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Postoperative Recovery Protocols

1. Total Ankle Replacement (TAR)

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks (The Healing Phase): Strictly non-weight-bearing (NWB) or touch-down weight-bearing in a metal stirrup splint or heavy cast. Rest, ice behind the ankle, and keep the leg elevated above heart level 80% of the day to minimize swelling.

2-4 Weeks (Transition Phase): Sutures removed. Transition to weight-bearing as tolerated (WBAT) in a tall CAM boot. Begin gentle ROM exercises if cleared.

4-8 Weeks (Rehabilitation Phase): Progress to full weight-bearing inside the boot. Formal physical therapy begins.

8-12+ Weeks (Return to Life): Transition to supportive athletic shoes. Normal low-impact daily activities resume.

2. Bunion Correction (Hallux Valgus Osteotomy)

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: From day one, weight-bearing as tolerated using the provided post-operative shoe and crutches for balance. Keep the foot elevated above the heart to prevent swelling.

2-6 Weeks: Sutures are removed. Transition to normal, wide-toe box shoes between week 2 and 6.

6-8 Weeks: Bone healing confirmed via X-ray. Physical therapy or home exercises begin to restore big toe range of motion.

8-12+ Weeks: Gradual return to higher impact activities.

3. Lateral Ankle Ligament Reconstruction (Brostrom)

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: Strictly NWB in a surgical splint or cast. Strict elevation.

2-4 Weeks: Sutures removed. Transition to partial weight-bearing in a walking boot using crutches.

4-6 Weeks: Progress to full weight-bearing in the boot. Avoid twisting movements.

6-12 Weeks: Begin formal physical therapy starting exactly at week 6, focusing on proprioception and peroneal strengthening. Transition to an ankle brace in standard shoes.

4. Achilles Tendon Repair

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: NWB in a cast/splint with toes pointing down to protect the tendon.

2-6 Weeks: Transition to a walking boot with heel wedges. Gradual partial weight-bearing. Remove wedges as directed.

6-12 Weeks: Full weight-bearing. Begin formal physical therapy. Transition to shoes with a heel lift.

4-6 Months: Gradual return to sports.

5. First MTP Joint Fusion (Big Toe Fusion)

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: Heel weight-bearing only in a stiff-soled post-op shoe.

2-6 Weeks: WBAT in the post-op shoe. No barefoot walking.

6-10 Weeks: Transition to a rocker-bottom shoe or supportive sneaker once X-rays confirm healing.

10+ Weeks: Resume normal walking.

6. Morton's Neuroma Excision

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: WBAT in a stiff-soled post-op shoe. Limit walking to essential activities.

2-4 Weeks: Sutures removed. Transition to wide, comfortable athletic shoes.

4-6 Weeks: Begin scar massage. Gradual return to normal activities.

7. Plantar Fascia Release

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: WBAT in a surgical boot with crutches for comfort. Elevate when sitting.

2-4 Weeks: Transition to supportive running shoes with arch support. Begin gentle calf stretches.

4-8 Weeks: Physical therapy to strengthen intrinsic foot muscles.

8. Ankle Fracture (ORIF)

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0-2 Weeks: Strictly NWB in a splint or cast.

2-6 Weeks: NWB in a removable boot to start early, gentle ankle motion.

6-10 Weeks: Begin partial to full weight-bearing in the boot if X-rays show healing. Start physical therapy.

10+ Weeks: Transition to supportive shoes.

9. Flatfoot Reconstruction (Pes Planus)

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: Strictly NWB in a cast or splint. Strict elevation.

2-6 Weeks: Continue NWB in a cast.

6-10 Weeks: WBAT in a tall CAM boot. Begin physical therapy.

10-14+ Weeks: Transition to regular shoes with custom orthotics.

10. Ankle Arthroscopy

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: Weight-bearing status varies based on joint procedures. Wear provided splint/boot.

2-4 Weeks: Sutures removed. Progress to full weight-bearing in a supportive shoe. Begin active ROM.

4-6 Weeks: Physical therapy and return to normal activities.

11. Subtalar Fusion

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: NWB in a splint. Elevate leg strictly.

2-6 Weeks: NWB in a short leg cast.

6-10 Weeks: Partial to full weight-bearing in a walking boot if X-rays show healing.

10-14 Weeks: Transition into a supportive shoe. Begin physical therapy.

12. Hammer Toe Correction

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: Heel weight-bearing only in a post-op shoe. Keep pin dry and protected.

2-4 Weeks: Continue wearing the post-op shoe.

4-6 Weeks: Pins are removed in the office. Transition to a wide toe-box shoe.

6+ Weeks: Gradual return to regular shoes.

13. Tarsal Tunnel Release

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: NWB in a bulky dressing or splint to protect the nerve.

2-4 Weeks: Sutures removed. Begin partial weight-bearing in a walking boot.

4-8 Weeks: Progress to full weight-bearing. Nerve healing is slow.

14. Cheilectomy (Bone Spur Removal)

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: Heel weight-bearing in a post-op shoe.

2-4 Weeks: Sutures removed. Transition to normal supportive shoes. Begin aggressive big toe range-of-motion exercises.

4-6 Weeks: Return to normal activities.

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15. Triple Arthrodesis

Disclaimer: This is a general protocol for the average patient. Individual plans may change depending on the specific condition and circumstances of the patient.

0-2 Weeks: NWB in a splint. Strict elevation.

2-6 Weeks: NWB in a cast.

6-10 Weeks: WBAT in a tall CAM boot if X-rays confirm healing.

10-14+ Weeks: Transition to regular shoes, often with an ankle brace or orthotic.