

Dr. Hjelm Total Ankle Arthroplasty

Time Frame	Treatment	Goals
0-2 weeks	<ul style="list-style-type: none"> - NWB in splint per physician orders - Edema management and patient education regarding elevation and cryotherapy - Patient education regarding signs of infection/blood clots - Patient education regarding weight bearing status and use of assistive devices - Active ROM/strengthening of the hip and knee to maintain LE strength and stability 	Manage swelling via ice and elevation Pt. understanding of signs of infection/blood clots Demonstrates safe ambulation with appropriate AD in NWB Maintenance of proximal muscle strength and ROM
2-3 weeks	<ul style="list-style-type: none"> - Continue NWB until week 4 post-op at which point patient will transition to weight bearing in walking boot per MD guidance - Boot may be removed for exercises and hygiene. Keep boot on at night - Stitches will remain until 3 to 4 weeks post-op <p>Exercises may begin at 3 weeks postop with MD approval:</p> <ul style="list-style-type: none"> - Initiate both AROM and PROM at the ankle - Strengthening of the knees, hips, core while maintaining weight bearing status 	Continue to manage swelling via ice and elevation Increase ROM of foot and ankle Continue with maintenance of ROM and strength for proximal musculature Independent with home exercise program, performed daily
4 weeks	<ul style="list-style-type: none"> - Splint removed, transition to walking boot per MD - Initiate weight shifting with boot and AD - Normalize gait pattern with boot and weight bearing status - Continue with AROM and PROM at the ankle - Continue strengthening of proximal LE muscle groups 	Demonstrates safe ambulation with appropriate AD and weight bearing in boot
6-10 weeks	<ul style="list-style-type: none"> - Wean from boot to be WBAT in shoe at 8 weeks, if the wound is fully healed - No strengthening against resistance until 3 months post-op if any tendon transfers - No stretching tendons if transferred - Continue AROM and PROM of the ankle, initiate stretching beginning with NWB and progressing to WB, and light strengthening - Continue strengthening of proximal LE muscle groups - Begin stationary bike - Implement joint mobilizations/soft tissue mobilization techniques for improved ankle motion and decreased pain 	Improve range of motion of foot and ankle Patient should now have a normalized gait pattern on all surfaces out of boot with or without an AD as needed

	<ul style="list-style-type: none"> - Instruct the patient on scar mobilization techniques - Progress activity level as indicated - Implement gait training to wean off of AD and normalize gait 	
10-14 weeks	<ul style="list-style-type: none"> - Continue interventions as listed above - Implement proprioception and balance based exercises as indicated - Implement progressive resistive strengthening of the ankle as tolerated and continue with progression of strength for proximal muscle groups as needed 	<p>Continue improving ankle strength and ROM Normal ambulation without an AD Begin showing progress with balance/proprioceptive activities of the surgical ankle</p>
14-16 weeks	<ul style="list-style-type: none"> - No repetitive, high impact sports or occupations - Continue interventions as listed above - Implement single-leg activities progressing into higher-level balance and proprioceptive exercises - Begin bilateral heel raises with eventual progression into unilateral heel raises (emphasize eccentric component) 	<p>AROM Goals at 16 Weeks: DF: 10 degrees PF: 35 degrees</p> <p>5/5 strength of surgical ankle in all planes Good balance and control of the involved ankle/leg in all planes</p>
16+ weeks	<ul style="list-style-type: none"> - Continue interventions as listed above - Discharge from in-clinic PT as appropriate - Instruct patient on continuing with no repetitive, high impact sports or occupations: Patient can begin sport specific training while avoiding high impact forces at the ankle 	<p>Gradual return to functional tasks and low impact sports Full strength of the foot/ankle complex</p>
1 year+	<ul style="list-style-type: none"> - No repetitive, high impact sports or occupations - Continue maintenance HEP for strength and mobility - Continued participation in low impact sports 	<p>Continue to maintain strength and mobility of the ankle and foot to preserve the life the components</p>

Additional Information:

- Swelling can be common for 6 to 12 months post-op.
- Return to work with a sedentary occupation should be no earlier than 3 to 4 weeks post-op. Return to work with physical demands should be no earlier than 4 months post-op.
- Any job, sport, or activity that is repetitive and high impact is advised against following a total ankle arthroplasty.