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# Post Surgery Instructions Peroneal Tendon Repair, Groove Deepening

## **General Facts**

- The goal of this surgery is to alleviate pain and return you to full strength in the shortest amount of time.
- This surgery will repair the torn or partially torn peroneal tendon(s) and may involve deepening the bony groove in which the tendons glide.
- You will NOT be allowed to weight bear on the operative ankle for 4 weeks after surgery.
- You will be in a plaster splint for the first 2 weeks after surgery.
- No sports involving cutting (racquetball, soccer, tennis, etc.), ballistic movements, or strenuous running will be permitted for 3-4 months.

# **Post Surgery Course**

# Day 1

- The foot will be wrapped in a plaster splint with lots of padding. If for any reason your splint is uncomfortable or too tight, remove the ace wrap, loosen padding, and re-apply to your comfort level.
- It is important to ice and elevate the foot, take pain medication, and rest as needed.
- No weight bearing is allowed on the operative ankle.
- Do not get the ankle or splint wet.

#### Day 4

- Pain should improve after the 3<sup>rd</sup> 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.
- Work the knee, hip, and upper extremities.

### 2 weeks (approximately)

- First post-operative visit.
- Your splint will be taken off and your sutures will be removed.
- You will be placed in a boot with your ankle in a neutral to prevent a large amount of range of motion.
- AVOID active eversion and passive inversion type ankle movements.
- If the incision is healing well, you may get the ankle wet in the shower 2-3 days after your post-operative visit.

#### 3 weeks

- If the incision in healed, you may submerge the ankle under water.
- Gentle exercise on a stationary bike is permitted while wearing the boot.
- May begin gentle sub-maximal peroneal isometrics.
- May work out in pool without kicking or push off (i.e. water walking).

#### 4 weeks

Progress weight bearing to full weight bearing as tolerated in the boot. Add 20 lbs of weight to the ankle every
other day until you are full weight bearing.

#### 6 weeks

- Weight bearing as tolerated in the boot permitted.
- Start physical therapy (may vary).
- You may be given a lace up ankle brace to wear during long periods of walking and exercise.
- Avoid walking on uneven or rocky terrain.

# 8 weeks

- Wean out of boot and into a supportive tennis shoe.
- Light jogging and other exercise activities, such as squatting and weight-lifting, are permitted.
- Continue to increase your activity as tolerated.
- Balance/proprioception.
- Stationary bike with added resistance.

#### 10 weeks

- Open chain strengthening PF/DF, eversion to neutral.
- Balance/proprioception exercises on level surface.
- Gait training.

# 3 months

Begin plyometric drills starting front to back & progressing to lateral movements.

#### 14 weeks

- Continued gait/jogging training.
- Kicking and plantar flexion in pool program.

#### 4 months

- Cutting activities introduced.
- Progressive closed chain kinetic program, increasing intensity to higher level exercises incorporating proprioceptive challenges.
- · Agilities.
- Progressive absorption/agility/running progression.
- Improve endurance.