Lateral Ankle Reconstruction/Brostrom with Reconstruction/Internal Brace
Postoperative Protocol

**Postoperative Week 0-2**
**Goals:**
- Protect healing tissue: postoperative posterior splint
- Maintain and progress strength of nonoperative joints (knee, hip, UE)
**Treatment:**
- Nonweight-bearing with crutch use
- Elevation above the heart “toes above the nose” for edema control
- Pain control:
  - NO RANGE OF MOTION (ROM) or STRENGTHENING OF THE OPERATIVE ANKLE
  - Upper body strengthening: arm pulley
  - Hip strengthening: all planes, open chain
  - Knee strengthening: quad sets, SLR
  - Core strengthening, isometrics
- Consider UBE for cardiovascular conditioning

**Post-Operative Week 2-4**
**Goals:**
- Protect healing tissue
- Progress WBAT with the use of the pneumatic walking boot and crutches as needed
- FWB in the boot at 4-week mark without the use of crutches. Normalized gait
- Continue general strengthening of the LE, UE and core as indicated
- Progress ankle-specific exercises
**Treatment:**
- Progress to FWB without assistive device with focus on normal gait patterning IN BOOT ONLY.
  - Remove boot for beginning open chain AROM exercises for dorsiflexion and 75% plantar flexion without resistance.
- Modalities to help control/decrease inflammation and pain
- Begin ankle ROM
  - Dorsiflexion
  - Avoid passive inversion and eversion
  - Avoid full-range plantar flexion
- Begin ankle-strengthening exercises
  - Isometrics all directions - submaximal
- Intrinsics foot strengthening: toe curls
- LE, UE, core exercises
- Cardiovascular conditioning: UBE, LE stationary bike with boot on

**Post-Operative Weeks 4-8**
**Goals:**
- Protect healing tissues
- Wean out of boot weeks 4-6 and into a shoe with the use of prescribed ankle brace
  - DJO Velocity or BREG CTS™
- Progress ankle strength, ROM and proprioceptive exercises
- Continue general strengthening of LE, UE and trunk as indicated
**Treatment:** (patient to wear support throughout program)
- Normal gait patterning/training
Progress to full AROM, all directions
Add LE closed chain exercises, single plane
Evaluate LE biomechanics, flexibility and strength bilaterally - identify deficits and areas that would increase long-term stress to reconstruction
Introduce proprioceptive exercises
  o Double leg ⟷ Single leg
  o Even ground only, no BAPS, BOSU or Wobble board
Light soft-tissue work
Modalities to control/decrease inflammation/pain
Cardiovascular training: exercise bike in the boot
  o Increase duration/intensity as tolerated

**Postoperative Weeks 8-12**
**Use of DJO Velocity or BREG CTS™ ankle brace throughout rehab**
**Goals:**
  • Normalized gait
  • Jogging/running introduced in brace between weeks 8-10
    o Prerequisites: no walking pain, adequate strength, full ROM
  • Plyometric exercises introduced in brace between weeks 10-12
    o Single plane only
    o Prerequisites: pain-free running with proper mechanics
  • Full functional ROM of the ankle
  • Patient demonstrates fair static and dynamic neuromuscular control

**Treatment:**
  • Progress closed chain exercises
  • Progress proprioceptive training
    o Static and dynamic balance progressing to varied surfaces as patient is able
  • Progress intrinsic ankle strength with PNF diagonals
  • Introduce functional, sport-specific exercises
  • Cardiovascular training: Continue exercise bike/elliptical, add treadmill (consider AlterG® if available), stair-stepper.

**Post-Operative Weeks 12-16**
**Transition from DJO Velocity/BREG CTS to lace-up ankle brace if needed**
**Goals:**
  • Patient to demonstrate full strength throughout full ROM
  • Patient to demonstrate fully restored static and dynamic neuromuscular control and kinesthetic awareness
  • Patient to return to all pre-injury exercise with the exception of full return to sport
  • Pass functional testing if returning to sport for final clearance

**Treatment:**
  • Increase intensity of exercise bike, elliptical, stair-stepper and treadmill
  • Progress to plyometric program to include dynamic, multiplanar exercises
  • Increase intensity and resistance in closed chain activities
  • Sport-specific drills
  • Multiplanar movements