



## Jeremy L. Walters, D.P.M.

### Foot and Ankle Specialist

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## ORIF Ankle Fracture

**For the Clinician:** The intent of this protocol is to provide the clinician with a guideline of the post-operative rehabilitation for the patients who undergo therapy for an Ankle Fracture repair. It is not intended to be a substitute for clinical decision making regarding the progression of a patient's post-operative course based on their examination/findings, individual progress, and/or the presence of post-operative complications. If a clinician requires assistance in the progression of a post-operative patient, they should consult with the referring surgeon.

**For the Patient:** The timeframes for expected outcomes contained within this guideline may vary from patient to patient based on individual differences, surgical techniques, surgeon's preference, additional procedures performed, and/or complications. Compliance with all the recommendations provided by your physician and physical therapist as well as your active participation in all parts of the rehabilitation process, are essential to optimizing the success of your procedure.

### Week 2-6

Dorsiflexion to Neutral

AROM for ankle, subtalar, midtarsal joints within pain tolerance

- Ankle alphabet
- Toe crunches
- Inversion/eversion
- Towel stretch

Control edema

Initiate protected weight bearing in CAM boot around week 4-6



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### Week 6-8

Control edema

Gait Training with proper quads activation, symmetrical weight bearing

Stationary Bike

Continue to increase AROM and PROM

Dorsiflexion stretches

Theraband DF/PF/INV/EV in open chain

Seated heel raise

Leg extension, curl

Wall stretches with knee flexed and extended

Proprioception training

### Greater than 8 weeks s/p ORIF

Continue to progress as tolerated

Stairmaster

Continue gait training

Sport and Job specific training