



Post Surgery Instructions *Ankle Replacement*

Individual patient factors and adjunctive procedures performed during the operation will be considered in developing a patient specific recovery protocol. This protocol should serve as a guideline.

General Treatment Facts

- You will be in a plaster splint (soft cast) for the first 2 weeks after surgery.
- If the incisions are healed, ankle motion exercises will start 2 weeks after surgery.
- No weight bearing on the ankle for the first 4 weeks after surgery.
- If you have surgery on your right ankle, you will not be able to drive for 6 weeks.

Special Precautions

- If you suddenly develop increasing pain, swelling, redness, and/or warmth in the ankle that does not respond to rest, let us know. This can be a sign of infection, blood clot, or fracture.
- Chest pain, difficulty breathing, and/or shortness of breath requires immediate medical attention by the physician or emergency department. This can be a traveling blood clot, pneumonia, or heart attack.
- Infections elsewhere in your body must be treated, as they can travel to the ankle.
- Occasionally, additional procedures may be needed to treat wound problems, infections, fractures, painful hardware, impingement, nerve issues, soft tissue tightness or looseness, or address alignment or other joint conditions.

Post Surgery Course

Day 1

- The ankle will be wrapped in a plaster splint with lots of padding and an elastic bandage. If for any reason your splint is uncomfortable or too tight, remove the ace wrap, loosen padding, and re-apply to your comfort level. Leave the deeper dressing on the skin intact.
- NO weight bearing on the operative ankle is allowed.
- It is important to ice and elevate the foot, take pain medication, and rest as needed.
- Do not get the splint wet.
- Movement of the knees, hips, other ankle and upper extremities are encouraged and recommended at least five times a day for 20 minutes at a time to reduce the risk of blood clot.

Day 4

- Pain should improve after the 3rd day. If your pain has worsened after day 3 or you have a fever and/or chills, please call the office.
- Wiggle toes in splint as tolerated.
- Perform isometric calf contractions.

- Continue to work the knee, hip, and upper extremities.

2 weeks (approximately)

- First post-operative visit.
- Your splint will be removed and the sutures will be removed.
- You will be placed in a boot with your ankle in a neutral position to control range of motion during early walking.
- Perform basic flexion and extension range of motion ankle exercises.
- Avoid twisting the ankle.
- If the incision is healing well, you may begin to get the ankle wet in the shower 2-3 days after your post-operative visit.
- If you notice increasing pain, redness, swelling, or leaking of the wound call our office immediately.

3 weeks

- When moving around, maintain no weight on the ankle and use the boot with crutches, walker, knee scooter or wheelchair.
- If the incision is healed, you may submerge the ankle under water.
- Gentle exercise on a stationary bike may be permitted in the boot.

4 weeks

- May progress weight bearing in the boot to full weight bearing as tolerated. Add 20 lbs. every other day as tolerated until you are full weight bearing. Use crutches for added support.
- Wean off of the crutches or Roll-A-Bout as tolerated once full weight bearing in the boot.
- Continue to avoid twisting of the ankle.

6 weeks

- Wean out of the boot as tolerated over the next 1-2 weeks.
- You may be given a lace up ankle brace to wear during long periods of walking and exercise.

3 months

- Avoid walking on uneven or rocky terrain.
- Exercise on a stationary bike or elliptical is permitted without the boot brace.
- Continue increasing your activity as tolerated.

6 months - 2 years

- Follow up with Dr. Dekker every 6 months for new x-rays.