Post-Operative Instructions
Ankle Arthroscopy + Microfracture Talus OCD (Osteochondritis Dissecans lesion)

Day of Surgery
A. Diet as tolerated.
B. Pain medication as needed every 6 hours.
C. Icing is important for the first 5-7 days post-op. Ice is applied for 20-minute periods 3-4 times per day. Care must be taken with icing to avoid frostbite.
D. Make sure you have a physical therapy post-op appointment set up to start two weeks after surgery.

First Post-Operative Day
A. Continue icing

Second Post-Operative Day
A. Continue icing

Third Post-Operative Day Until Return Visit
A. Continue ice pack as needed.
B. You may remove the surgical bandage after you shower and apply regular bandages to the wounds. If you have a splint you do not need to change anything. Keep extremity dry until first follow up appt

Ankle Support
A. Weeks 0-2: posterior slab/splint
B. Weeks 2-6: Aircast/CamWalker type boot. No weight bearing
C. Weeks 6-8 WBAT (weightbearing as tolerated in boot)
D. Week 8-12: wean off boot

Call our office @ 646-501-7223 option 4, option 2 to confirm your first postoperative visit, which is usually about 1-2 weeks after surgery. If you are experiencing any problems, please call our office or contact us via the internet at www.newyorkortho.com.
Rehabilitation Protocol: Microfracture/DeNovo Ankle/Talus

Name: __________________________________________________________ Date: ___________________________

Diagnosis: _____________________________________________________ Date of Surgery: ________________

☐ Phase I (Weeks 1-2)
  • Goals  
    o Control pain and swelling  
    o ADL (activities of daily living)  
  • Guidelines  
    o NWB (non-weight bearing)  
    o Elevate to control swelling  
    o AROM hip and knee  
    o Sutures dissolved/removed @ 10-14 days  
    o ADL

☐ Phase II (Weeks 3-6)
  • Goals  
    o Normal gait  
  • Guidelines  
    o NWB for a total of 4-6 weeks (depending on discretion of surgeon)  
    o Begin physical therapy at week 3  
    o Start ankle AROM (active range of motion)/PROM (passive range of motion)

☐ Phase III (Weeks 6-10)
  • Goals  
    o Full ROM (range of motion)  
    o Full strength and endurance  
    o Good proprioception  
  • Guidelines  
    o Wean from boot as tolerated  
    o Massage for edema  
    o AROM in all directions  
      ▪ NWB  
      ▪ WB ROM as tolerated  
    o Gait retraining  
    o Manual mobilization if required  
    o Strengthening  
      ▪ Ankle  
        • Theraband resisted training in all directions  
        • Progress to WB exercises as tolerated  
        • Toe raises  
        • Inversion/eversion on wobble board or fitter
- Proprioception retraining
- Dynamic training
  - Hopping
  - Skipping
  - Running
- Progress to plyometrics

Phase IV (Week 10+)

- Goals
  - Return to work and/or activity

- Guidelines
  - Full activity as tolerated
  - Work or sport specific retraining

Comments:

Frequency: _____ times per week  
Duration: ______ weeks

Signature: _______________________________  
Date: ___________________________