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Accelerated Ankle Fracture Post-op Rehabilitation Protocol

This protocol provides you with general guidelines for initial stage and progression of rehabilitation according to specified time frames, related tissue tolerance and directional preference of movement. Specific changes in the program will be made by the physician as appropriate for the individual patient.

REMEMBER: It can take up to a year to make a full recovery, and it is not unusual to have intermittent pains and aches during that time!

General Guidelines:

1. Increase Dorsiflexion - to restore gait
2. Monitor PAIN and SWELLING → If either increase, modify rehab, RICE, Ankle Pumps, E-stim if Needed

Phase I (up to 6 weeks s/p ORIF):

Goals:

PWB involved LE with or without one crutch

DF to neutral

Control edema

1. At 4-6 weeks s/p, initiate ttwb to full WB by 6 weeks as tolerated with crutches
2. AROM for ankle, subtalar, midtarsal joints within pain tolerance
 - ankle pumps
 - inversion / eversion
 - toe crunches
 - ankle alphabet
3. Towel stretch for DF
4. E-stim with elevation for edema
5. Retrograde massage
6. Wean to on crutch and PWB as 6 weeks s/p approaches

Phase II (6-8 weeks s/p ORIF):

Goals:

FWB involved LE

> 50% AROM all planes involved ankle and subtalar joint

Control edema

Minimize complications

Maintain optimal bone and soft tissue healing environment

1. Gait training level surfaces with proper tibia advancement, quads activation, symmetrical weight-bearing
2. Stationary bike
3. Grade 1-2 joint mobilizations ankle and subtalar joints
4. PROM into restricted ranges
5. Retrograde massage for edema
6. Continue DF stretches
7. Theraband DF/PF/inv/ev in open chain
8. Seated heel raise and BAPS
9. Manual resistance in open chain for DF/PF/inv/ev and multiplanar motions
10. Leg extension
11. Leg Curl
12. Leg Press
13. Wall stretch with knee flexed and extended
14. When FWB: Standing BAPS 2 legs, Standing heel raise, Minisquat, One leg balance on floor

Phase III (>8 weeks s/p ORIF):

Goals:

Full ankle and subtalar AROM, flexibility

Restore gait on level surfaces, hills, stairs

Full return to function

1. CKC TheraBand exercises (stand on involved leg and perform hip flex/ext/abd/add with uninvolved LE)
2. BAPS knees bent eyes closed and one leg
3. Storking, Eyes open and eyes closed, Floor mat
4. Standing balance progress floor mat eyes open and closed, level with incline and decline
with knee flex/ext
5. Continue phase 2 ex's
6. Stairmaster
7. Agility ex's → Karaoke, Lateral shuffles, Tandem Walking
8. Continue gait training
9. Continue modalities prn
10. Sport and Job - specific training