R. JOHN ELLIS, JR., M.D. LAWRENCE A. SCHAPER, M.D. MARK G. SMITH, M.D. G. JEFFREY POPHAM, M.D. AKBAR NAWAB, M.D. MICHAEL SALAMON, M.D. MATTHEW PRICE, M.D. DANIEL RUEFF, M.D. SEAN GRIFFIN, M.D. ERIN GISH, P.A.-C KELSI BARNES, P.A.-C



ORTHOPAEDIC SURGERY FRACTURES JOINT REPLACEMENT SPORTS MEDICINE

ANKLE FX ORIF PROTOCOL (Dr. Sean Griffin)

WEEKS 0-6

- Patient will be non weight bearing for 6 weeks.
- The first 2 weeks, the patient will be in the postop dressings and posterior splint.
- At 2 weeks post op, patient will see Dr. Griffin and be placed in a CAM boot.
- Range of motion: AROM in all planes as tolerated by the patient
- Exercises:
 - o Scar care/massage as needed
 - o Gastrocnemius, soleus, hamstring stretches on the table
 - Work up to 4 way ankle vs. Theraband
 - ROM board to restore range of motion and proprioception
 - Alphabet ROM in open and closed chain positions to work on motion and proprioception. Start with eyes open and transition to eyes closed.
- Modalities as needed for pain and swelling.

WEEKS 6-8

- Increase ROM as tolerated, working towards normal ROM.
- At week 6, advance to weight bearing as tolerated
- Patient will wean out of the boot during weeks 8-10
- Exercises:
 - \circ $\;$ Continue with all stretching exercises.
 - Advance to BAPS board.
 - Initiate stationary cycle.
 - Weight bearing exercises: step ups, calf raises, partial squats, SLB training
 - Continue to progress ankle strengthening exercises as tolerated.
- Modalities as needed for pain and swelling.

WEEKS 9-12

- Continue to progress towards full ankle range of motion.
- Exercises:
 - Continue to progress ankle proprioceptive training and strengthening exercises

- Add in hip strengthening exercises if weakness is present.
- May progress from cycle to elliptical as tolerated.
- Modalities as needed for pain and swelling.

<u>MONTHS 3-6</u>

- Advance to jogging program
- Continue to advance hip and ankle strengthening program
- At 16 weeks, may start work or sport specific drills
- Start with bilateral plyometrics and advance to unilateral.