do in a given situation? Throughout the program, students will face multiple simulated clinical cases, based on real patients, in which they will have to do research, establish hypotheses, and ultimately resolve the situation. There is an abundance of scientific evidence on the effectiveness of the method. Specialists learn better, faster, and more sustainably over time.

*With TECH you will experience a way of learning that is shaking the foundations of traditional universities around the world.*



According to Dr. Gérvas, the clinical case is the annotated presentation of a patient, or group of patients, which becomes a "case", an example or model that illustrates some peculiar clinical component, either because of its teaching power or because of its uniqueness or rarity. It is essential that the case is based on current professional life, trying to recreate the real conditions in the physician's professional practice.



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*Did you know that this method was developed in 1912, at Harvard, for law students? The case method consisted of presenting students with real-life, complex situations for them to make decisions and justify their decisions on how to solve them. In 1924, Harvard adopted it as a standard teaching method”*

The effectiveness of the method is justified by four fundamental achievements:

1. Students who follow this method not only achieve the assimilation of concepts, but also a development of their mental capacity, through exercises that evaluate real situations and the application of knowledge.
2. Learning is solidly translated into practical skills that allow the student to better integrate into the real world.
3. Ideas and concepts are understood more efficiently, given that the example situations are based on real-life.
4. Students like to feel that the effort they put into their studies is worthwhile. This then translates into a greater interest in learning and more time dedicated to working on the course.



## Relearning Methodology

At TECH we enhance the case method with the best 100% online teaching methodology available: Relearning.

This university is the first in the world to combine the study of clinical cases with a 100% online learning system based on repetition, combining a minimum of 8 different elements in each lesson, a real revolution with respect to the mere study and analysis of cases.

*Professionals will learn through real cases and by resolving complex situations in simulated learning environments. These simulations are developed using state-of-the-art software to facilitate immersive learning.*



At the forefront of world teaching, the Relearning method has managed to improve the overall satisfaction levels of professionals who complete their studies, with respect to the quality indicators of the best online university (Columbia University).

With this methodology, more than 250,000 physicians have been trained with unprecedented success in all clinical specialties regardless of surgical load. Our pedagogical methodology is developed in a highly competitive environment, with a university student body with a strong socioeconomic profile and an average age of 43.5 years old.

*Relearning will allow you to learn with less effort and better performance, involving you more in your specialization, developing a critical mindset, defending arguments, and contrasting opinions: a direct equation to success.*

In our program, learning is not a linear process, but rather a spiral (learn, unlearn, forget, and re-learn). Therefore, we combine each of these elements concentrically.

The overall score obtained by TECH's learning system is 8.01, according to the highest international standards.



This program offers the best educational material, prepared with professionals in mind:



#### Study Material

All teaching material is produced by the specialists who teach the course, specifically for the course, so that the teaching content is highly specific and precise.

These contents are then applied to the audiovisual format, to create the TECH online working method. All this, with the latest techniques that offer high quality pieces in each and every one of the materials that are made available to the student.



#### Surgical Techniques and Procedures on Video

TECH introduces students to the latest techniques, the latest educational advances and to the forefront of current medical techniques. All of this in direct contact with students and explained in detail so as to aid their assimilation and understanding. And best of all, you can watch the videos as many times as you like.



#### Interactive Summaries

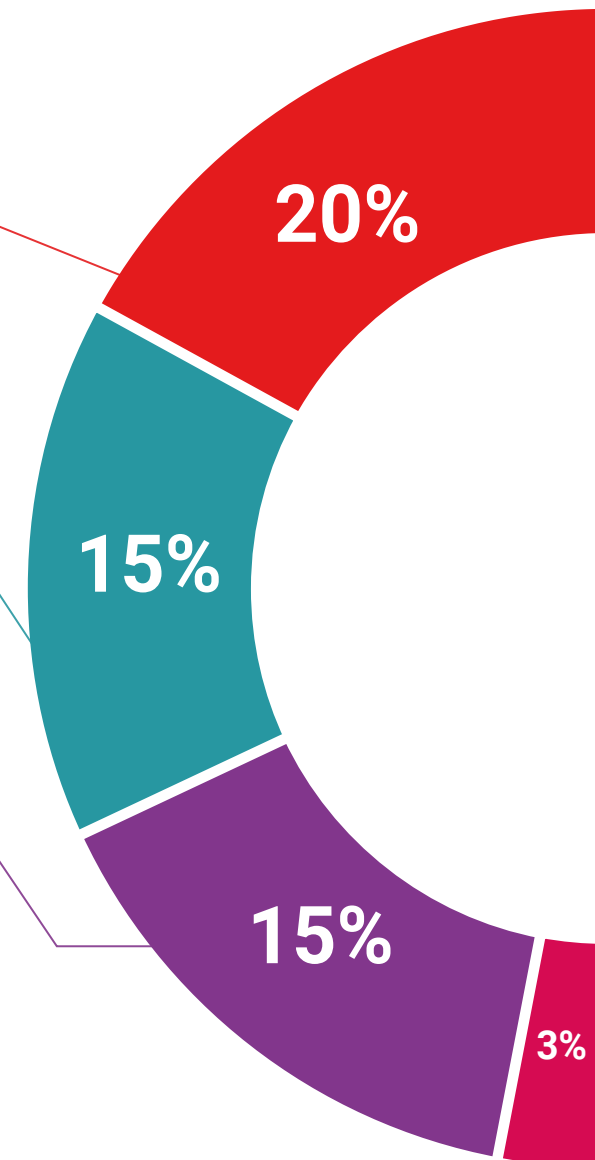
The TECH team presents the contents attractively and dynamically in multimedia lessons that include audio, videos, images, diagrams, and concept maps in order to reinforce knowledge.

This exclusive educational system for presenting multimedia content was awarded by Microsoft as a "European Success Story".



#### Additional Reading

Recent articles, consensus documents and international guidelines, among others. In TECH's virtual library, students will have access to everything they need to complete their course.





#### Expert-Led Case Studies and Case Analysis

Effective learning ought to be contextual. Therefore, TECH presents real cases in which the expert will guide students, focusing on and solving the different situations: a clear and direct way to achieve the highest degree of understanding.



#### Testing & Retesting

We periodically evaluate and re-evaluate students' knowledge throughout the program, through assessment and self-assessment activities and exercises, so that they can see how they are achieving their goals.



#### Classes

There is scientific evidence on the usefulness of learning by observing experts. The system known as Learning from an Expert strengthens knowledge and memory, and generates confidence in future difficult decisions.



#### Quick Action Guides

TECH offers the most relevant contents of the course in the form of worksheets or quick action guides. A synthetic, practical, and effective way to help students progress in their learning.



# 07 Certificate

The Master's Degree in Foot and Ankle Surgery guarantees students, in addition to the most rigorous and up to date education, access to a Master's Degree diploma issued by TECH Global University





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*Successfully complete this program and receive your university qualification without having to travel or fill out laborious paperwork”*

This program will allow you to obtain your **Master's Degree diploma in Foot and Ankle Surgery** endorsed by **TECH Global University**, the world's largest online university.

**TECH Global University** is an official European University publicly recognized by the Government of Andorra (*official bulletin*). Andorra is part of the European Higher Education Area (EHEA) since 2003. The EHEA is an initiative promoted by the European Union that aims to organize the international training framework and harmonize the higher education systems of the member countries of this space. The project promotes common values, the implementation of collaborative tools and strengthening its quality assurance mechanisms to enhance collaboration and mobility among students, researchers and academics.

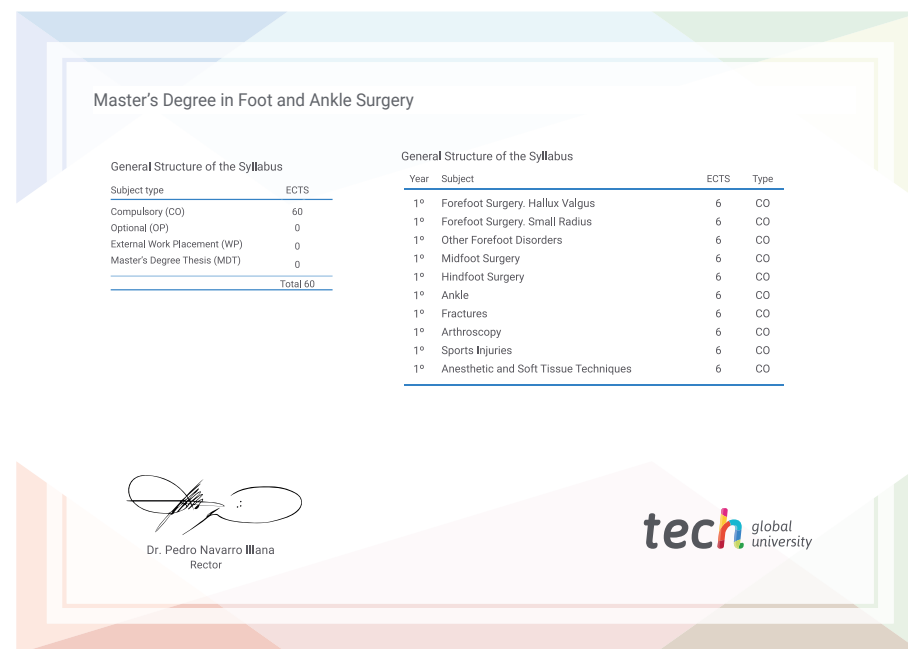
This **TECH Global University** title is a European program of continuing education and professional updating that guarantees the acquisition of competencies in its area of knowledge, providing a high curricular value to the student who completes the program.

Title: **Master's Degree in Foot and Ankle Surgery**

Modality: **online**

Duration: **12 months**

Accreditation: **60 ECTS**



\*Apostille Convention. In the event that the student wishes to have their paper diploma issued with an apostille, TECH Global University will make the necessary arrangements to obtain it, at an additional cost.



future  
health confidence people  
education information tutors  
guarantee accreditation teaching  
institutions technology learning  
community commitment  
personalized service innovation  
knowledge present  
development language  
virtual classroom



## Master's Degree Foot and Ankle Surgery

- » Modality: online
- » Duration: 12 months
- » Certificate: TECH Global University
- » Credits: 60 ECTS
- » Schedule: at your own pace
- » Exams: online

Master's Degree

Foot and Ankle Surgery

