

## ADVANCED ANKLE REHAB PROTOCOL

### EVALUATION & TREATMENT:

- Begin progressive weight-bearing strengthening exercises, with focus on:
  - Leg press (Double leg and single leg, progressing towards strength of non-affected limb)
  - Squats
    - Optimize form, with knees over feet and prevention of valgus thrust
    - Avoid deep squats/hyperflexion (beyond 100 degrees)
    - Add weight, progress reps as tolerated
  - Step ups and side step up/downs ® Advance to lunges and side lunges
  - Stationary bike (60 RPM minimum with increasing resistance)
  - Calf raises (double leg → single leg → single leg w/ weights)
  - Balance/proprioception: static and dynamic balance activities
  - Slide board (if available)

- Please clear for/advance to straight ahead running only when operative side GS/TA strength = 70% strength of contralateral/non-operative side

- Manual muscle testing should not be used alone to estimate
- Single leg weighted calf raises: E.g. if non-op sided reps for a given weight=20, and operative-sided reps=15, then strength estimate is 75%
- Encourage initial running to be light jogging on soft surfaces (e.g. rubberized track, running shoes on dry field, soft treadmill) before advancing to trail running or pavement

- Please clear for/advance to agility exercises (plyometrics, jumping, landing, lateral movements, sports-specific exercises) only when op side GS/TA strength = 90% strength of non-op side

- Will re-assess for full return to sports between 4.5 months - 6 months post-op/post-injury follow-up

- **Please provide patient w/most recent PT note, to facilitate MD correlation of PE findings to results of dynamic testing (% strength? / Symmetrical balance/performance w/ agilities)**



COASTAL  
ORTHOPEDIC  
Associates