

General Principles: The total length of rehabilitation will vary depending on the following factors: severity or acuteness of injury, age, health or personal goals of patient.

PHASE I

Weeks 0 – 2:

- NON weight bearing in splint with ankle in neutral position
- Modalities
 - 1. Ice as needed
 - 2. Compression and elevation as needed to control pain and to control swelling
- Orthotics
 - 1. Ankle brace per physician orders to be used for exercises and activities of daily living (ADL's).
 - 2. Less stable injuries may require a walking boot per physician.

PHASE II

Weeks 2 - 6:

- NON weight bearing in Fixed Ankle Walker
- At 2 weeks, splint removed, wound checked, and placed into a functional brace
- Modalities
 - Continue only as needed. Manual
 - Soft tissue mobilization with and without tool assist to help promote surrounding tissue release
 - Gentle joint mobilization for ROM assist
- Orthotics
 - Fixed ankle walker
 - Ankle brace for rehabilitation and sport/work activities.
- Exercises
 - Passive range of motion: Towel stretch for gastrocnemius/soleus.
 - Active range of motion: Elevated ankle pumps, ankle alphabet,

seated BAPS board and toe curling.

- Ankle Pump: Point toe, then pull back toward you as hard as possible
- Towel Gather: Spread out towel on floor. Pull toward you with toes until towel is fully gathered around foot. Repeat 10-15 times
- Ball Pick-up: Grasp ball between 1st and 2nd toes; pick up and transfer to opposite pile. Repeat 15 times
- Towel Stretches: Sit on a hard surface with your injured leg stretched out in front of you. (a). Loop towel around foot and pull back to get a good stretch for 20 seconds and relax for 20seconds (b). Pull towel so that foot turns to side; hold for 20 seconds, then pull to the other side; hold for 20 seconds. (c). Bend leg at 90 degree angle and loop towel around forefoot. With leg bent pull foot back for 20 seconds and relax for 20 seconds
- Ankle range of motion: You can do this exercise sitting or lying down. Pretend you are writing each

PHASE III

- Weight bearing AS TOLERATED in boot after 6 weeks if healing on xray
- Manual
 - Soft tissue mobilization with and without tool assist to help promote surrounding tissue release
 - Gentle joint mobilizations for ROM assist
- Orthotics
 - Continue as in Phase II.

Weeks 6-8:

- May begin resistive inversion/eversion exercises as appropriate
- Progressive resistive exercises as tolerated.

Weeks 8-10:

- Boot discontinued at 8 weeks
- Passive / active dorsiflexion and plantar flexion stretch
- Inversion / Eversion ROM exercises
- Begin dorsiflexion and plantar flexion isometrics and progress to isotonic
- Can start riding a stationary bicycle. Elliptical/ARC Trainer
- Should be walking on a treadmill with wean up to 3.5 mph

Weeks 10-12:

- Advance strengthening
- Can begin jogging, stairmaster
- Add isokinetics
- Increase strengthening, endurance, proprioception, flexibility exercise
- Initiate sport specific drills with gradual return to athletics at or after 16 weeks