



Post-Operative Protocol

Lateral ligament reconstruction

Please note these are general guidelines and may change for various reasons on a case-by-case basis.

Please use extreme caution when using assistive devices such as crutches, walker or roll-a-bout. You can fall and injure something else!

If at any time after surgery you notice increasing pain, redness, drainage from the incision, fevers or chills, please contact Dr. Kestner's office (843) 572-2663

Do not use tobacco products!! It greatly reduces healing and increases the risk of complications.

Week 0-2 (Phase 0)

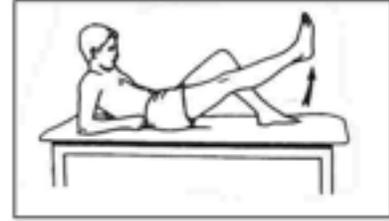
-Weight bearing: No weight bearing. Use crutches/walker/Roll-A-Bout as necessary.

-Dressing/wound care: Keep splint on at all times

-Activity: straight leg raises, toe curls.

Straight leg lift - With the brace on, tighten the quadriceps muscles so that the knee is flat, straight and fully extended.

Try to raise the entire leg up off the floor or bed. If you are able to do so keeping the knee straight, raise the leg to about 45 degrees, pause one second and then lower slowly. Repeat 20 times, twice a day.



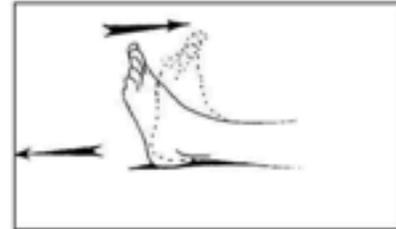
Week 2–6 (phase 1: gentle range-of-motion)

-Weight bearing: May begin very mild partial weight bearing week 4 with assistance of crutches/walker only while using CAM boot. You should wear the CAM boot at all times including while sleeping. Continue to use at least one crutch, however, for support.

-Wound care: You may get wet very briefly to wash. Keep clean and dry. Report any increasing redness or drainage. You may start gentle massage to skin around the incision starting week 4.

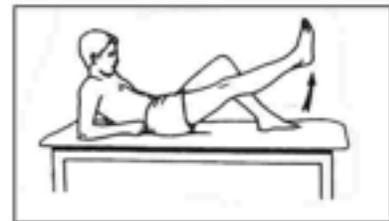
-Activity: Straight leg lift, standing hamstring curl. No ankle motion until week 4, then may begin gentle ankle flexion-extension only, no inversion/eversion.

Ankle flexion-extension - Remove the brace. Gently move the foot in an up and down motion. Do not try to force motion through pain, but move the foot up and down through the range of motion that is pain free. Repeat 20 times, three times a day.



Straight leg lift - With the brace on, tighten the quadriceps muscles so that the knee is flat, straight and fully extended.

Try to raise the entire leg up off the floor or bed. If you are able to do so keeping the knee straight, raise the leg to about 45 degrees, pause one second and then lower slowly. Repeat 20 times, twice a day.



Standing Hamstring curl - With the brace on, stand facing a table which you will use for balance and support. While standing on the unoperated leg bend the knee of the operated side and raise the heel toward the buttock. Hold this flexed position for one second. Slowly lower the foot back to the floor. Keep the thighs aligned as illustrated. Repeat 20 times.



Week 6–10 (phase 2: initiate strengthening)

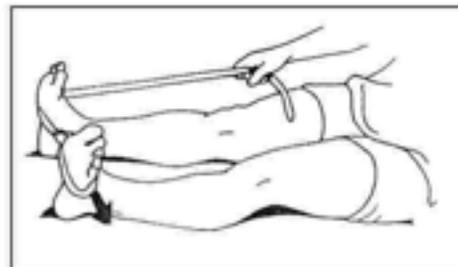
Weight bearing: Weight bearing as tolerated in CAM boot. May begin to wean boot week 8. Wear lace-up brace when not in boot.

Wound care: Continue daily gentle massage to incision site and surrounding skin and tissue. Call if any increasing redness or drainage.

Activity: Full ankle range of motion including inversion and eversion. May begin stationary bike and elliptical with the lace-up brace.

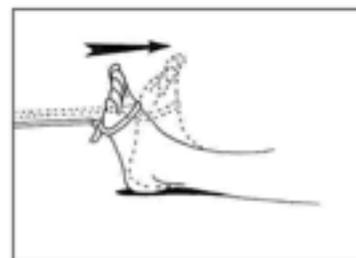
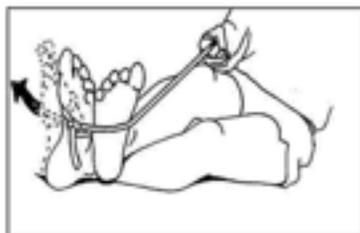
Ankle Eversion

With tubing anchored around uninvolved foot, slowly turn injured foot outward. Repeat 30 times.



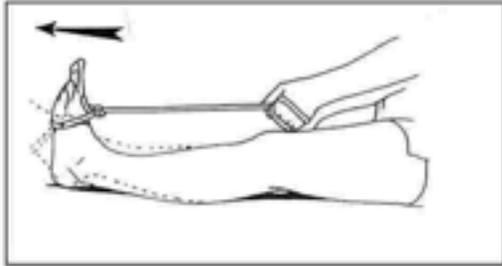
Ankle Dorsiflexion

With tubing anchored on solid object, pull foot toward you knee. Repeat 30 times.



Ankle Inversion

Cross legs with the operated foot underneath. With tubing anchored around uninvolved foot, slowly turn injured foot inward. Repeat 30 times.



Ankle Plantar Flexion

With tubing around foot, press foot down. Repeat 30 times. This is the most important of the exercises.

Week 10–16 (phase 3: advanced strengthening)

Weight bearing: May begin to wean the lace-up brace for normal activities as strength returns.

Wound care: Continue daily gentle massage to incision site and surrounding skin and tissue. Call if any increasing redness or drainage.

Activity: Begin more advanced strengthening and proprioception. May return to impact activities (running) week 10. Should wear lace-up brace for any impact activity.

Week 16+ (phase 4: return to sport)

Weight bearing: full weight bearing in regular shoe.

Activity: Progressive running. Progressive agility and proprioception.

Advancement to plyometrics. Continue with lace up brace for any at-risk activity for at least 6 months.

www.scsportsmedicine.com