

Ankle Ligament Reconstruction 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!

Phase I: Weeks 1-2

Goals

- Rest and recovery from surgery
- Control swelling and pain
- Increase ADL (Activities of daily living)

Guidelines

- PWB (partial weight bearing) to FWB (full weight bearing) in cast.
- Sutures removed @ 10 -16 days. Placed in a CAM boot for another 4 weeks
- Education: surgery, healing time, anatomy, rehab phases
- Encourage ADL
- Rest and elevation to control swelling
- Control pain
- Hip and knee AROM

Phase II: Weeks 3-6

Goals

- Allow healing while maintaining upper body, core, hip/knee strength and ROM
- May use Game Ready or similar device for swelling

Guidelines

- WB as tolerated with or without crutches in CAM Boot
- Massage for swelling
- Elevation to control swelling
- @ 6 weeks: after being removed from the boot: begin gentle AROM (Active range of motion) ankle PF (plantar flexion)/DF (dorsiflexion)/eversion and toe flexion/extension
- Stationary bicycle with boot

Phase II: Weeks 3-6 (cont.)

- Core exercises
 - Abdominal recruitment
 - Bridging on ball
 - Ball reach
 - Arm pulleys or theraband using diagonal patterns
- Hip: AROM
 - Strength: clam, sidelift, glut max, SLR (straight leg raise)
- Knee: AROM
 - Strength: SLR, theraband press or leg machine
- Stretching: glut max, glut med, piriformis, rectus femoris, hamstrings

Phase III: Weeks 7-10

*****WILL BE DETERMINED WITH YOUR PHYSICAL THERAPIST*****

Goals

- WB with pain and swelling controlled

Guidelines

- Will be provided with an ankle brace and can start rehab
- Stationary bicycle
- AROM: begin inversion/eversion
 - Continue with ankle PF/DF, toe flex/extension
- Continue with
 - Core exercises – progress to standing exercises
 - Hip strength exercises
 - Knee strength exercises
- Manual mobilization to joints not part of ligament reconstruction

Phase IV: Week 11-12

Goals

- Full ROM

Guidelines

- In regular shoe
- Still wearing the ankle brace
- Control swelling +/- pain with elevation or modalities as required
- AROM in WB
- Manual mobilization as required
- Muscle stimulation
 - Intrinsic
 - Invertors/evertors if required
- Gait training
- Continue strengthening core, hips and knees
- Proprioceptive training: single leg stance on even surface

Phase V: Week 13-16

Goals

- Full ROM in WB
- Good single leg balance
- Near full strength lower extremity

Guidelines

- Still to use the ankle brace for certain sport specific activities (ie: basketball)
- Proprioceptive training
 - Single leg stance on even surface with resistance to arms or WB leg
 - Double leg stance on wobble board (wb), Sissel, fitter
 - Single leg wb, Sissel, fitter with resistance to arms or NWB leg
- Strength
 - Toe raises, lunges, squats
 - Hopping, skipping, running @ 14+ weeks
 - Manual mobilizations if required

Phase VI: Week 16+

Goals

- Full functional return to work +/- activity

Guidelines

- Continue to build endurance
- Work specific or activity specific training
- Plyometric training

This rehab protocol was developed and authorized for use by J. Chris Coetzee, MD and Larry Nilsson, PA-C.

Burnsville
1000 W 140th St, #201, Burnsville MN 55337
P: 952-808-3000 | F: 952-808-3001

Edina - Crosstown
4010 W 65th St, Edina, MN 55435
P: 952-456-7000 | F: 952-832-0477