

**Ankle Arthroscopy with or w/o Talus OCD Microfracture
POST-OPERATIVE PHYSICAL THERAPY PROTOCOL**

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