

POST OPERATIVE PROTOCOLS

1. Mid-substance Achilles Rupture (refer to attached JBJS protocol)
 - a. Splint & NWB until 2 week f/u appt
 - b. At 2 week f/u change to boot with 3 block heel lift
 - i. Begin protected Wt bearing (50%)
 - ii. To wear boot at all times other than shower
 - iii. Start PT per protocol
 - iv. f/u 3-4 weeks
2. Insertional Achilles Reconstruction
 - a. Splint in PF & NWB until 2 week appt
 - b. Cast in resting PF until 6 weeks post op, remain NWB
 - c. At 6 weeks change to boot with 3 block heel lift, begin progressive WB, begin PT per protocol, f/u 3-4 week intervals
 - d. May drive at 8 weeks if RLE
3. Ankle Arthroscopy with Microfracture OCD
 - a. Splint & NWB until 2 week f/u
 - b. Change to boot at 2 weeks, begin PT and ROM, remain NWB until 6 week f/u appt
 - c. At 6 weeks begin progressive wt bearing
 - d. May transition in to ASO after full wt bearing in boot for 7 days
4. Ankle Arthroscopy for debridement of impingement
 - a. Splint & NWB until 10-14 days post op
 - b. Change in to boot once incisions healed, begin wt bearing, begin PT, f/u in 3-4 weeks
 - c. Once full wt bearing in boot for 7 days transition in to ASO
5. Ankle Arthroscopy with Brostrom-Gould Ligament Reconstruction
 - a. Splint & NWB until 2 week f/u appt
 - b. Change to cast, remain NWB for 2 more weeks until 4 week appt
 - c. At 4 week appt change to boot with lateral heel wedge, wear boot when sleeping, begin progressive WB protocol, begin PT, f/u 3 weeks
 - d. At 7 week f/u if doing well & full wt bearing in boot transition in to ASO, continue PT, begin run/walk program at 9-10 weeks
6. Peroneal Tendon Debridement and Repair
 - a. Splint & NWB until 2 week f/u appt
 - b. Change to cast, may be TTWB for 2 more weeks until 4 week appt
 - c. At 4 week appt change to boot with lateral heel wedge, begin progressive WB protocol, begin PT, f/u 3 weeks
 - d. At 7 week f/u if doing well & full wt bearing in boot transition in to ASO, continue PT, begin run/walk program at 9-10 weeks
7. Repair Dislocating Peroneal Tendons
 - a. Splint & NWB until 2 week f/u appt
 - b. At 2 weeks change to cast, may be TTWB for 2 more weeks until 4 week appt
 - c. At 4 week appt change cast, may be Protected WB, f/u 2 weeks

- d. At 6 weeks change to full length boot, ace/tubigrip for edema control, begin progressive WB, begin PT, f/u 3 weeks
 - e. At 9 weeks change to ASO, continue PT, f/u 3-4 weeks
 - f. At 12-13 weeks transition out of ASO, continue FPP in PT
8. (Flatfoot Reconstruction or Accessory Navicular) Calcaneal Osteotomy, PT debridement, FDL transfer
- a. Splint & NWB until 2 week appt → Change to cast in inversion, remain NWB, f/u in 2 weeks
 - b. At 4 week appt check wound, change cast (keep inverted), remain NWB, f/u 2 weeks
 - c. At 6 week appt get FOOT X-Rays, change to boot with Spenco Polysorb orthotic, ace wrap/tubigrip for edema control begin progressive WB, begin PT (may drive at 8 weeks if RLE), f/u in 3-4 weeks
 - d. At 9-10 weeks obtain foot XR's, wean from boot (as long as full wt bearing in boot for 1 week) in to Airlift PTTD brace, continue PT, f/u 4 weeks
 - e. At 13-14 weeks wean from Airlift brace in to shoe with Spenco or custom orthotic, f/u 4 weeks
 - f. At 17-18 weeks obtain foot XR's
9. Triple Arthrodesis/Ankle Arthrodesis
- a. Splint until 2 week f/u appt → Change to cast (if swelling allows), remain NWB for 10-12 weeks
 - b. F/u at 2-3 week intervals
 - c. Obtain XR's at 6 weeks, and again at 10-12 weeks before begins progressive WB
 - d. At 10-12 weeks change to boot, ace wrap/tubigrip for edema control, begin progressive WB, begin PT, f/u 4 weeks
 - e. At 14-16 weeks obtain foot XR's for triple/ankle XR's for ankle, if full WB in boot for 1 full week then change to ASO, f/u 4 weeks
 - f. At 18-20 weeks obtain XR's
10. Midfoot Arthrodesis/Subtalar Arthrodesis
- a. Splint until 2 week f/u → change to cast when swelling allows, f/u 2-3 week intervals, remain NWB until 8 weeks
 - b. XR's at 4 weeks and 8 weeks
 - c. At 8 weeks begin progressive WB, begin PT, f/u 4 weeks
 - d. XR's at 12 week f/u, change to carbon fiber for midfoot, ASO for subtalar
11. Percutaneous/ORIF Calcaneus Fracture
- a. Splint until 2 week f/u appt → Change to cast if swelling allows (**CAST IN NEUTRAL**), stitches out, remain NWB, f/u 2 weeks
 - b. At 4 week f/u, obtain axial/lateral heel XR's, change to another cast, remain NWB, f/u 2-3 weeks
 - c. At 6-8 week visit change to boot, ace/tubigrip for swelling, remain NWB, begin PT for subtalar motion & Achilles stretching, f/u 4 weeks

- d. At 10-12 weeks get XR, if retained/buried pins schedule for hardware removal keep NWB, if screw fixation then being progressive WB, continue PT, f/u 3-4 weeks
 - e. At 14-16 weeks get XR, wean from boot in to shoe with gel heel cup
12. ORIF Ankle Fracture
- a. Splint until 2 week f/u appt → Change to cast if swelling allows (**CAST IN NEUTRAL**), stitches out, remain NWB, f/u 2 weeks
 - b. At 4 week f/u, obtain ankle XR's, change to another cast, remain NWB, f/u 2-3 weeks
 - c. At 6-7 weeks change to boot, ace/tubigrip for swelling, begin progressive WB, may shower, begin PT, f/u 3-4 weeks
 - d. At 9-10 weeks f/u, obtain ankle XR's, transition to ASO once has been full WB in boot for 1 full week
13. Chevron (Akin) Bunionectomy
- a. At 1 week f/u check wound, re-strapping, WB in hard sole shoe
 - b. At 2 weeks sutures out, re-strapping, hard sole shoe, f/u 2 weeks
 - c. At 4 weeks, foot XR's, re-strapping, Encourage 1st MTP ROM exercises, hard sole shoe, f/u 2 weeks
 - d. At 6 weeks, transition to wide toe box sneaker as swelling allows, begin bunion regulator at night/spacer during the day for 1 month, PT if 1st MTP motion poor (1-2/ week for 2-4 weeks), f/u 4 weeks
 - e. At 10 weeks obtain foot XR's, may DC bunion regulator/spacer, may begin run/walk program or elliptical in progressive fashion, f/u 4 weeks
 - f. At 14 weeks obtain foot XR's, if doing well f/u PRN
14. Proximal MT Opening Wedge Osteotomy & Modified McBride Bunionectomy
- a. At 1 week check wound, re-strapping, replace in SL splint
 - b. At 2 weeks stitches out, Re-strapping, place SL cast, heel touch WB, f/u 2 weeks
 - c. At 4 weeks obtain foot XR's, Re-strapping, short boot, begin Progressive WB, Encourage 1st MTP ROM exercises, f/u 2 weeks
 - d. At 6 weeks begin bunion regulator at night, spacer during day, once full WB in boot change to hard sole shoe, f/u 3-4 weeks
 - e. At 9-10 weeks obtain foot XR's, change to wide toe box shoe if WB in hard sole shoe without pain, f/u 2-3 weeks
 - f. At 12-13 weeks may begin run/walk or elliptical in progressive fashion, progress shoe wear, f/u 4 weeks
 - g. At 16-17 week f/u obtain foot XR's
15. Ankle Replacement
- a. At 1 week check wound, replace in splint, NWB, Encourage toe ROM, f/u 7-10 days
 - b. At 2nd post op if wound is mature may remove stitches, place in SL NWB cast (**CAST IN NEUTRAL**), f/u 2 weeks
 - c. At 4 week appt obtain ankle XR's, may change to full length boot, ace wrap/tubigrip for edema control, begin Progressive WB, begin PT, may DC lovenox, f/u 3-4 weeks

- d. At 7- 8 week f/u obtain ankle XR's, can transition out of boot in to ASO once full wt bearing without assist device for 1 full week, may drive at this point, f/u 4 weeks
 - e. At 12 weeks obtain ankle XR's, transition out of ASO if doing well, progress physical activity, f/u 4 weeks
 - f. At 16 weeks obtain ankle XR's, f/u 8 weeks
 - g. At 6 months obtain ankle XR's, f/u 3 months
 - h. At 9 months obtain ankle XR's, f/u 3 months
 - i. At 12 months obtain ankle XR's, f/u annually with XR's
16. ORIF Lisfranc Injury
- a. Splint until 2 week f/u appt → Change to cast if swelling allows (**CAST IN NEUTRAL**), stitches out, remain NWB, f/u 2 weeks
 - b. At 4 week f/u, obtain foot XR's, change to another cast, remain NWB, f/u 2 weeks
 - c. At 6-7 weeks change to short boot, ace/tubigrip for swelling, begin progressive WB, may shower, begin PT, f/u 3-4 weeks
 - d. At 9-10 weeks f/u, obtain foot XR's, transition to carbon fiber insert once has been full WB in boot for 1 full week, if hardware at 1st TMT schedule for hardware removal at/after 12 week mark
17. Compartment Fasciotomies
- a. Patient is full WB immediately after surgery, begin PT at POD # 3/4
 - b. At 2 weeks cut monocryl suture ends and change steri-strips, continue PT, f/u 3 weeks
 - c. At 5 weeks check wound, increase activity bike/elliptical/run-walk program, f/u 4 weeks
18. Hammer Toe Repair
- a. At 2 weeks stitches out; if k-wires in place re-dress with tape/gauze to cover pin tips, strap toes down with tenoplast; if implant begin strap toes down with tweener gauze and tenoplast tape; WB in hard sole shoe, f/u 2 weeks
 - b. At 4 weeks foot XR's, if k-wires will pull and begin taping toes down with athletic tape; if implant then begin taping as well; may wean out of hard sole shoe after 6 week mark to wide toe box sneaker, f/u 4 weeks
 - c. At 8 weeks repeat foot XR's, may stop taping if clinically doing well, continue wide toe box shoes, f/u 4 weeks
 - d. At 12 weeks repeat XR's, transition to normal shoe wear
19. Weil Metatarsal Osteotomies
- a. At 2 weeks stitches out, strap toes down with gauze and tenoplast, f/u 2 weeks
 - b. At 4 weeks obtain foot XR's, begin taping toes down with ½ inch athletic tape, continue hard sole shoe, f/u 2 weeks
 - c. At 6 weeks transition out of hard sole shoe, have patient tape for 2 more weeks, f/u 4 weeks
 - d. At 10 weeks obtain foot XR's, may begin progressive impact athletic activity
- 20.