

## Diabetic Ankle Fracture PT Protocol

### Dr. Kyle Flikkema

	<b>WEIGHT BEARING</b>	<b>ORTHOTIC DEVICES</b>	<b>RANGE OF MOTION</b>	<b>GOALS</b>	<b>EXERCISES</b>
<b>0-2 weeks</b>	NWB	SLS	None	Decrease pain and swelling Wound healing	N/A
<b>2-6 weeks</b>	NWB	SLC	None	Decrease pain and swelling Fracture healing	N/A
<b>6-12 weeks</b>	NWB	CAM Boot	AROM	Decrease pain and swelling Gait training	AROM AAROM Soft tissue mobilization Midfoot joint mobilization No bicycling
<b>12-14 weeks</b>	PWB	CAM Boot	AROM	Improve ROM	Ankle isometrics progressing to open chain isotonic Closed chain exercise including weight machines, weight shifts, seated BAPS Proprioception exercise including SLB, diagonal doming and foot intrinsic strengthening Joint mobilizations to increase talocrural and subtalar ROM
<b>14-16 weeks</b>	WBAT	ASO brace	Full	Improve strength	Progress closed chain exercises – Sportcord, lunges, heel raises etc Dynamic balance progression – mini tramp, SLB on uneven surfaces Advanced proprioception exercises Continue to advance weight machine exercises, stretching, ROM and joint mobilizations
<b>16+ weeks</b>	WBAT	Regular shoe +/- orthotic	Full ROM	Prevent equinus Gait training	Progress walk/jogging program Fit for orthotics if needed Progress previous strengthening, stretching and proprioception exercises Sport and agility drills/tests