

## ANKLE ARTHROSCOPIC DRILLING POST-OPERATIVE GUIDELINES

### INITIAL SURGICAL DRESSING

A gauze dressing will be covered by a very padded cast. This cast is too wide to accommodate a rubber walking boot. Caution is urged to avoid sliding when the cast is resting on a hard floor surface.

### BED REST, ELEVATION, AND WEIGHTBEARING

Bed rest is prescribed for at least two days after operation if one foot is operated upon and four days after operation if both feet are operated upon. During the period of bed rest, the feet are elevated above the level of the heart. After the period of bed rest, progress with sitting with the operated foot (feet) elevated at chair level. Progressing with ambulation around the house is encouraged. Confinement to the house for the first week is recommended.

No weightbearing is allowed for about six weeks after operation. Thereafter, gradually increasing weightbearing is performed with full weightbearing occurring about two months after operation.

### CRUTCHES/WALKER/CANE

Crutches are used for six to eight weeks. A Roll-A-Bout is an elevated scooter and is an excellent device for nonweightbearing. It can be prescribed preoperatively. A cane is sometimes used in the transition from nonweightbearing to full weightbearing as crutches are gradually discarded. The cane is used on the side of the operated ankle. As comfort improves, walking is done more smoothly with a cane when the cane is in the opposite hand.

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## BANDAGES /CASTS/WALKER BOOTS

### *Bandage Management:*

On the day of surgery: Please follow the bandage instructions given to you in the postoperative orders.

First and second weeks: The bandage will be covered by a cast.

The initial cast is removed two weeks after operation and usually a removable walker boot is applied. The removable walker boot is used day and night. It is removed for doing exercises and showering. After six weeks, the walker boot can be left off at bedtime, but is used in the initial phase of walking.

## FOOTWEAR AND ELASTIC STOCKINGS

At about two months postoperative, transition to a shoe is made. A lightweight hiking boot is often ideal. A soft ankle sprain brace is commonly recommended. A medium strength elastic stocking is used for about six weeks if there is significant swelling.

## SHOWERING, SUTURES, AND DRIVING

The initial cast should be kept dry. This can be done with double trash bags bound tightly at the knee with a strong rubber band. Commercially available “cast guards” are available through the internet. Search on Google using the term Cast Guard. The showering cast guards are also available at some orthopaedic supply stores. Showering without wound protection can be done after removal of the cast at approximately two weeks.

Sutures are removed at two weeks postoperative.

When operation is on the right, driving is usually started at 8-10 weeks postoperatively with the brace, when safe. If the operative side is on the left, driving may be started at about two weeks postoperative. Earlier driving may cause increased swelling on the right as it is in a dependent position.

## REHABILITATIVE EXERCISES

First week: Isometric exercises are begun on the day of surgery as soon as able. Tighten the muscles of the foot and leg for 20 seconds, relax briefly and repeat. A “set” of isometric contractions is 5. Make an effort to do one set of isometric contractions every two hours of the waking day until ambulating with full weightbearing and without a cast.

After two weeks, massage is started and a removable walker boot is used.

Third week after operation: Emphasis is on motion at this time, bending the ankle down and moving it up. It is the excursion of motion back and forth that nourishes the joint cartilage.

Formal physical therapy is prescribed beginning at about one month after operation. The emphasis is on mid- range motion and regaining strength.

## SKIN CARE

Skin care is to begin when a removable device is used. At that time, soften the skin with Vaseline, vitamin E ointment, or a thick hand lotion like Curel. When using Vaseline, cover the whole foot with a light amount of Vaseline and wipe away any excess. Do 2 or 3 times a day.