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Note: Exercise prescription is dependent upon the tissue healing process and *individual* functional readiness in *all* stages. If any concerns or complications arise regarding the progress of any patient, physical therapy will contact the orthopedist.

PHASE I: ACUTE CARE PHASE: (Generally last 24-72 hours)

ΔExercises should be performed 2-3 times each day.

ΔGait Training: emphasize heel/toe gait

ΔWeight Shifting Activities (2-3 minutes)

ΔMotion and Stretching

ΔBike for ROM (5-10 minutes)

ΔSeated Wobble Board (2-3 minutes)

ΔSeated Achilles Towel Stretch (2-3 minutes)

ΔAlphabet, Circles, Calf Pumping with ankle elevated (2-3 minutes)

ΔIce with elevation (15-20 minutes)

ΔCRUTCHES-PWBAT - (Heel-Toe Gait Emphasized). D/C when non-antalgic gait

ΔBRACE/SUPPORT: Compression Tape (Open Gibney)

ΔDOCUMENTATION:

Pain Level (each eval/re-eval)

Neurovascular status

Swelling - Ecchymosis

Gait status - Functional Level

ROM

Status of Ankle Ligaments

Criteria for Progression to Phase II:

ΔFull Weight Bearing on Affected Lower Extremity Without Pain

ΔSwelling and Pain Controlled

PHASE II: BEGINNING FUNCTIONAL PHASE:

ΔCRUTCHES:WBAT - (May D/C Crutches when Gait is Near Normal)

ΔEXERCISE:

Bike –May progress to Nordic Track (10-20 minutes)
Gait Training
Functional Training /Lateral Shuffles, Carioca, Heel and Toe Walk.
Cone Walking, etc. (3-5 minutes)/Treadmill walking progression
Motion and Stretching, Gastroc and Soleus Stretching - Wedge Board
(3-5 minutes)
Alphabet, Circles, Calf Pumping with ankle elevated (as needed)

ΔStrengthening

Eversion in Plantar Flexed Position (3 sets of 30)
Heel Raise Progression (3 sets of 30)

ΔProprioception / Balance Training

Standing Wobble Board (BAPS) - (3-5 minutes)
One Legged Standing Exercises - (3 exercises for 2-3 minutes each)
Stork Stand, Airplane, Opposite Leg Sports Cord,
Body Blade, Plyoball, Trampoline Ball Catch

ΔIce with elevation (15-20 minutes)

BRACE/SUPPORT:Ankle Taping For Support (only as needed)

NOTE:Criteria for Progression to Phase III:

1. *Single Leg Hopping is Pain Free*
2. *Ankle has Full ROM*

PHASE III: INTERMEDIATE FUNCTIONAL PHASE:

ΔEXERCISE:

ΔWarm-up on bike or stairmaster and do general LE stretching (5-6 minutes)

ΔFunctional Training Progression (4 Exercises - 2-3 minutes each)

Lateral Shuffles, Carioca Jog, Figure 8 Jog, Zigzag Jog
Plyoball hop, Trampoline hop, Cone Hop, Jumping Rope

ΔStrengthening

Eversion in Plantar Flexed Position to Muscle Failure (3 sets of 20)

ΔProprioception / Balance Training

BAPS (3-5 minutes)
Body Blade, Sports Cord, Airplane - Eyes Closed (3-5 minutes total)
Jogging Progression

ΔIce as needed (10-15 minutes)

ΔBRACE/SUPPORT:Ankle Taping For Support (only as needed)

ΔDOCUMENTATION:

Pain Level
Swelling - Ecchymosis
Gait status - Functional Level
ROM
Strength
Status of Ankle Ligament

NOTE: Criteria for Progression to Phase IV:

1. *Lateral Hop is > 80% contralateral side*
2. *Ankle has Full Strength*
3. *Jog 1-2 miles without limp/pain*

PHASE IV: ADVANCED FUNCTIONAL PHASE:

ΔEXERCISE:

Warm-up on bike or stairmaster and do general LE stretching (5-6 minutes)
ΔFunctional Training Progression (4 Exercises - 2-3 minutes each)
Grid Hop, Carioca run, Figure 8 Run, Crossover Cut, Zigzag Hop,
Plyometric Directional Hop, Straight Cut, Side to Side Hop
ΔProprioception / Balance Training
BAPS (3-5 minutes)
Body Blade, Sports Cord, Karate Stand – Eyes Closed (3-5 min total)
ΔBRACE/SUPPORT: Ankle Taping For Support (only as needed)

GOALS: *Functional Testing - Lateral Hop \geq 90% contralateral*

We value the assessments and inputs of our patients therapists.
Please update our office with progress notes via fax or email.

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