Ankle Arthroscopy with or w/o Talus OCD Microfracture Rehab Protocol

Prescription

Patient Name:                                      Date:

Diagnosis: Ankle synovitis  talar OCD lesion     Frequency: 2-3 visits/week  Duration: 3 months

Talar OCD microfracture performed  Y  /  N

Post-operative Period

0 to 1 week
- Splint immobilization
- Crutches with non-weight-bearing
- Daily icing, compression and elevation home program
- **If microfracture is performed**
  - Toe touch weightbearing is continued for 6 weeks with crutches
  - Advance to weightbearing as tolerated to wean the crutches off by 8 weeks
  - Perform ROM and strengthening exercises non-weightbearing for first 6 weeks

1 to 3 weeks
- Wean off splint and crutches (see above if microfracture performed)
- Early, gentle ROM
- Normalize gait pattern
- Active assisted/passive stretching (3 times/day)
- Modalities as indicated
- Daily HEP to include elevation, compression and icing

3 to 6 weeks
- Advance range of motion exercises
- Foot intrinsic strengthening
- Ankle isometric strengthening exercises
- Balance and proprioception exercises
Stationary biking/swimming
Begin 4-plane theraband strengthening
Gradual return to functional activities
Modalities as indicated
Daily HEP

**Functional Rehab Phase (6 to 12 weeks)**
Continue and advance ankle strengthening exercises
Evaluate for any core and hip weakness and treat accordingly
Begin double leg squats, calf raises, and toe raises
Progress to single leg squats, calf raises, and toe raises
Advance balance and proprioception exercises
Initiate elliptical trainer and treadmill walking as tolerated, then straight plane jogging
Controlled lateral agility work
Modalities as indicated
Daily HEP

**Maintenance Phase**
Consider bracing for activity/sports (not mandatory)
Advanced single leg balance and proprioception exercises
Progress lateral agility exercises and advanced agility drills
Functional activity/sports-specific training
Phase out supervised rehab
Advance home strengthening program to be done daily
Encourage maintenance gym work-outs focusing on ankle stabilization, core and hip strengthening

**Criteria for Return to Sports/Full Activities:**
1. Full functional range of motion
2. No pain or swelling with functional activities
3. Good core control and balance/proprioception

**Please contact us with any questions:**
**Duncan** (clinical nurse specialist – Dr. Kaar) at **(314) 577-8525** / email: dmchardy@slu.edu
**Julia** (clinical nurse specialist – Dr. Kim) at **(314) 577-8524** / email: santiagoja@slu.edu
General office at **(314) 256-3850** (SLUH South Campus Clinic); **(314) 768-1050** (St Mary’s Clinic);
Cardinal Glennon **(314) 577-5640**

**Physician Signature:**