

# BC Foot & Ankle Clinic St. Paul's Hospital



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### **Physical Therapy**

## **Ankle Arthroscopy- Postoperative Protocol**

Week	Physical Therapy Guidelines	<u>Goals</u>
0-2	<ul> <li>in back slab NWB or WBAT in soft dressing</li> <li>education on proper crutch/walker use</li> <li>AROM of hip and knee</li> <li>rest and elevation of limb to 14 cm/6in above heart 22 out of 24 hrs a day</li> </ul>	<ul> <li>ADL's with safe crutch/walker use</li> <li>Control swelling and pain</li> </ul>
2+	<ul> <li>1st post-op visit at F/A Clinic at 2 weeks post-op</li> <li>seen by Physiotherapist in F/A clinic and taught AROM of ankle and toes</li> <li>scar massage</li> <li>WBAT in shoe at 2 wks post-op</li> <li>may start Physiotherapy with no restrictions, gradually increasing ROM, strength, balance and proprioception</li> <li>gait training in a shoe</li> <li>joint mobilizations</li> <li>may start swimming once arthroscopic holes are completely healed and dry</li> <li>important to focus on functional dorsiflexion as this is often the most restricted movement</li> <li>include core exercises – transversus abdominus and gluteus medius</li> <li>wean from crutches once able to ambulate without a limp</li> </ul>	<ul> <li>increase ankle ROM</li> <li>increase ankle strength</li> <li>increase balance and proprioception</li> <li>increase exercise tolerance</li> <li>maintain hip and knee ROM</li> <li>safe use of crutches/walker</li> </ul>

#### **Pain and Swelling**

This procedure can cause swelling and pain. It is normal for the foot and ankle to be swollen up to 6 months post-op. Redness does not necessarily indicate infection. Significant drainage from the wound is usually a sign of infection.

#### **Driving**

The patient may drive if the surgery is on the **LEFT** foot as pain and swelling allows, and if the car is an automatic. If the surgery is on the **RIGHT** foot the patient may return to driving if they are full weight bearing and can safely demonstrate an emergency stop on the brake. **THE PATIENT CANNOT DRIVE WHILE THEIR FOOT IS IN A WALKER BOOT**. The patient should contact their insurance company before driving a car.

#### **Return to Work**

Return to work at a fully sedentary job no earlier than 3-4 weeks post-op.

Return to work at a job requiring significant amounts of standing or walking no earlier than 2 months post-op.

Return to work for jobs with physical requirements between the above extremes is individualized (if uncertain please contact the surgeon).