

Ankle lateral ligament reconstruction



These guidelines were developed in collaboration with the New Zealand Orthopaedic Association (NZOA). The recommended return-to-work timeframes reflect the expert clinical opinion of the New Zealand Foot and Ankle Society.

Overview

This document provides guidelines for recovery and return to work for patients who have undergone ankle lateral ligament reconstruction.

Code	Procedure Description
AFT199	Ankle Lateral Ligament Reconstruction – Simple. Includes Brostrum / Gould

For advice on determining the correct medical certification for your patient’s injury, please see the Return-to-work guidelines appendix: ACC certification advice.

Expected recovery timeline

The expected recovery timeline varies depending on the individual patient, the specifics of the surgery, and the work type.

The following are general guidelines. The patient’s ability and tolerance to perform work tasks should be considered as well as appropriate modifications and restrictions. This will inform the patient, employer and ACC of the suitability for returning to work, either at full, light or alternative duties.

There is strong evidence that a safe and timely return to work results in better patient outcomes. Early return to work with modified duties/hours should be encouraged when appropriate. ACC can provide support to help your patient return to work safely.

Return-to-work recommendations

Work type classification (as per ACC45 claim form):

Work type	Description	Example
Sedentary	Brief standing and walking	Office, desk worker
Light	Mainly standing and walking	Retail, hospitality worker
Medium	Often lifting 5kg plus	Courier, warehouse worker
Heavy	Often lifting 9kg plus	Builder, mechanic, farm worker
Very Heavy	Often lifting 22kg plus	Firefighter, forestry worker

Expected full return-to-work timeframes

The timeframes below are for **normative full return to work (FRTW)**. Returning to the workplace should commence as soon as it is safe to do so, even in a modified capacity or with alternative duties.

Work type	Timeframe for FRTW	Considerations
Sedentary	2-6 weeks	Modified hours, transport assistance. Elevate leg at work.
Light	8-12 weeks	Modified hours and duties. Graduated return to work duties.
Medium	12-16 weeks	
Heavy	16-20 weeks	
Very Heavy	20+ weeks	

Restrictions and/or modifications

Activity	Expected timeframe	Considerations
Driving	6-8 weeks	Manual vs automatic car. As pain and movement allows
Managing uneven terrain	8-12+ weeks	Access to workplace and workplace demands that don't involve heavy lifting
Workplace footwear requirements	From 12-20+ weeks	Requirement for ankle stirrup. Able to wear steel capped shoes or other work-specific footwear

Flags for delayed recovery

Signs of delayed recovery can include:

- Significant swelling
- Persistent pain
- Persistent ankle instability
- Decreased ankle range of motion
- Weak secondary ankle stabilisers (peroneal muscles)
- Failure to perform one-leg stance test

If you think the patient is going to be outside the expected recovery timeframes, please let ACC know.

ACC can help your patient return to work by providing:

- vocational rehabilitation programmes
- specialised equipment and technology to support recovery at work
- assistance with transport to and from work
- occupational workstation assessments
- functional assessments
- specialised vocational medical services

For more information

Visit our website or call us on **0800 222 070**.

We're here to help.

