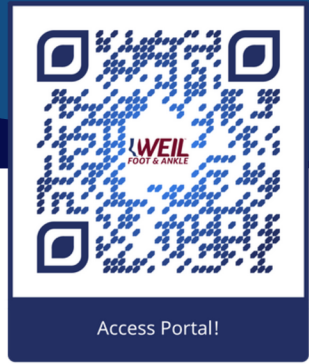


Lateral Ankle Stabilization



General Information:

- This protocol provides you with general guidelines after surgery.
- Specific changes in the program will be made by your physician as appropriate for each individual patient.
- Everyone heals at a different rate. It may take up to 12 months to make a full recovery, and it is not unusual to have intermittent aches, pains, and swelling throughout the course of your rehabilitation process.

Instructions For Patients

- **0-2 weeks Postoperatively**
 - Strict non-weightbearing in a short leg splint.
- **2-4 weeks Postoperatively**
 - Non-weightbearing in CAM boot.
 - You may remove the boot while in a seated, protected, position and begin to move your ankle up and down (ankle pumps).
 - Wear the boot while sleeping.
 - Begin physical therapy.
- **4-8 weeks Postoperatively**
 - Transition to a lace-up ankle brace with supportive athletic shoes and custom orthotics.
 - You may begin driving.
- **Exercise**
 - Non-weightbearing exercising at 2 weeks post-op.
 - Gentle transition into weightbearing exercising at 6 weeks post-op.
 - Gentle running and higher impact activities at 16 weeks post-op.
 - Use a lace-up ankle brace for any cutting sports or uneven surfaces for 6 months following your surgery.
 - Once you can come up and down on your toes (single heel rise) on the surgical side, or you can hop on the surgical foot (single leg hop), you may return to sports and all activities. This may take 6 months to a year.

Please note: *The complexity of lateral ankle stabilization is variable from patient to patient. When surgery is accompanied by additional surgery such as ankle arthroscopy, repair of osteochondral lesion, repair of peroneal tendon tear, or corrective osteotomies, recovery may be quite prolonged with extended swelling. In the revision situation, this may be even further magnified. Please discuss individual recovery with your surgeon for realistic expectations.*



Dr. Jonathan Hook

Please note that instructions are provided for patients of Dr. Hook. Always consult your Board-Certified Podiatrist before making any decisions/changes to your care plan as each patient's situation is unique.