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Spirit Lake

Spencer

Lateral Ankle Reconstruction/Internal Brace Rehab Protocol

General Notes: Use of an internal brace allows for rehabilitation to progress more rapidly with less risk for elongation of the repair. The following protocol serves as a guide understanding that all patients will not progress according to prescribe timelines.

Phase I

Goals: Wound healing and edema control

Day 1-14:

1. Foot wrapped in bulky dressing with splint/ cam boot preventing movement
2. Take pain medication, elevate
3. Expect numbness and leg for 4-72 hours depending on the type of anesthesia used
4. Wiggle toes as able
5. Hanging operative extremity down for 1 minute every hour while awake then return to elevated position to encourage circulation
6. Non weightbearing with crutches

Week 2-4:

1. First follow up in office, dressing is changed. Sutures removed when wound is healed.
2. Progress weightbearing as tolerated with the use of cam boot and crutches as needed
3. Full weightbearing in the boot at about week 3 without use of crutches.
4. Start plantarflexion(downward movement of the foot) and dorsiflexion(upward movement of the foot) motion 4-5 times per day out of the brace

Phase II

Goals: Improve AROM and proprioception, restored gait

Week 4-7

1. Initiate physical therapy
2. Gait training
3. Progress to lace up ankle brace
4. Gentle exercises on stationary bike

5. Continued active dorsiflexion and plantarflexion exercise
6. Avoid inversion and eversion activity
7. Towel curls with 20 plantarflexion
8. Standing hamstring curls
9. Proprioception training
10. Upper body conditioning
11. Start scar massage if needed and wound fully healed
12. Initiate resistance bands for dorsiflexion/ plantar flexion
13. Initiate toe and heel raises
14. Leg press-avoid dorsiflexion past neutral

Phase III

Goals: Restore strength, motion and proprioception. Improved cardio

Week 6-8 (May overlap timeframe of phase II – May Advance as patient tolerates)

1. May start pool activities if available
2. Advance graduated resistance exercises to involve all planes
3. Advance AROM activities to include inversion and eversion
4. Advance proprioception/ balance exercises
5. Advance cardiovascular exercises (cycling, StairMaster, elliptical)
6. May begin walk to run program when tolerating elliptical

Week 8-12

1. Advance cardio activities to light running
2. Initiate early plyometric and early sport specific drills
3. Continue to retrain strength, power, endurance
4. Continue proprioception
5. Plyometric training and full weightlifting
6. Return to sport when functional progression passed