

Triple Arthrodesis Ankle Protocol

(subtalar jt., calcanealcuboid jt., and talonavicular jt.)

| Weeks 6-12 | Weeks 12-20 |
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| At Home/Initial Evaluation | Evaluation |
| <ul style="list-style-type: none"> ➤ Pt in a cast/boot - possible PWB - WBAT with crutches per MD instructions. ➤ Assess gait ➤ Assess Hip/Knee AROM ➤ Test Hip Strength ➤ Assess Core Strength | <ul style="list-style-type: none"> ➤ Pt out of cast/boot per MD instructions ➤ AROM/PROM of ankle/foot – non fused joints ➤ Strength of ankle/foot ➤ Edema/incision areas ➤ Gait -WBAT in boot until swelling decreases to get a shoe on. ➤ Assess Balance/proprioception |
| Patient Education | Patient Education |
| <ul style="list-style-type: none"> ➤ Wean from crutches as pain allows/ per MD ➤ Instruct patient with HEP for hip/core strengthening until they return to PT at 12 weeks per MD | <ul style="list-style-type: none"> ➤ Gait WBAT ➤ Edema control and expectations of getting on a shoe. ➤ HEP |
| Therapeutic Exercise | Therapeutic Exercise |
| <ul style="list-style-type: none"> ➤ Hip Strengthening ➤ Core Strengthening | <ul style="list-style-type: none"> ➤ Edema control Start Ankle AROM/PROM all planes ➤ Continued Strengthening Hip/core ➤ Gentle Isometrics to start/ progress to isotonics DF/PF ➤ Start isometrics ankle inversion/eversion-progress to pocketbook exercises for eversion strengthening. ➤ Stationary bike/Nustep ➤ Aquatics if pain prevents progression of exercises. |
| Manual Techniques | Manual Techniques |
| <ul style="list-style-type: none"> ➤ None | <ul style="list-style-type: none"> ➤ STM /scar massage to surgical sites to address edema |
| Modalities | Modalities |
| | <ul style="list-style-type: none"> ➤ As needed for pain control |
| Goals | Goals |
| <ul style="list-style-type: none"> ➤ Restore normal AROM /Strength hip ➤ No pain with ADL's WBAT in cast/boot | <ul style="list-style-type: none"> ➤ Decrease edema to don a supportive shoe. ➤ Functional AROM ankle ➤ Functional strength with ADL's ➤ Pain relief/No pain with ADL's |

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| 20 weeks to discharge |
| Evaluate |
| <ul style="list-style-type: none"> ➤ Strength ankle/LE ➤ Balance ➤ Gait deviations ➤ Return to work |
| Therapeutic Exercise |
| <ul style="list-style-type: none"> ➤ Balance/Proprioception exercises ➤ LE/ ankle Strengthening-closed chain activity ➤ Progression of single leg balance activity/unstable surface ➤ Progression of non- impact cardiovascular fitness ➤ Gait training – normalize gait. |
| Manual Techniques |
| <ul style="list-style-type: none"> ➤ Any as indicated |
| Modalities |
| <ul style="list-style-type: none"> ➤ Any as indicated |
| Goals |
| <ul style="list-style-type: none"> ➤ Functional AROM ➤ Functional strength ➤ Normalize gait - may need a rocker sole shoe. |

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Created 10/18/17