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**Arthroscopic Talocrural Loose Body Removal  
 and Debridement  
 \*Osteochondral Defect (OCD)  
 Post-op Rehabilitation Guidelines**

These guidelines are intended for Compensation Services and Clinical Staff as general guides for the direction, timing and expected outcomes for post-surgical rehabilitation clients seen through the Visiting Specialists Clinic. Deviations from these guidelines may occur based on the specifics of individual cases and surgeon preference.

**Procedure: Arthroscopic Talocrural Loose Body Removal and Debridement  
 \*Osteochondral Defect (OCD)**

Phases and Expected Time Lines	Rehabilitation Guidelines	Goals of the phase	Notes
<b>Week 1-2</b>	<ul style="list-style-type: none"> <li>NWB in boot 3-5 days</li> <li>WB in boot as tolerated 3+ days</li> <li>elevate to control swelling</li> <li>AROM hip and knee</li> <li>sutures dissolved/removed @ 10 days</li> <li>ADL</li> </ul>	<ul style="list-style-type: none"> <li>control pain and swelling</li> <li>ADL</li> </ul>	
<b>Week 3-6</b>	<ul style="list-style-type: none"> <li>wean from boot as tolerated</li> <li>AROM in all directions:               <ul style="list-style-type: none"> <li>NWB</li> <li>WB ROM as tolerated</li> </ul> </li> <li>massage for edema</li> <li>strengthening               <ul style="list-style-type: none"> <li>ankle                   <ul style="list-style-type: none"> <li>theraband resisted training in all directions</li> <li>progress to WB exercises as tolerated                       <ul style="list-style-type: none"> <li>toe raises</li> <li>inversion/eversion on wb or fitter</li> </ul> </li> <li>hip                       <ul style="list-style-type: none"> <li>against resistance in standing</li> </ul> </li> <li>knee                       <ul style="list-style-type: none"> <li>wall sits, squats as tolerated</li> </ul> </li> <li>core                       <ul style="list-style-type: none"> <li>activate abdominals</li> <li>bridging</li> <li>standing: upper extremity diagonals</li> <li>use core when on wb</li> </ul> </li> </ul> </li> <li>gait retraining</li> <li>manual mobilization if required</li> </ul> </li></ul>	<ul style="list-style-type: none"> <li>full ROM</li> <li>normal gait</li> </ul>	
<b>*If OCD present</b>	<ul style="list-style-type: none"> <li>4 weeks NWB</li> <li>walker boot</li> </ul>		
<b>Week 6+</b>	<ul style="list-style-type: none"> <li>full activity as tolerated</li> <li>proprioception retraining</li> <li>dynamic training: hopping skipping running</li> <li>progress to plyometrics</li> <li>work or sport specific retraining</li> </ul>	<ul style="list-style-type: none"> <li>full strength and endurance</li> <li>good proprioception</li> <li>return to work +/- activity</li> </ul>	

**Legend of Abbreviations:**

ADL	activities of daily living	WB ROM	weight bearing range of motion
AROM	active range of motion	WB	weight bearing
NWB	non weight bearing	wb	wobble board
OCD	osteochondral defect		

**Developed by:**

The post-operative rehabilitation guidelines are based on protocols identified from an extensive review of the current surgical and rehabilitation literature along with VSC and community orthopaedic surgeon, physical medicine specialist, and sports medicine physician input. The Orthopaedic Section of the BCMA has reviewed these guidelines during their development and has been helpful in that process. Representatives from the Physiotherapy Association of B.C. have also reviewed these guidelines.