

ANKLE OCD SURGERY REHABILITATION GUIDELINES

PRE-OP:

- EVALUATION:** Gait, Edema, ROM, Strength, Ligament Laxity and Tenderness
- EXERCISE:** Instruct in Phase I post-op exercises
- CRUTCHES:** Instruction in NWB 3-point gait (Level Surfaces and Stairs)
- EDUCATION:** Understand the need of Compliance in Rehabilitation, Timelines, Goals, Precautions & Follow-up Appointment.

PHASE I: POST-OP (Acute) PHASE:

Generally lasts until 6 weeks post-operative

CRUTCHES: NWB for OCD lesions/chondral drilling

EXERCISE: ****Note:** Exercise prescription is dependent upon the tissue healing process and *individual* functional readiness in *all* stages. If any concerns or complications arise regarding the patient's progress, physical therapy will contact the orthopedic doctor. Exercises should be performed 2-3 times each day.

For the first 6 weeks patients should do nothing except gentle AROM exercises, gentle towel stretching for gastroc/soleus, frequent lower extremity elevation and ice.

Criteria for Progression to Phase II are Basically "time-based". Progress per ortho guidelines. (Approx. 6 weeks)

PHASE II: BEGINNING STRENGTHENING & FUNCTIONAL PHASE:

Generally begins at 6 weeks post-operative and lasts 4-6 weeks (until 10 to 12 weeks post-op)

FOLLOW-UP: Every other week with P.T., Monthly with Ortho, Attend P.T. TIW during this phase

DOCUMENTATION: Swelling, Ecchymosis, Gait Status – Functional Level
ROM & Strength

BRACE / CRUTCHES: WBAT – (Gradually wean from crutches. May D/C Crutches when Gait is basically non-antalgic).

EXERCISE: (Continue Phase I exercises as needed)

Endurance Training: (15-20 minutes)

Bike against light resistance (5-10 minutes). Add time and intensity gradually.
Progress to Stairmaster or Elliptical Machine

Gait / Functional Training: (3-5 minutes)

Retro walking on treadmill with progress to forward walking,
carioca & shuffle walks, etc.

Independent pool program progression: walking, lunges, squats, jumping,
deep water running.

Motion & Stretching: (3-5 minutes)

Seated BAPS – Progress to standing BAPS (2-3 minutes)
Add standing gastroc and soleus stretch

Strengthening

Light to Moderate Theraband in all directions
Heel Raise Progression (bilateral to unilateral)
Hip PRE's in all directions

Proprioceptive/Balance Training: (appr. 5-10 minutes)

One Legged Standing Exercises (2-3 exercises per day),
Stork Stand, Airplane, Rubber tubing kicks, Body Blade,
Trampoline ball catch, plyoback, etc.

Criteria for Progression to Phase III:

1. **Single Leg Hopping is Pain Free**
2. **Ankle has full ROM (> 95%)**
3. **Minimum 4 weeks on this phase**

PHASE III: ADVANCED STRENGTHENING & FUNCTIONAL PHASE:

Generally begins at 10 to 12 weeks post-operative and lasts 6-8 weeks (until 16 to 20 weeks post-operative)

FOLLOW-UP: Every 3-4 Weeks with P.T., Perform exercises 3-5 times per week

DOCUMENTATION: Swelling, Ecchymosis, Gait Status – Functional Level
ROM & Strength

EXERCISE: Warm-up on bike or stairmaster and do general LE stretching (5-6 minutes):

Endurance Training:

Stairmaster or Elliptical Machine
Walk to Jogging/Running Program Progression

Gait / Functional Training (5-10 minutes: Progress intensity gradually)

Carioca jog, shuffles, directional jogging, fitter, slide board
Plyoball hop, trampoline hops, jump rope, etc.
Sport specific agility drills

Strengthening: (Phase II exercises at Increasing resistance/intensity)

All directions
Gastroc/Soleus Press (Progressive Strengthening)
¼ Squats, Step-ups/downs, Lunges

Proprioceptive/Balance Training: (5-7 minutes: Phase II Ex at higher intensity)

Standing Wobble Board (BAPS w/ eyes open & closed),
One Legged Standing Exercises (2-3 exercises per day),
Stork Stand, Airplane, Rubber tubing kicks, Body Blade,
Trampoline ball catch, plyoback, etc.

GOALS for Rehabilitation:

1. **Lateral Hop is > 90% of noninvolved LE**
2. **Ankle has Full Strength**
3. **Ability to pass APFT**

Signature

Date