Returning to Work and Activity

After Foot & Ankle Injury or Surgery

Patient Information Sheet

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Recovery after a foot or ankle injury or operation is gradual, not immediate. This sheet explains how to build activities and work duties back up safely, and how to tell the difference between normal recovery discomfort and a sign that you're progressing too fast.

1. Graduated Return — Building Up in Stages

Your foot and ankle need time to adapt as healing tissue is asked to take on more load. Rather than returning to full activity in one step, work back up gradually:

Stage 1 — Protected function. Basic daily movement within the limits your surgeon or physiotherapist has set (weight-bearing status, boot/brace use, etc).

Stage 2 — Light activity. Short periods of standing, walking, or light duties, increasing gradually as symptoms allow.

Stage 3 — Moderate activity. Longer periods on your feet, more complex movements, most normal daily and light work tasks.

Stage 4 — Full activity. Return to full work duties, sport, and unrestricted activity.

Each stage should feel comfortable and manageable before moving to the next. There is no fixed timeframe that suits everyone — your own pace is guided by how your foot or ankle responds, not by a calendar.

2. Constant Reassessment — Check In With Your Symptoms

Before, during, and after any activity, get in the habit of asking yourself: how does it feel *during* the activity, in the few hours *afterwards*, and the *next morning*?

This ongoing check-in is more useful than any generic recovery timeline, because it reflects what your tissues are actually telling you in real time.

> **Key principle:** Some discomfort with new activity is a normal and expected part of recovery. It is the **duration and trend** of any pain that matters most — brief, settling discomfort is usually fine to work through; pain that is significant or drags on should prompt you to ease back.

3. What's Normal vs. What's a Signal to Slow Down

Usually OK to continue	Signal to rest more / delay
Mild aching or stiffness during activity that eases with rest	Sharp, significant, or worsening pain during the activity
Some swelling by the end of the day that settles overnight	Pain that persists well beyond the activity itself (days, not hours)
Discomfort that improves within a day or so of reducing activity	Increasing swelling, redness, or warmth that doesn't settle with rest
Feeling “tired” or “worked” in the foot/ankle, without sharp pain	Discomfort that is getting worse each time you repeat the activity

4. Worked Examples

Activity	Reasonable approach	When to pull back
Return to desk-based work	Start with shorter days or a supported seated setup; elevate the foot at breaks.	Increasing swelling by mid-afternoon that isn't better by the next morning.
Return to standing/walking-based work	Begin with reduced hours or more frequent breaks; build up standing/walking time every few days.	Pain increasing across the shift, or discomfort still present the next morning that wasn't there before.
Walking for exercise	Increase distance or pace in small steps, e.g. every 3–7 days if tolerated.	Aching that lingers into the next day — drop back to the previous distance for another week before retrying.
Driving	Only once reaction times and comfort allow safe control and emergency braking (discuss timing with your surgeon).	Any hesitation, pain, or delayed reaction pressing the pedals.
Return to sport/running	Gradual reintroduction — shorter, lower-intensity sessions first, increasing by small increments.	Pain during the session that doesn't ease quickly, or soreness still present 24–48 hours later.

5. If an Activity Causes Ongoing Discomfort

If you try reintroducing an activity and it causes more than mild, settling discomfort: **step back** to the previous, more comfortable level for a few more days; **rest and allow settling** before trying again — this is a normal part of pacing recovery, not a setback; then **reintroduce later**, at a slightly lower level than last time, and progress a little more slowly.

If pain is severe, or associated with new swelling, redness, wound concerns, fevers, or inability to bear weight, contact the practice rather than waiting.

6. Summary

- Progress activity and work duties in **stages**, not all at once.
- **Reassess constantly** — during, after, and the next morning.
- Mild, settling discomfort is **normal** and can usually be worked through.
- Pain that is **significant or persists** beyond the activity is a sign to ease back, rest, and try again another day at a lower level.
- There is no single “correct” timeline — your own symptom response is the best guide.

This information is general in nature and does not replace individual advice from your surgeon or treating team. Your specific return-to-activity plan should be discussed and tailored to your procedure, occupation, and recovery progress.