Connecticut Orthopaedics

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Sports Medicine/Foot & Ankle

Osteochondral Defect of Ankle
Post-Operative Protocol

Week 0-1

- Non-weight bearing with crutches, no scooter use
- Elevation above the heart "toes above the nose" for edema control

Week 1-6

Treatment:

- Non-weight bearing in pneumatic walking boot
- May use knee scooter
- Active ankle ROM all directions
- Begin ankle strengthening exercises
- Isometrics all directions-submaximal
- Intrinsic foot strengthening
    - toe curls, marble pickups, etc.

Week 6-10

Goals:

- Progress ankle ROM and strength
- Progressive weight bearing as follows:
    - Week 6: 25-50%
    - Week 7: 50-100%
    - Week 8: FWB
    - Weeks 8-10, wean from boot (FWB)

Week 10-12

Goals:

- Normalized gait
- Closed kinetic chain LE exercises
- Ankle ROM and strengthening
- Normal gait in shoe
- Introduce proprioceptive exercises
    - Even ground only, no BAPS, BOSU or Wobble board

Treatment:

- Ankle ROM
- UBE, may introduce LE stationary bike with no resistance

Week 12-16

Goals:

- Protect healing cartilage
- Return to full normal everyday activities
- Progress ankle strength, ROM and proprioceptive exercises
- Continue general strengthening of LE, UE, and trunk as indicated

Treatment:

- Add LE closed chain exercises, single plane
- Evaluate LE biomechanics, flexibility, and strength bilaterally
- Modalities to control/decrease inflammation/pain
- Closed kinetic chain LE exercises with added weight
- Stationary bike-may start to progress resistance
- Increase duration/intensity as tolerated

Week 16-20

Goals:

- Patient demonstrates fair static and dynamic neuromuscular control
- Treatment:
- Introduce jogging in pool (chest deep water) or with use of Alter G
- Pre-requisites: no walking pain, adequate strength, Full ROM
- Progress proprioceptive training
- Static and dynamic balance progressing to varied surfaces as patient is able
- Cardiovascular training: continue exercise bike/elliptical

Week 20-24

Goals:

- Patient to demonstrate full strength throughout full ROM
- Patient to demonstrate fully restored static and dynamic neuromuscular control and kinesthetic awareness
- Treatment:
- Increase intensity of exercise bike, elliptical, stair-stepper, and treadmill
- Increase intensity and resistance in closed chain activities
- Multi-planar movements

Week 24-32

Goals:

- Begin high impact activity and progress as tolerated
- Running/jogging, plyometrics
- Sport specific drills
- Pass Return to sport functional test (7-8 months post-operatively)

Revised ***