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

**Prescription**

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<th>Patient Name:</th>
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**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:**
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**Physician Signature:**