

Ankle Arthroscope

****DISCLAIMER:** Total length of rehab will vary depending upon the following factors: severity or acuteness of injury, age, health, or personal goals of the patient.

Phase I: 0 – 3 weeks

Goals for Phase I:

1. Swelling and pain control
 2. Normal gait
 3. Functional ROM
 4. Functional strength
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- A. Orthotics: Patient is immobilized in a walking boot as directed by the physician. (if boot not ordered, progress with gait and then ex as tolerated (use ASO or air cast for gait if boot not ordered)
 - B. Gait-training: Patient should be progressed from WBAT with crutches to FWB without crutches
 - C. ROM: Work to restore full A/PROM of ankle joint
 - D. Strengthening: Begin with AROM, progress to PRE's (isometrics, thera-band, heel lifts etc), weight-bearing activities as tolerated, conditioning activities (bike, treadmill)
 - E. Soft tissue management: wound monitoring (avoid getting stitches wet), swelling control, desensitization, scar massage
 - F. Modalities: Utilize for pain, inflammation, swelling control, and muscle re-education as necessary

Phase II: 3 - 6 weeks

1. Normal ROM
 2. Good strength
 3. Begin work/sports activities
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- A. Orthotics: Rocket-sock or air-cast used for stability as needed
 - B. ROM: Continue ROM as needed
 - C. Strength: More aggressive PRE's, weights, single leg activities etc.
 - D. Balance/Proprioception: balance beam, BAPs board, etc.
 - E. Functional activities: Begin sports/work activities (climbing, stairs, jogging, carioca's, triple jump, zig-zags etc.)

Phase III: 6 weeks to release

Goals for Phase III:

1. Normal strength
 2. Return to work/sports
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- A. Continue strengthening/conditioning/functional activities as needed