

## Rehabilitation Protocol: Ankle Fracture Repair

### Phase 1 (Weeks 0-2)

- **Weightbearing:** Non-weightbearing on the operative limb
- **Fracture Boot:** Worn full-time
  - Beginning 1 week after surgery, okay to remove boot for gentle ankle/foot motion exercises
  - If placed into a splint, leave splint in place and avoid ankle range of motion
- **Range of Motion:**
  - Active ankle/foot ROM starting 1 week after surgery (unless splint is in place)
- **Therapeutic Exercises**
  - Quad/Hamstring isometrics, heel slides, straight leg raises, co-contractions
  - Isometric hip abduction and adduction exercises

### Phase 2 (Weeks 2-6)

- **Weightbearing:** Advance to weight-bearing as tolerated for ambulation in boot
- **Fracture Boot:** Worn for ambulation. Remove boot when at rest/sleeping and for PT.
- **Range of Motion:** Active, Active-Assist, and gentle Passive ankle/foot/toe ROM
- **Therapeutic Exercises**
  - Continue Phase 1 exercises
  - May begin low-resistance stationary bicycle without boot
  - Okay to begin blood flow restriction therapy

### Phase 3 (Weeks 6-12)

- **Weightbearing:** Full weightbearing, wean from boot for ambulation
- **Fracture Boot:** Wean from boot and discontinue when able
- **Range of Motion:** Continue ROM exercises to ankle/foot/toes
- **Therapeutic Exercises**
  - Begin elliptical trainer, treadmill, and high-resistance stationary bicycle
  - Begin leg presses and open/closed-chain strengthening exercises
  - May return to road cycling and swimming when surgical sites are **fully** healed

### Phase 4 (Weeks 12-26)

- **Weightbearing:** Full weightbearing.
- **Range of Motion:** Maximize ankle/foot/toe ROM
- **Therapeutic Exercises**
  - Continue Phase 3 exercises
  - Increase impact-based activities as tolerated
- Return to sports/athletics once cleared by Dr. Gross